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NEWS

Matthias Rath drops libel action against Guardian.
Boseley, S.

Pathology departments are still holding human tissue, report says.
Day, M.

Vatican newspaper reopens debate on defining death.
Day, M

Lancet withdraws research paper and warns authors about rules of “gift authorship”.
Dyer, C.

Campaigners seek release of Iranian doctors.
Moszynski, P.

Doctors must do more to identify child abuse, Dutch association says.
Sheldon, Y.

Israeli government wants better monitoring of children’s welfare, after three murders.
Siegel-Itzkovich, J.

Patients are less satisfied with robot assisted prostatectomy, survey shows.
Spurgeon, D.

Isotope shortage is limiting nuclear medicine across Europe.
Stafford, N.

Most children with vaccine allergies can be revaccinated, US experts say.
Tanne, J.H.

Spain may legalise assisted suicide, health minister says.
Villanueva, T.

Deaths from lung cancer in non-smokers are higher in men than in women.
Wise, J.

RESEARCH

Misperceptions and misuse of Bear Brand coffee creamer as infant food: national cross sectional survey of consumers and paediatricians in Laos.
Barennes, H., Todisoa Andriatahina, Vattanaphone Latthaphasavang, Margot Anderson, and Leila M Srour.

Implementation of computerised physician order entry (CPOE) and picture archiving and communication systems (PACS) in the NHS: quantitative before and after study.
Collin, S., Barnaby C Reeves, Jane Hendy, research fellow, Naomi Fulop, Andrew Hutchings, and Eugenia Priedane.

Quality of clinical aspects of call handling at Dutch out of hours centres: cross sectional national study.
Derkx, H.P., Jan-Joost E Rethans, Arno M Muijtjens, Bas H Maiburg, Ron Winkens, Harrie G van Rooij, and J André Knottnerus.

Exposure to antipsychotics and risk of stroke: self controlled case series study.
Douglas, I.J., and Liam Smeeth.

Adherence to Mediterranean diet and health status: meta-analysis.
Sofi, F., Francesca Cesari, Rosanna Abbate, Gian Franco Gensini, Alessandro Casini.

Drug eluting and bare metal stents in people with and without diabetes: collaborative network meta-analysis.

Ethnic stereotypes and the underachievement of UK medical students from ethnic minorities: qualitative study.
Woolf, K., Judith Cave, Trisha Greenhalgh, and Jane Dacre.

CLINICAL REVIEW

Management of sickle cell disease.
de Montalembert, M.

Investigating dyspepsia.
Zagari, R.M., Lorenzo Fuccio, and Franco Bazzoli.

ANALYSIS

Modern approaches to teaching and learning anatomy.
Collins, JP.
**NEWS**


Matthias Rath, a doctor who promoted nutritional supplements to people with HIV in South Africa and argued that antiretroviral drugs were harmful, has dropped a year long libel case against the Guardian newspaper and been ordered to pay costs. Dr Rath, a German born doctor who once worked in California on the possible therapeutic effects of micronutrients with the Nobel prize winner Linus Pauling and claimed to be his nominated successor, sued the newspaper over three articles written by Ben Goldacre in his column Bad Science. In articles published in January and February last year, Dr Goldacre described Dr Rath (not the only promoter of unproved nutritional therapies in a South Africa where the government was known to doubt the efficacy of antiretrovirals) as the “German vitamin impresario who claims that his vitamin pills are better for AIDS than medication.” The Dr Rath Foundation sells micronutrient supplements through a website . . .


Seven years on from the public inquiry into the retention of organs at Alder Hey, pathology departments are still routinely holding on to human tissue because they are unsure of what to do with it, a report by the Human Tissue Authority said this week. In the first comprehensive review of the 2004 Human Tissue Act—introduced in response to concerns about inappropriate retention of organs after postmortem examinations—the authority’s report said that disposal of human tissue remains a major problem. The review was based on site visits to 49 mortuaries in NHS hospitals and local authorities—targeted because initial administrative checks indicated that they might be high risk sites—carried out between 1 April 2007 and 31 March 2008. The authority also visited a random sample of low risk sites as a control check. It found that nearly a third of pathology departments visited “continue to retain material because they simply have . . .


