

Flora medica

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From the journals, March–April 2006

New Eng J Med Vol 354

1001 A cure for most people with chronic hepatitis B infection — entecavir, a distinct advance on lamivudine.

1021 Don't be too surprised if thalidomide appears on the treatment list of a myeloma patient — it prolongs survival if given at the start of treatment, and works well in the elderly (*Lancet* page 825), but has a lot of side-effects.

1130 Patients over 70 who are taking antidepressants have a 68% chance of getting depressed again if they stop, reduced to 37% if they carry on. Continued psychotherapy makes no difference.

1157 A good review of acute confusional states (delirium) in the elderly. They can resolve completely with treatment of the cause, or mark a steep decline in a dementing process.

1231 An important pragmatic study from the STAR*D series shows that a third of patients who don't respond to one serotonin reuptake inhibitor (SRI) antidepressant will respond to a different one, or by changing to venlafaxine or bupropion.

1243 Another study from the series looks at adding another agent to the SRI citalopram — and again a third of patients benefited, this time from the addition of buspirone or bupropion.

1343 An old-fashioned egg-based vaccine has now been proved to provide antibodies to H5N1 influenza, should it ever become pandemic. Let's hope there are enough eggs about.

Lancet Vol 367

839 Azathioprine for eczema? It seems a bit drastic, but it worked in this double-blinded trial for moderate-to-severe eczema. Toxicity can be minimised by keeping an eye on levels of thiopurine methyltransferase activity.

1008 If you encourage 1.2 billion people to visit the same desert city in the same month, even once in a lifetime, there are bound to be problems. The health hazards of the pilgrimage to Mecca are reviewed here.

1057 If you get advanced Alzheimer's disease, donepezil may help to keep it static. Is that good news?

1075 In this UK general practice-based 'self-controlled case-series' (a model of restraint), the risk of getting a deep vein thrombosis or pulmonary embolus seems to be greater if you have urinary infection than a respiratory infection.

JAMA Vol 295

1135 A study from Costa Rica shows that two or three cups of coffee a day reduce the risk of non-fatal myocardial infarction in most people, but the authors dwell on the minority

who are slow caffeine metabolisers and have a slightly increased risk.

1142 A single dose of azithromycin will not prevent thousands of children going blind from trachoma: can we spare them a few pence for another dose or two?

Arch Intern Med Vol 166

515 If somebody tries to attribute your elderly patient's falls or faints to 'carotid sinus hypersensitivity', you can point out that it's present in 39% of non-falling people over 65.

536 Another study of telephone support for smoking cessation from the US, showing that it helps more than waiting for them to come back to the doctor.

580 A study showing that all patients in this US community who carried methicillin-resistant *Staph aureus* or vancomycin-resistant enterococci had either been in hospital and/or taken antibiotics during the previous year.

610 An amusing study showing that the only time you acquire any cardiology skills is during medical school: there is no difference thereafter in any grade of doctor, right up to the seasoned cardiologist. For detecting real rather than imaginary third heart sounds, however, specialists have a slight edge (page 617).

640 Will science ever allow us to give antibiotics for the right sore throats? Yes, say these Swiss investigators, who used a rapid streptococcal antigen test and found it cost-effective.

Ann Intern Med Vol 144

381 A Norwegian study showing that smoking kills as many women as men from lung cancer, but fewer from cardiac disease.

390 In patients admitted with exacerbations of chronic obstructive pulmonary disease, no fewer than 25% had evidence of recent pulmonary embolism.

Guest publication: *QJM* Vol 99

This is the *Quarterly Journal of Medicine*, which of course appears monthly. Its papers are of high quality and general interest (page 245: Chronic kidney disease patterns in the UK), and always ends with a wise and entertaining Coda by John Launer. This month he gives us The descent of man, loosely in the manner of *Genesis* — e.g. v.7 'Now the bilateria begat two great nations of worms who were the protostomes.' More usually he describes the life-forms of general practice.

Plant of the Month: *Lonicera x americana*

The first big climbing honeysuckle to flower, filling the evening garden with honey and spice.

- Educational Agenda Task Group: working on how best to implement the Agenda in the European countries and to get the content of the Educational Agenda not only on the bookshelf but into the work of every teacher in general practice throughout Europe within the next 2 years.
- Assessment Issues Taskforce: this group will develop a basic, practical course for the average teacher in general practice on assessment, including feedback and evaluation of courses.
- Educational Research Taskforce: working to develop activities to be managed beginning with the joint EGPRN-EURACT meeting in Malmo and Copenhagen, May 2006. The taskforce is also looking at what is missing as evidence in educational research and what is special in research in medical education.

For more information visit the EURACT website (www.euract.org).

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