

An Occasional Medical *Newsletter* **from The Blood Care Foundation**

Dear Member,

This 18th will be last of my occasional Newsletters, which you will receive during this millennium. I realise that this is not strictly true, as the second millennium does not actually end until the 31st December 2000, but that is not the way we are allowed to view things. So, firstly may I take this opportunity of wishing you a very Happy and Blessed Christmas and an excellent millennium celebration. This brings me to my second point, which is one of caution. I am sure we have all taken every sensible precaution to ensure that the Y2K bug will not bite us. However, there may be places where such action has not been taken. It might be worthwhile pointing out to your staff, who are stationed in the more remote parts of the world, that they should be especially careful around the time of the millennium, as airports may be closed and so blood deliveries may be delayed.

Mefloquine and Malaria Prophylaxis

Neuropsychiatric reactions to mefloquine (Lariam) occur in between 1 in 10,000 and 1 in 20,000 patients. To minimise the chances of someone having to discontinue taking their malaria prophylaxis when at risk, it is advised that they start taking mefloquine 2 to 3 weeks prior to travel. Full guidance was issued in the CDR review and a summary can be found on the MCA/CSM web page, www.open.gov.uk/mca/mcahome.htm. (CDR review. 1997;**7(10)**:R137-52. *Current Problems in Pharmacovigilance*. 1999;**25**:15)

Renal Failure and Chinese Medicines

Chinese herbal medicines containing *Aristolochia* have been associated recently in the UK with 2 cases of end-stage renal failure. The importation of medicines containing *Aristolochia* into the UK has now been banned. *Aristolochia* is sometimes substituted for other non-toxic plant material such as *Stephania*, *Akebia* and *Clematis*. Two such substitution have occurred in medicines called Mutong and Fangji. (*Lancet*. 1999;**354**:481-2)

Swimming in Lake Malawi

The diving in Lake Malawi is said to be some of the best and cheapest in the world. However, the dangers of catching *Schistosoma haematobium* are not well understood as has been well illustrated in a recent article prepared for the British Travel Health Association. What is more worrying is that most travellers regard the disease as simply a minor nuisance and they do not understand the possible fatal consequences or the unpleasantness of the treatment. (*Travel Wise*. 1999;**5**:4)

COX 2 Inhibitors

The selective cyclo-oxygenase-2 (COX 2) inhibitors were heralded as a new range of analgesics, which would not have the unpleasant side effects associated with the traditional non-steroidal anti-inflammatory drugs. It now appears that COX 2 inhibitors are as likely as other drugs to attack the stomach lining. It was thought that COX 1 catalysed the production of protective prostaglandins whilst COX 2 aided the synthesis of inflammatory ones. This has proved not to be true and a quarter of the patients in a recent trial experienced side effects such as gastroduodenal ulcers, delayed wound healing and perforated ulcers. However it is not all bad news, as COX 2 inhibitors may have an anticancer effect. (*Nature Medicine*. 1999;**5**:1348-9 and 1415-23)

MMR Vaccine

There has been a great deal of worry lately that MMR vaccine may cause autism and/or Crohn's disease. The reports of the CSM Working Party and the MCA study in the North Thames region are now available. Neither supports the hypothesis that MMR vaccine is causally associated with autism or Crohn's disease and both agree that, on all the available evidence, the benefits of MMR vaccine far outweigh any possible risks. The full report, together with all the other data from *Current Problems in Pharmacovigilance* are now available at www.open.gov.uk/mca/cuprblms.htm

St John's Wort

The Irish Medicines Board has decided to make St John's wort a prescription only medicine. The active ingredient for the treatment of depression is thought to be a monoamine oxidase inhibitor. The Board fears that this could provoke a dangerous hypertensive crisis if taken with red wine or cheese. (*Pharmaceutical Journal*. 1999;**263**:844)

Alcohol and Coronary Artery Disease

Rimm and colleagues have brought a spot of Christmas cheer to those of us who enjoy a glass of wine on festive occasions. They conducted a meta-analysis of all the major studies of alcohol consumption and heart disease. They showed that the beneficial effects of alcohol are mediated through changes in the concentrations of high-density lipoprotein cholesterol, fibrinogen and triglyceride. They estimate that, with an average daily intake of 30g of alcohol a day, there is a 24.7% reduction in the risk of coronary heart disease. Now I can happily have my 3 glasses of wine. (*BMJ*.1999;**319**:1523-8)

HIV in Pregnancy

The management of HIV in pregnancy has two aims. Firstly there is a need to provide the mother with ongoing treatment. Secondly it is important to minimise the risk of vertical transmission to the child. Recent advice is that the mother should be treated with combination chemotherapy, the child should be delivered by Caesarean section and that breast-feeding should be avoided. However, as over 70% of pregnant women in the UK who are HIV positive, are undiagnosed at the time of delivery, efforts must be made to reduce the number of undiagnosed cases. (*Drugs and Therapeutics Bulletin*. 1999;**37**(9):65-7)

Breast Feeding, IQ and Leukaemia

A recent article reports that breast fed babies had, on average, a three-point advantage in IQ over bottle-fed contemporaries. This was most marked in pre-term infants. However the authors were unable to decide whether factors such as social class and maternal education played any part in the differences observed. The same arguments could apply to the emerging evidence that breast-feeding reduces the risk of childhood leukaemia. A large case-controlled study of over 2,000 children suggests that breast-feeding reduces the risk of leukaemia by about 20%. The effect is most noticeable in children who were breast fed for more than 6 months. The immunological benefits conferred by breast feeding make this a plausible theory. (*Am.J.Clin.Nutrition*. 1999;**70**:433-4 and *J.Nat.Cancer Instit*. 1999;**91**:1765-72)

Monday, 08 December 2003

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