A front page editorial in the Vatican newspaper, L’Osservatore Romano, has reopened the debate on what constitutes the end of life, 40 years after the widely accepted Harvard report that established the concept of brain death. The editorial, in the 2 September edition, declares that life might continue after the brain dies. It says that the current, almost universally accepted definition published by Harvard doctors in 1968 “is in contradiction to the concept of the person according to Catholic doctrine.” Before the influential US report was published, death was defined by the absence of a heart beat and breathing. The change brought by the Harvard report (JAMA 1968;205:337-40) enabled the church to sanction the switching off of life support machines. However, the key beneficiary of the definition of the end of life as brain death, the newspaper article says, has been organ transplantation. It notes, too, that the . . .


The Lancet has retracted a paper by researchers at the Medical University of Innsbruck in Austria after an official investigation found that the clinical trial it reported had serious ethical and procedural flaws. Austria’s Agency for Health and Food Safety says that the urologists who conducted the trial of stem cell treatment for stress incontinence in women failed to get proper ethical approval and neglected to adequately inform patients of the experimental nature of the procedures. In one case an insurance confirmation form seemed to have been forged. “In our view, the conclusions of this official investigation pinpoint so many irregularities in the conduct of their work that, taken together, the paper should be retracted from the published record,” the Lancet’s senior executive editor, Sabine Kleinert, and editor, Richard Horton, wrote in a comment in the journal this month (Lancet 2008;372:789-90). “In the report, the inspectors raise doubts . . .


Concern is growing for the welfare of two doctors who have been held without charge in Iran for almost three months. The two brothers, Arash and Kamiar Alaei, are both world renowned specialists in HIV and infectious diseases. Kamiar is currently a PhD candidate in New York, while Arash had been scheduled to speak at the recent international AIDS conference in Mexico City, where numerous demonstrators drew attention to his absence. For more than a decade the Alaei brothers have fought for the prevention and treatment of HIV and AIDS and sexually transmitted infections and for drug related harm reduction to be integrated into Iran’s national healthcare system. The brothers’ work with drug addicts and prostitutes in Tehran featured in a BBC television documentary, Mohammed and the Matchmaker, in which Kamiar said: “We face a huge potential HIV problem in Iran, and in order to start to confront it . . .


The Dutch Medical Association is urging its members to speak out if they suspect child abuse. Between 100
000 and 170 000 cases, resulting in at least 50 deaths, are believed to occur in the Netherlands each year. But only about 2% of reports in 2007 originated from doctors. Peter Holland, the association’s chairman, said, “There are far too few reports of child abuse by doctors, and there must now be a real change.” The association argues that doctors, through their special contact with families and children, bear a great responsibility and can make an important contribution in identifying children who are at risk. It has unveiled a new child abuse reporting code that puts the emphasis firmly on reporting abuse. Its previous code, drawn up in 2002, followed the principle that doctors should keep silent unless they had.


After the murders of three preschool children in the space of a few weeks, Israel’s government is to seek better ways to monitor children between the time they finish getting their vaccinations before the age of 2 years and their entry into kindergarten at 5 or school at 6. The mothers of two of the children have been charged with the children’s murder, while the grandfather of a third has been arrested and is expected to be charged this week. Israeli children are not bound by law to attend formal education until the age of 5.5, making it difficult for the authorities to detect possible family, social, or developmental problems. To help identify children who are at risk of violence or negligence in the home, the welfare and social services ministry wants to require parents to bring their children to a family health centre twice a year. At present taking the children to a family health centre twice a year is recommended. “There are far too few reports of child abuse by doctors, and there must now be a real change.” The association argues that doctors, through their special contact with families and children, bear a great responsibility and can make an important contribution in identifying children who are at risk. It has unveiled a new child abuse reporting code that puts the emphasis firmly on reporting abuse. Its previous code, drawn up in 2002, followed the principle that doctors should keep silent unless they had.


