

**An Occasional Medical Newsletter
from The Blood Care Foundation
Number 59**

Dear Member,

Although many people believe that “Primum non nocere” or “First, do no harm” forms part of the Hippocratic Oath, it does not. It was probably first enunciated by the Roman physician, Galen. Whoever first said it matters not, because it is the watchword of every doctor today. To this end we must welcome the National Reporting and Learning System, which allows people working in the medical field to report “near misses” without fear of retribution. This will allow the national patient Safety Agency to identify areas where patients could be at danger and develop solutions before a tragedy occurs. Reports can be made anonymously at www.npsa.nhs.uk/staffreports.

The Value of Screening for Prostate Cancer.

As old age creeps on, chaps start to worry about “men’s problems”. Probably the major worry, apart from senile dementia, is prostate cancer. It was hoped that the introduction of the prostate specific antigen test (PSA) would help by identifying those people who have prostate cancer and those who do not. Unfortunately the high level of false positive results engendered by the test has probably caused more men to worry than was the case prior to its introduction. McNaughton-Collins and his colleagues compared 167 men who had had a positive PSA result, which had later been shown, by biopsy, to be a false positive, with 233 men who had had a negative PSA result. Their conclusion was that false positive PSA tests have a psychological cost, in that men receiving such results, even when subsequent biopsy has shown no malignancy to be present, are more worried about prostate cancer than those men who have an initial negative test. They also found that those men who had had a false positive result believed they were more likely to develop prostate cancer later in life. Given the high rate of false positives, might PSA testing be bad for your mental health? (*Am.J.Med.* 2004;**117**:719-25)

Rabies and Transplantation.

Following the report from Germany of six transplant recipients dieing from rabies which I mentioned in Newsletter No 56, a further report has come from the USA. In May last year four transplant recipients in Texas died from a mystery illness. Two had received a kidney, one a liver and one a vascular graft and all died within eight weeks. Investigators from the Centers for Disease Control and Prevention inoculated baby mice with samples from the patients. Examination of tissue from the mice’s central nervous system showed rabies particles. The donor, an apparently healthy male, died suddenly of a subarachnoid haemorrhage. It was only subsequently that his friends remembered that the donor had recently been bitten by a bat, the commonest source of rabies in the USA. Such cases should remind us of the importance of taking proper preventative measures when visiting areas where rabies is endemic as the resulting disease is invariably fatal. (*New Engl.J.Med.* 2005;**352**:1103-11)

Exercise is not Just Good for Your Weight.

80 adults with mild to moderate depression were randomly assigned to do structured exercise or none. Patients exercising at least three times per week for 30 minutes on a treadmill, raising the heart rate to 145 beats per minute, expended 350 kcal per session and also had a clinically relevant response of over 40% improvement. This trial confirmed earlier work by Blumental et al (*Arch.Int.Med.* 1999;**159**:2349-56) who showed that walking or jogging at 70 – 80% of maximal aerobic intensity was as effective as drug therapy in treating mild depression. (*Am.J.Prev.Med.* 2005;**28**:1-8)

Caffeine and Your Heart.

Caffeine, especially associated with excess drinking of coffee, has long been considered as a cause of atrial flutter and fibrillation. This has been questioned following a Danish study in which 50,000 middle-aged people were followed up for 6 years. Although, during the trial, about 1% developed atrial fibrillation or flutter there was no connection between caffeine intake and likelihood of showing symptoms. (*Am.J.Clin.Nut.* 2005;**81**:578-82)

Osteoporosis and Multiple Myeloma.

Although multiple myeloma is a relatively rare disease, a Danish group have recently published their findings that the "M" component in serum was found in one in 20 patients presenting with recent onset osteoporosis. Of those testing positive, just under 20% were subsequently diagnosed as suffering from multiple myeloma. The authors suggest that screening for the "M" component in serum should be part of the routine work-up for patients presenting with osteoporosis. (*Brit.Med.J.* 2005;**330**:818-20)

Trial of Labour after Caesarean Section.

What are the risks involved in allowing a female to have a trial of labour following a previous caesarean section? Landon and colleagues studied 33,699 pregnant patients who had previously had a section. 17,898 were allowed to have a trial of labour while the remaining 15,801 underwent and elective section, control group. The most serious complications were uterine rupture, which occurred in 0.7% of the trial group as opposed to 0% in the control group and stillbirth/neonatal death 0.38% v 0.13%. The authors concluded that the risks of trial of labour after a previous section are small but cannot be ignored. (*N.Engl.J.Med.* 2004;**351**:2581-9)

Reducing the Ischaemic Complications Associated with Myocardial Infarction.

Over a decade ago, aspirin and fibrinolytic therapy were introduced in acute myocardial infarction but reperfusion does not take place in about 20% of patients. The introduction of anti-platelet therapy reduced infarction, improved reperfusion but led to a doubling of major bleeds and so is now considered unacceptable. Recently clopidogrel has been added to the standard therapy and a randomised trial of 3,491 patients, aged 75 years and under, has shown a marked improvement. The primary endpoint was occlusion of the relevant artery, shown by angiography, 4 – 8 days after the event, death or further infarction. This occurred in 21.7% of the placebo group but only 15% of those taking clopidogrel. (*New Engl.J.Med.* 2005**352**:1179-89)

Choose the Right Chocolate.

Here is some good news for those who love dark chocolate. 15 volunteers were assigned to receive dark or white chocolate bars on 15 consecutive days. Those assigned to receive dark chocolate showed a significant drop in systolic blood pressure and also improved their insulin resistance as shown by glucose tolerance testing. (*AmJ.Clin.Nutrition.* 2005;**81**:611-4)

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