

**An Occasional Medical Newsletter  
Number 60  
from The Blood Care Foundation**

Dear Member,

We have now reached the “Diamond” edition of this newsletter. During the past 9 years that I have been writing these, I have highlighted numerous contentious points. However it is unusual to find 2 studies published within a couple of weeks which have diametrically opposed views. Quiroz and colleagues consider a negative computer tomography scan as accurate as pulmonary angiography for ruling out pulmonary embolism in a low risk patient (*JAMA*. 2005;**293**:2012-7). Roy and associates, reporting in the British Medical Journal, feel that a negative computer tomography scan can only rule out pulmonary embolism, even in a low risk patient, if accompanied by a low probability ventilation perfusion lung scan, negative magnetic resonance angiography or a negative quantitative D-dimer test (*Brit.Med.J.* 2005;**331**:259-63).

**Breast Feeding and Obesity.**

The Oslo youth study has shown that adolescents who were breast fed for more than 3 months are six times less likely to be obese than those who were never breast fed. (*J.Clin.Epidemiol.* 2205;**58(8)**:849-57)

**Does Aspirin or Vitamin E Prevent Cancer?**

The women’s health study evaluated the effect of taking 100mg aspirin and 600IU of vitamin E every other day in 39,876 healthy females in the USA. The average follow-up period was 10.1 years. Aspirin had no preventative effect on any cancers, with the possible exception of slight reduction in risk and mortality in lung cancer. The vitamin E arm showed no significant effect on major cardiovascular events, the incidence of myocardial infarction or stroke, but showed a 24% reduction in cardiovascular mortality. Vitamin E had no benefit in the prevention of any type of cancer. (*JAMA*. 2005;**294**:56-65)

**Does Low-Dose Aspirin Prevent Cardiovascular Disease in the Elderly?**

There is an increasing vogue to encourage people over 70 years to take low-dose aspirin to prevent cardiovascular disease, but is this truly beneficial? Nelson and colleagues, using an epidemiological model and a hypothetical population of 20,000, based on the reference population of Victoria, Australia, suggests that aspirin would prevent 710 myocardial infarctions and 54 ischaemic strokes but at a cost of 1,071 gastro-intestinal and 130 intracranial bleeds. The confidence intervals were so wide that the overall effect could be either beneficial or detrimental. (*Brit.Med.J.* 2005;**330**:1306-9)

**Sports Injuries.**

Ankle sprains have traditionally been treated with rest, ice, compression and elevation. Now a fifth item should be added to the regimen. A randomised double blind placebo controlled trial showed that applying a ketoprofen patch daily significantly reduced the pain and swelling and improved the speed of recovery. No evidence was found of systemic side effects from this topical anti-inflammatory patch. (*Am.J.Sports Med.* 2005;**33**:515-23)

### **The Treatment of Early Prostate Cancer.**

A trial in which treatment of early, localised prostate cancer by “watchful waiting” was compared with radical prostatectomy. Three years ago, the trial reported their results over a 6-year follow-up, showing a reduced risk of death from prostate cancer of 50% in the radical prostatectomy group as opposed to those in whom “watchful waiting” had been used. In addition, the risk of distant metastasis was reduced by 37%. An extended follow-up, over 8 years, has now been reported showing radical prostatectomy seems to reduce overall mortality as well. 106 of 348 men who were in the “watchful waiting” group had died whereas the figure in the surgical group was 83 from 347. The differences between the two groups with regard to death from prostatic cancer and distant metastases had also widened. (*New Engl.J.Med.* 2005;**352**:1977-84)

However, these results are contradicted by Albertson and his colleagues who analysed data from the Connecticut tumour registry over the past 20 years. Their study shows that there is a very low risk of progression in localised low-grade prostatic cancer treated conservatively. They calculated that the risk of dying from prostatic cancer was only 6 deaths per 1,000 person years. Professor Albertson concludes “Men with low grade prostate cancer have only a small risk of cancer progression. These results do not support aggressive treatment of localised low grade prostate cancer.” (*JAMA.* 2005;**293**:2095-101)

### **The Black Death.**

It has always been supposed that the “Black Death” was an epidemic of bubonic plague. It is now shown that this is not true and it was caused by a viral haemorrhagic fever with a long incubation period that allowed it to travel far in spite of the limitations of the Middle Ages. It appears that it started in Africa, spreading to Europe and Asia and may have left an important legacy. A genetic deletion, CCR5- 32, which confers virtual immunity to HIV-1 in homozygous people is found in 10% of European populations ravaged by the plague but is virtually absent in Sub-Saharan Africans, Asians and American Indians. (*Postgrad.Med.J.* 2005;**81**:315-20)

### **Mediterranean Diet and Longevity.**

And now the good news to end with. Eating a Mediterranean-type diet, in which unsaturated fats are substituted for monounsaturates is associated with longer life expectancy. The EPIC (Elderly Prospective Study Group) study, carried out between 1992 and 2003 on 74,607 men and women aged 60 years and over, showed that adherence to diet rich in vegetables, legumes, cereals, fruit and fish reduced mortality by around 7%. (*Brit.Med.J.* 2005;**330**:999-1003) Additional evidence comes from a randomised trial of 120 healthy Americans who had a low fat diet for 4 weeks. Those on the diet alone lowered their serum cholesterol by 0.24mmol/l, whereas those eating extra fruit, vegetables and whole grains had a reduction of 0.46mmol/l. (*Ann.Int.Med.* 2005;**142**:725-33)

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Michael JG Thomas  
MA, MB, FRCP (Edin), DTM&H  
Clinical Director