Men who opt for robot assisted laparoscopic radical prostatectomy are around four times as likely to be dissatisfied with their decision as men who choose open retropubic surgery, new research indicates. The study, which assessed the emotional effects on patients of the two approaches to prostatectomy, involved cross sectional surveys of 400 patients (with a 61% response rate) who underwent radical prostatectomy between 2000 and 2007 (European Eurology doi:10.1016/j.eururo.2008.06.063). The researchers, from the Duke Prostate Centre at the Duke University Medical Center, in Durham, North Carolina, gathered data on sociodemographic information; information from the expanded prostate cancer index composite, a tool designed to evaluate function and disruption (“bother”); and expressions of satisfaction and regret. Their results showed that men who had undergone the robot assisted laparoscopic procedure were about three to four times more likely to be regretful and dissatisfied than those who underwent the open retropubic.


A worldwide shortage of medical isotopes used as radiotracers in molecular imaging will persist at least until the end of September, limiting European hospitals to between 20% and 40% of their usual nuclear medicine activities, the European Association of Nuclear Medicine warned this week. Wolfram Knapp, the association’s president elect, said that with three of the five global nuclear reactors supplying medical isotopes still shut down, it is too early to determine when supplies will return to normal. But he cautioned: “The end of September is a best case scenario.” In the meantime drug companies will have to ration deliveries of isotopes. Most hospitals receive isotope deliveries once a week, Dr Knapp said, but deliveries around Europe this week were generally about half of the normal quantities, and levels next week are expected to be even lower. Although 80% of molecular imaging investigations are not urgent and can be postponed.


Children who have had allergic reactions to previous vaccinations can usually be safely revaccinated, say new guidelines developed by a multicentre US team of experts in vaccine safety. When considering revaccinating a child, especially one who has had an immediate reaction, doctors should take a careful history and use skin testing or serum IgE testing, or both, to try to identify the cause of the reaction, advise the authors, led by Robert Wood of the Johns Hopkins Children’s Center, Baltimore. This is “particularly helpful in assessing risk regarding future immunisation and thereby minimising the risk for anaphylaxis,” they write (Pediatrics 2008;122:e771-7, doi:10.1542/peds.2008-1002). Unless a severe anaphylactic reaction has occurred, the authors say, a series of skin tests can be done, moving from a skin prick test to intradermal tests at progressively higher concentrations of the vaccine or its individual components. Whenever possible, testing should use the same.


Spain may see the legalisation of assisted suicide in the near future if proposed reforms of the law are carried out, the country’s health minister has said. End of life care in Spain is due for a major overhaul, said the minister, Bernat Soria, in an interview in the daily newspaper El Pais (www.elpais.com, 7 Sep, “Tu cuerpo es tuyo, eso es socialista” (“Your body is yours—that is socialist”). The reforms, which may include the legalisation of assisted suicide, are intended to reduce unnecessary suffering among patients, Dr Soria explained. He said, “The change will ensure that the
patient’s right to a dignified death becomes a real right. “We know that people die suffering. This cannot be. We are not going to win the battle against death, but we can win the battle against pain.” The government has been working on a national strategy for palliative care, he . . .


The death rate from lung cancer among lifelong non-smokers is higher in men than in women, a large data review has found. The research contradicts assertions that the risk of lung cancer in people who have never smoked is growing and that the incidence of the cancer is higher among non-smoking women than non-smoking men. The study pooled information from 13 large cohort studies that included more than 630 000 people for incidence analyses and 1.8 million people for mortality analyses (PLoS Med 2008;5(9):e185, doi:10.1371/journal.pmed.0050185). The studies spanned 1960 to 2004 and were based in North America, Europe, and Asia. They were supplemented with data from 22 cancer registries from 10 countries reported to have a low prevalence of smoking among women. The researchers looked at data specific to age, sex, and ethnicity (European, Asian, or black). Their results showed that in people of European descent who . . .

RESEARCH


Of the 26 paediatricians, 24 said that parents “often” or “sometimes” fed this product to infants as a substitute for breast milk. In the capital city, paediatricians said that mothers used the product when they returned to work. In the countryside, they reported that poor families used it when the mother was ill or died. Of 1098 adults surveyed, 96% believed that the can contains milk; 46% believed the Bear Brand logo indicates that the product is formulated for feeding to infants or to replace breast milk; 80% had not read the written warning on the can; and over 18% reported giving the product to their infant at a mean age of 4.7 months (95% confidence interval 4.1 to 5.3). Conclusion The Bear Brand coffee creamer is used as a breast milk substitute in Laos. The cartoon logo influences people’s perception of the product that belies the written warning “This product is not to be used as a breast milk substitute.” Use of this logo on coffee creamer is misleading to the local population and places the health of infants at risk.


