

IN OTHER JOURNALS

Back to the bedside

When his medical students queried the importance of physical examination in caring for patients already admitted to hospital, an experienced physician-educator in the USA sought directly relevant evidence-based data. Finding none, he has filled the gap admirably with, literally, his own hands. Dr Brendan Reilly conducted a daily bedside assessment of 100 consecutive patients admitted by a general medical service team at a public teaching hospital. An independent panel confirmed that, in one out of four cases, his findings led to a revised diagnosis and a major change in clinical management. Bedside is bedrock! Or, as Dr Reilly put it, “the practice of evidence-based medicine is the practice of medicine, not the practice of evidence”.

Lancet 2003; 362: 1100-1105

Of genes and gender

Australian researchers may have found out why men are predisposed to atherosclerosis — not because they lack “helpful” oestrogen, but because they have “unhelpful” testosterone on board. Using a range of techniques, the researchers discovered that dihydrotestosterone acts on the human macrophage in a gender-specific way. In macrophages derived from male donors, androgens led to increased expression of atherosclerosis-related genes and a net increase in cholesteryl ester accumulation. Such effects were not seen in macrophages derived from female donors.

J Am Coll Cardiol 2003; 42: 1306-1313

Call for sick cover

UK authors suggest that providing adequate cover for junior doctors who are sick with an infectious illness is one measure that could help protect patients from undesirable exposure to iatrogenic risk. Another would be to encourage doctors to use hospitals' occupational health services.

The authors conducted a survey of junior hospital doctors who worked in a large teaching hospital in 1993, and repeated the survey in 2001. Over a 6-month period, most of the doctors had one or more episodes of infectious illness (eg, an URTI or vomiting and/or diarrhoea). At the time of the later survey, more doctors were taking at least some sick leave; however, most still stayed at their posts or returned while still sick. When asked why they had done so, concern about consultant pressure and increasing colleagues' workloads were commonly cited.

Occup Environ Med 2003; 60: 699-700



Mummy speak

Rehydrated tissue obtained from a paravulval skin lesion in a 16th-century mummy of noblewoman Mary of Aragon has provided direct evidence that human papillomavirus (HPV) infection existed at the time of the Renaissance. Not only was infection with the highly oncogenic HPV 18 detected but also JC9813 DNA, a recently “discovered” HPV with low oncogenic potential. The mummy is one of 38 housed in the sacristy of the Basilica of Saint Domenico Maggiore in Naples, Italy.

Lancet 2003; 362: 1160

Hip health

The Rotterdam Study, a cohort study of 7891 individuals aged 55 years or older, has linked long-term thiazide diuretic use with reduced risk of hip fracture. During a total follow-up of 58009 person-years, 281 hip fractures had occurred. Risk for fracture was reduced by about half in people who had been exposed to thiazides for more than one year. However, the protective effect disappeared after four months of stopping thiazide treatment. Study authors said thiazides may protect against hip fracture by reducing renal calcium clearance or by inducing metabolic alkalosis, thus inhibiting bone resorption.

Ann Intern Med 2003; 139: 476-482

Ulcer all-clear

According to Taiwanese researchers, maintenance treatment is not needed when managing patients with bleeding peptic ulcers associated with *Helicobacter pylori* — as long as *H. pylori* has been successfully eradicated and the ulcer has healed. In their randomised controlled trial involving 82 patients followed for 5 years, peptic ulceration did not recur in anyone, whether or not the subject had received one of three 16-week maintenance regimens (antacids, bismuth or famotidine).

Arch Intern Med 2003; 163: 2020-2024

Beer bellies are unreal

Czech researchers have challenged the popular notion that drinking beer leads to obesity. They compared waist-hip ratio (WHR) and body mass index (BMI) in 845 “exclusive” beer drinkers with the same values in 1144 non-drinkers. Taking other risk factors for obesity into account, beer intake was not related to WHR or BMI in men. In women, there was no link with WHR but a weak inverse association with BMI. Their paper stated that, at 155 L per person, the Czech Republic has the highest registered per capita beer consumption of any country.

Eur J Clin Nutr 2003; 57: 1250-1253

— Dr Ann Gregory, MJA