

# RES MEDICA

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## Journal scan

### The Editors

#### Abstract

This is a short collection of interesting items pertinent to medicine and science in general. It gives a taste of some of the current work in hand around the world. We would welcome any contributions of this nature, just a short chatty narrative of an interesting or amusing article that you have seen or read.

#### Coffee

A recent study<sup>1</sup> of 'healthy' moderate drinkers (consuming 4-6 cups per day; *moderate*? I call that low.) showed that on switching to decaffeinated (in a blind trial) many developed headaches for 2-3 days.

One good reason not to stop? Need another good reason? Here goes ...

A report<sup>(2)</sup> from Sheffield states that coffee induces a desire to defaecate (by increasing activity in the rectosigmoid) in nearly 30% of people. For some unexplained reason this predominately affects women! - a cheap cure for constipation? Unfortunately the effects of the evil brew doesn't end there; about the same number of people (30% of the population) find that coffee aggravates their symptoms of irritable bowel syndrome.

Will the coffee saga never end?

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1. BMJ 1990 No. 6739 Vol.301
2. CIVT 1990, 31, 450-453.

## Snoring

Do you snore? Does your old man snore? Did you know that snoring increases your

risk of heart attacks? - according to a recent study in Bologna, Italy. The Italians compared patients admitted with their first heart attacks to matched controls (with non-cardiovascular acute illness).

It was found that snorers (as confirmed by the cohabitee) had a significantly increased risk of heart attack. The only question that remains is why? Snoring is associated with sleep apnoea which might put stress on the cardiovascular system. Or snoring *itself* may cause such stress.

1. BMJ 1990; 300:1557

## Paurfour du Petit

You've heard about Horners Syndrome, but how about *Paurfour Du Petit* Syndrome? This is a seldom recognised clinical syndrome characterised by a hypersympathetic state following damage to the cervical sympathetic nerves. It was first recognised by a French physician (called, strangely enough, *Paurfour Du Petit!*) in cases of wounds to the neck in the Napoleonic war. This letter<sup>1</sup> details a case of Paurfour Du Petit syndrome following removal of one left parotid gland in a 41 year old male. Post-operatively he

noticed left facial weakness which completely resolved. He also noticed persistent left pupillary dilation, initially associated with some blurring of vision, but this later resolved. On examination six months later, signs of autonomic overactivity on the left side were noticeable ie. lid retraction, pupillary dilation, with direct and consensual light reflexes and a full range of eye movements unaffected. Whilst the possibility of a right sided Horner's Syndrome, giving the appearance of a left sided hypersympathetic state was considered, it was deemed unlikely in this surgical procedure. This is believed to be the first reported case of *Paupfour du Petit* syndrome following a surgical procedure.

1. Journal of Neurology, Neurosurgery and Psychiatry. Nov 1990. Byrne & Clough.

## Policeman's Groin

Sounds nasty, doesn't it? However the lack of safety catches on police revolvers is reported<sup>1</sup> to lead to this unfortunate and thankfully rather unusual occupational injury. At least four incidents have been reported in which police officers have shot *themselves* in the groin while practising drawing their gun when rising from a sitting position. Thankfully at short range the damage caused is minimal and only requires limited surgery.

The same cannot unfortunately be said for a second shooting injury reported in the same issue. A young man was admitted after being shot at close range by a handgun. One of the bullets had entered his left flank, the wound being very obvious, and the bullet (on X-ray) was shown to be within the flank musculature. Surgical

exploration of the area failed to find the bullet and was eventually abandoned to free the operating theatre.

Two days later the bullet had appeared (again on X-ray) to have moved downwards. A second incision was made, and despite using a metal detector this operation was also aborted.

Well to cut a long story short, following a third attempt to remove the bullet and over a week after the incident, X-rays could no longer locate the bullet. It was concluded that the bullet must have penetrated the descending colon and been passed per rectum! The patient made an uneventful recovery. Explaining the whereabouts of this bullet to the police proved difficult.

Finally the authors note that all bullets recovered from patients became their property and should not be released to the police without their proper consent.

1. Injury 1990, 21, 182-192.

## Sleeping Genes.

Yet another twin study! This time an American study reported the finding of a genetic factor in the quality of sleep and individual experiences. A general population of about 3000 adult twin pairs were studied (returns from 6000 mailed questionnaires). The authors calculated that genetic factors accounted for at least 33% of the variance in sleep quality and 40% of the variance in sleep pattern. There was no evidence for a decline in the importance of genetic factors with age. As for environmental factors as perhaps expected, short-term environmental fluctuations seemed to account for about 30% of the variance but no effect could be shown for an effect of

shared family environments. At the present genes seem to be implicated in everything.