CPOE was associated with a reduction in the proportion of outpatient appointments at which full blood count (odds ratio 0.25, 95% confidence interval 0.16 to 0.40), urea and electrolytes (0.55, 0.39 to 0.77), and urine culture (0.30, 0.17 to 0.51) tests were ordered, and at which full blood count tests were repeated (0.73, 0.53 to 0.99). Conversely, the same system was associated with an almost fourfold increase in the use of urea and electrolytes tests among day case patients (3.63, 1.66 to 7.94). PACS was associated with a reduction in repeat plain x ray films at outpatient appointments (0.62, 0.44 to 0.88) and a reduction in inpatient computed tomography (0.83, 0.70 to 0.98). Conversely, it was associated with increases in computed tomography requested at outpatient appointments (1.89, 1.26 to 2.84) and computed tomography repeated within 48 hours during an inpatient stay (2.18, 1.52 to 3.14). CPOE and PACS were associated with both increases and reductions in tests and examinations. The magnitude of the changes is potentially important with respect to the efficiency of provision of health care. Better information about the impact of modern IT is required to enable healthcare organisations to manage implementation optimally.


Percentages of clinical obligatory questions asked and items within home management and safety net advice, both in relation to pre-agreed standards, and of care advice given. The telephone incognito standardised patients presented seven clinical cases three times each over a period of 12 months, making a total of 357 calls. The mean percentage of obligatory questions asked compared with the standard was 21%. Answers to questions about the clinical condition were not always correctly evaluated from a clinical viewpoint, either by triagists or by general practitioners. The quality of information on home management and safety net advice varied, but it was consistently poor for all cases and for all out of hours centres. Triagists achieved the appropriate. In determining the outcome of the care process, triagists often reached a conclusion after asking a minimal number of questions. By analysing the quality of different phases within the process of telephone triage, evaluation of whether an appropriate triage outcome has been arrived at by means of good

BMJ - Vol.337(7670)&(7671), 13 & 20 September, 2008 5
clinical reasoning or by an educated guess is possible. In terms of enhancing the overall clinical safety of telephone triage, apart from obtaining an appropriate clinical history, adequate home management and safety net advice must also be given.


Use of any antipsychotic drug was associated with a rate ratio for stroke of 1.73 (95% confidence interval 1.60 to 1.87): 1.69 (1.55 to 1.84) for typical antipsychotics and 2.32 (1.73 to 3.10) for atypical antipsychotics. In patients receiving any antipsychotic drug, the rate ratios were 3.50 (2.97 to 4.12) for those with dementia and 1.41 (1.29 to 1.55) for those without dementia. All antipsychotics are associated with an increased risk of stroke, and the risk might be higher in patients receiving atypical antipsychotics than those receiving typical antipsychotics. People with dementia seem to be at a higher risk of an associated stroke than people without dementia and use of antipsychotics should, when possible, be avoided in these patients.


Studies reviewed Studies that analysed prospectively the association between adherence to a Mediterranean diet, mortality, and incidence of diseases; 12 studies, with a total of 1 574 299 subjects followed for a time ranging from three to 18 years were included. The cumulative analysis among eight cohorts (514 816 subjects and 33 576 deaths) evaluating overall mortality in relation to adherence to a Mediterranean diet showed that a two point increase in the adherence score was significantly associated with a reduced risk of mortality (pooled relative risk 0.91, 95% confidence interval 0.89 to 0.94). Likewise, the analyses showed a beneficial role for greater adherence to a Mediterranean diet on cardiovascular mortality (pooled relative risk 0.91, 0.87 to 0.95), incidence of or mortality from cancer (0.94, 0.92 to 0.96), and incidence of Parkinson’s disease and Alzheimer’s disease (0.87, 0.80 to 0.96). Greater adherence to a Mediterranean diet is associated with a significant improvement in health status, as seen by a significant reduction in overall mortality (9%), mortality from cardiovascular diseases (9%), incidence of or mortality from cancer (6%), and incidence of Parkinson’s disease and Alzheimer’s disease (13%). These results seem to be clinically relevant for public health, in particular for encouraging a Mediterranean-like dietary pattern for primary prevention of major chronic diseases.


