

AVIAN FLU: DRUG RESISTANCE

Drug-resistant avian influenza A (H5N1) viral infection is no longer just a theoretical prediction — it is a reality, with the recent report of a case of resistance to oseltamivir (Tamiflu).¹ A 13-year-old Vietnamese girl died 7 days after being admitted and treated for influenza A (H5N1) virus infection, despite receiving early, therapeutic doses of oseltamivir. She deteriorated from Day 4 after admission, suggesting that drug resistance developed during treatment. The case report authors said that new treatment strategies such as using higher doses and longer durations of antiviral therapy or combination therapy may deserve further evaluation. An accompanying editorial said that, in light of this frightening report, improper use of personal stockpiles of oseltamivir, which may promote resistance, should be strongly discouraged.²

1. *N Engl J Med* 2005; 353: 2667-2672

2. *N Engl J Med* 2005; 353: 2633-2636

OUT OF THIS WORLD

Australian researchers continue to boldly go where no others have gone before. Lacking any guidance from previous researchers, Lim and colleagues from Melbourne's Burnet Institute set out to answer the age-old question, "Where have all the bloody teaspoons gone?". They conducted regular weekly or fortnightly counts of 70 discreetly numbered teaspoons of differing quality that had been distributed among the institute's tearooms. After 5 months, four out of five teaspoons had disappeared, with the quality of spoon having had no effect on rate of loss. The Burnetians calculated the half-life of the teaspoons to be 81 days — ie, half had disappeared permanently by that time. As for where the spoons went, no definitive answer could be reached but it was speculated, among other possibilities, that the teaspoons had escaped to a spoonoid planet to live their equivalent of the good life.

BMJ 2005; 331: 1498-1500

DON'T PANIC, TRY EXERCISE

Aerobic exercise may have an acute anti-panic activity, according to German researchers. A small group of 15 healthy subjects without panic disorder received a panic attack-inducing intravenous injection of cholecystokinin tetrapeptide after experiencing 30 minutes of either quiet rest or exercise on a treadmill. Panic attacks occurred in 12 subjects after rest but in only six subjects after exercise. If this anti-panic effect of exercise can be confirmed in patients with panic disorder, acute exercise may offer another treatment option for this disorder.

Am J Psychiatry 2005; 162: 2376-2378

GOOGLE MEDICINE?

A Canadian biomedical librarian has advised the Internet search engine Google's founders to build a specific medical portal. Giustini says that such a portal — "call it Google Medicine" — might well be the badly needed, all-purpose interface that medicine needs to help us access the best available evidence. He envisages Google Medicine as a superior tool to the currently available Google Scholar (scholar.google.com), which indexes more peer-reviewed research than Google but still requires sifting for currency and quality. Like PubMed and Google, Google Scholar is free on the web.

BMJ 2005; 331: 1487-1488

**SLEEP APNOEA, SNORING AND THE DIDGERIDOO**

Playing a didgeridoo could be an effective treatment for patients with moderate obstructive sleep apnoea syndrome (OSAS), say Swiss researchers. They had embarked on a small proof-of-concept, randomised controlled study after a didgeridoo instructor reported, anecdotally, some beneficial effects. Daytime sleepiness and other measures were assessed in 25 non-obese adults with moderate OSAS randomised to either receive didgeridoo lessons and daily practice or to be on a waiting list for lessons. After 4 months, the researchers found reduced daytime sleepiness, reduced snoring and an improved apnoea-hypopnoea index in the didgeridoo group compared with the control group. Training of upper airways muscles may be responsible for the effects detected. Participants in the didgeridoo group used a standardised acrylic plastic didgeridoo — apparently these are easier for beginners to learn on than conventional wooden ones.

BMJ Online, 23 Dec 2005

CONCERNING GREEN TEA

A case of reversible hepatotoxicity associated with taking a Chinese green tea (*Camellia sinensis*) extract has been reported in the US. The 37-year-old woman had been using a weight-loss supplement with *C. sinensis* as the major ingredient. On two separate occasions a year apart, hepatotoxicity occurred within months of starting the supplement and resolved on cessation. The author of the report believes that large amounts or concentrated preparations of *C. sinensis* are dangerous and should be avoided.

Ann Intern Med 2006; 144: 68-71

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