1. *Sleep* Vol.13 No.4 1990, 318-335

## Dissection v. Prosection

Does dissecting a cadaver really help us to learn anatomy or do we do it because our teachers did? Two groups of first-year students in Nigeria were taught by different methods; the first group in the traditional manner, the second using a programme which excluded dissection by students and used prepared demonstrating samples. In the second group the students were allowed access to the prepared specimens without staff supervision.

The results of this experiment were evaluated by questionnaires, a practical test and a written paper.

The findings? Well ... in both tests the experimental group performed better than the traditional group; significantly better in the theory paper. Furthermore the programme of learning in the experimental form took only 74% of the time taken by the traditional group. The results of the student questionnaire were even less enthusiastic about continuing dissection. Perhaps our anatomy department should take a look ...

1. *Medical Education* 1990, Vol.24 No.4, 389-395.

## Liver Problems

Salmonella, botulism, BSE... Yet another food scare is upon us again. This time it concerns vitamin A which is found in relatively high concentrations in liver.

An excessive intake of vitamin A immediately before or during pregnancy substan-

tially increases the risk of birth defects. Hence the Department of Health's warning to women who are, or are likely to become pregnant to avoid any substance which has a high retinol content such as vitamin tablets and liver.

A recent study showed that the risk of birth defects was highest in women who had taken vitamin supplements (>40000 IU) over the first two months of pregnancy. It also showed that intake under 10000 IU was unlikely to be teratogenic.

However typical dietary intake of retinol among women of childbearing age is 1400 IU/day and few exceed 10000 IU/day. There has been the odd case of birth defects associated with vitamin A: one woman accidentally ingested 500000 IU during the second month of pregnancy; others consumed over 25000 IU/day over several weeks or months.

It would appear that concern about vitamin A is excessive. Furthermore the liver is a good source of many nutrients required for fetal growth. But until more evidence becomes available the best advice to pregnant women is not to abstain from liver altogether, but to consume only reasonable amounts (<50g/week).

1. *BMJ* 1990; 301: 1176

## Stethoscope?

Which is the odd one out? Ophthalmoscope, laryngoscope, gastroscope and stethoscope. Well they are all medical instruments, one of which is used for auscultation while the others are used as visual aids.

The term stethoscope is derived from the Greek *stethos* (chest) and *skopein* (to see). Thus the literal interpretation would be an

instrument for visual inspection of the thorax. The term 'stethophone' from the Greek *phonos* (sound) would clearly been more appropriate.

The misnomer originated in 1816 when the French physician Laennac rolled up a sheet of paper into a tube and used it as an auscultation device. For some unknown reason he named the device a stethoscope. Since then there had been some attempts to correct the mistake but to no avail and the term stethoscope has become ingrained into medical terminology.

1. Journal of the Royal College of Physicians of London. (1990); 24:318.

## Head Banging

A report on a study on the phenomenon of head banging, or "a compulsion to rhythmically strike the head against a solid object", was reported in the Lancet.

Apparently head banging occurs in up to 15% of children, particularly during the latter half of the first year of life and more often in boys than girls. Most children are not injured by this unusual pastime which is usually precipitated by temper tantrums. It is not believed that such behaviour is due to underlying emotional disorder although the child's actions can be very disturbing to the parents' involved. Children largely outgrow the behaviour but referral to a psychiatrist may be necessary if the behaviour persists after four years of age.

1. Lancet 1990; 336:1374.

## Bellringing

It has recently been revealed that church bell ringing may be damaging to health.

Injuries reported include fractures, ropeburns, tooth extraction, a near hanging and a scalping. Bizarre deaths have also occurred such as falling from a bell frame and two suicides, one from jumping from a bell tower and the other a hanging.

It has been suggested that doctors should become more familiar with the injuries associated with bell ringing so that appropriate advice and treatment can be given.

However bell ringing is largely an English pursuit. There are only 15 rings of bells in Scotland and so there is presumably a low incidence of injuries. Of the 140 members of the Scottish Association of Change Ringers only 2.5 will sustain an injury related to bell ringing at the injury rate of 1.8% per year. Bell ringing injuries are therefore not a major concern to doctors in Scotland.

As a final point I would like to say that in ten years of bell ringing I have never sustained a significant injury or seen others injure themselves in a bell tower. bell ringing is much safer than alarmists would have you believe and is almost certainly safer than crossing the road!

1. BMJ 1990; 301:1415-8

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If you have a contribution for Journalscan send it to the RMS office for the next issue addressed to the Editors, Res Medica and see your name in print.