Network meta-analysis with a mixed treatment comparison method to combine direct within trial comparisons between stents with indirect evidence from other trials while maintaining randomisation. Overall mortality was the primary safety end point, target lesion revascularisation the effectiveness end point. 35 trials in 3852 people with diabetes and 10 947 people without diabetes contributed to the analyses. Inconsistency of the network was substantial for overall mortality in people with diabetes and seemed to be related to the duration of dual antiplatelet therapy (P value for interaction 0.02). Restricting the analysis to trials with a duration of dual antiplatelet therapy of six months or more, inconsistency was reduced considerably and hazard ratios for overall mortality were near one for all comparisons in people with diabetes: sirolimus eluting stents compared with bare metal stents 0.88 (95% credibility interval 0.55 to 1.30), paclitaxel eluting stents compared with bare metal stents 0.91 (0.60 to 1.38), and sirolimus eluting stents compared with paclitaxel eluting stents 0.95 (0.63 to 1.43). In people without diabetes, hazard ratios were unaffected by the restriction. Both drug eluting stents were associated with a decrease in revascularisation rates compared with bare metal stents in people both with and without diabetes. In trials that specified a duration of dual antiplatelet therapy of six months or more after stent implantation, drug eluting stents seemed safe and effective in people both with and without diabetes.


Participants believed the student-teacher relationship was vital for clinical learning. Teachers had strong perceptions about “good” clinical students (interactive, keen, respectful), and some described being aggressive towards students whom they perceived as quiet, unmotivated, and unwilling. Students had equally strong perceptions about “good” clinical teachers (encouraging, interested, interactive, non-aggressive).
Students and teachers had concordant and well-developed perceptions of the “typical” Asian clinical medical student who was considered over-reliant on books, poor at communicating with patients, too quiet during clinical teaching sessions, and unmotivated owing to being pushed into studying medicine by ambitious parents. Stereotypes of the “typical” white student were less well developed: autonomous, confident, and outgoing team player. Direct discrimination was not reported. Asian clinical medical students may be more likely than white students to be perceived stereotypically and negatively, which may reduce their learning by jeopardising their relationships with teachers. The existence of a negative stereotype about their group also raises the possibility that underperformance of medical students from ethnic minorities may be partly due to stereotype threat. It is recommended that clinical teachers be given opportunities and training to encourage them to get to know their students as individuals and thus foster positive educational relationships with them.

**CLINICAL REVIEW**


Summary points
- Care for patients with sickle cell disease requires a network of doctors.
- Patients with sickle cell disease should receive annual follow-up investigations, such as blood counts, hepatic and renal tests, transcranial Doppler ultrasonography for children, heart and liver ultrasonography.
- Immunisation is needed for pneumococcus, Haemophilus influenzae type B, meningococcus, and influenza virus.
- The most frequent complications are painful crises, acute anaemia, and infections.
- Patients sometimes need admission to intensive care, in particular for treatment of refractory pain and for exchange transfusion.
- Patients and their families need education and support.
- Genetic counselling and prenatal diagnosis may be offered to at-risk couples.

Dyspepsia is a complex condition comprising chronic and recurrent symptoms related to the upper gastrointestinal tract. The cardinal symptoms are epigastric pain and discomfort, including postprandial fullness and early satiety, which may overlap with heartburn and regurgitation. Box 1 shows the various definitions of dyspepsia. Around 25-40% of adults in the general population have dyspepsia, and dyspepsia accounts for 2-5% . . .

**ANALYSIS**


Recent reports from the United Kingdom and Australia claim the teaching and learning of anatomy in universities is in crisis. This is attributed to less time being allocated to the subject and decreased opportunities to dissect cadavers. Although everyone would agree anatomy is important, few lament the move . . .