From the journals

Ceylon Medical Journal, 2000; 45: 129-130

Allergy to ciprofloxacin

Ciprofloxacin is widely used in the management of infections affecting the urinary, respiratory and the gastrointestinal systems. It is now recognised that ciprofloxacin produces anaphylactoid reactions. A recent report describes 3 cases of anaphylactoid reactions following oral administration of 500 mg of ciprofloxacin to young adults. The symptoms included swelling of eyes, itchy rash, tight and hoarse throat, dyspnoea and cough. All 3 patients recovered after intramuscular adrenaline and oral chlorpheniramine. Two of the cases did not have a history of atopy. British Medical Journal 2000; 320: 679. Considering the extensive use of ciprofloxacin this side effect is rare. However, it is important to be aware of the possibility and diagnose such reactions early. They should be reported to the ADR Monitoring Unit of the Department of Pharmacology, Faculty of Medicine, Kynsey Road, Colombo 8. Phone 695230 or E mail Phrm.cmb@slt.lk

Bullying in schools

A recent questionnaire study of short pupils (below the third centile for height at school entry) has shown that more of them have been bullied at secondary school than a group of age and sex matched controls (ie. their tall counterparts). In some instances the bullying has started in junior school. The teachers also agreed that more short pupils were victims of bullying compared to the controls. Parents of both groups of children were likely to complain that their children were bullied. Although the short pupils had as many good friends as the controls, they had spent more of the school interval time alone. Their social isolation could be both the result as well as the cause of their victimisation. This study also revealed that there were bullies in both height groups. Around one in four short victims, both girls and boys, were both victims and bullies! The investigators state that these findings may serve to alert parents and teachers to potential bullies as well as their victims. British Medical Journal 2000; 320: 612-13.

Treating acute sinusitis

Acute sinusitis usually follows a cold, and the common symptoms and signs include nasal obstruction, purulent discharge from the nose, facial or dental pain and sinus tenderness. Some patients have malaise and fever. Diagnosis is made often on the above history associated with sinus tenderness and finding pus in the nose. Topical decongestants (eg. 0.5% oxymetazoline) help to improve drainage. Irrigation of the nose with isotonic saline has also been found to be helpful. Amoxicillin is the preferred antibiotic. A course of 10 to 14 days is recommended. Those allergic to penicillins could be treated with co-trimoxazole. Second-line antibiotics include co-amoxiclav and cefuroxime. Patients showing poor response to second-line antibiotics, and those getting complications and recurrent attacks, should be referred to specialists. Antihistamines as well as topical and systemic steroids have not been shown to give additional benefit. Australian Prescriber 2000; 23: 39-42.

Cigarette smoking increases risk of pneumococcal disease

Recent research has shown that cigarette smoking is the strongest independent risk factor for invasive pneumococcal disease in immunocompetent adults. The number of cigarettes smoked daily, number of pack-years of smoking and the time since quitting showed a clear dose-response relation to the risk of pneumococcal disease. What can doctors do to prevent these infections? Doctor’s advice to stop smoking is quite powerful, and should be offered to all smokers. Advice could be supplemented with counselling and other measures (eg. nicotine replacement). Risks of passive smoking should be explained and methods of limiting exposure should be discussed. Patients at high risk of disease should also be offered vaccination. New England Journal of Medicine 2000; 342: 681-89 and 732-34.

New treatment modalities for management of glaucoma

Cholinergic agonists, beta blockers and carbonic anhydrase inhibitors are widely used in the management of glaucoma. Each of these classes of drugs have their own limitations and side effects. Recently several new classes of drugs and other treatment options have become available for the management of glaucoma. Alpha-2 stimulants have shown efficacy
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as topical treatment. Apraclonidine and brimonidine are examples of this class, and they have efficacy in preventing the rise of intraocular pressure that occurs after intraocular laser procedures. Prostaglandin agonists (eg. latanoprost) has been shown to have greater efficacy than beta blockers in lowering intraocular pressure. Lasers can be used non-invasively for the management of closed angle glaucoma. Some lasers (eg. Nd: YAG laser) which can be used non-invasively under local anaesthesia are small units and easily portable. They can be carried to rural parts of the world. There are advances also in surgical management. It likely that glaucoma can be better managed and complications prevented with the use of these newer treatment options. British Medical Journal 2000; 320: 1619-20.

Errors in prognostication of terminally ill patients

A recent prospective cohort study of terminally ill patients (n = 504) and their attending doctors (n = 365) has shown that only 20% of predictions were accurate. In 63% of instances the doctors were over-optimistic and in 17% instances they were over-pessimistic. As the doctors became more experienced they were able to make more accurate prognostications. As the doctor-patient relationship became stronger the prognostic accuracy dropped. This study also showed that the inaccuracy in prognostication was not restricted to any particular type of doctor or patient. British Medical Journal 2000; 320: 469-72. The investigators conclude that some error is unavoidable at prognostication. However, as there is a systemically optimistic error, the care given to these patients near their end of life is adversely affected.

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The High Price of Bad Government (1)

But the laggards are more conspicuous. At the top of the list is Japan, where pork-barrel politics have helped promote a decade of economic stagnation. The aloof and unfocused Hong Kong government sinks in esteem almost by the month. Cronyism and presidential buffoonery are back in a big way in the Philippines, and in Indonesia the divided and directionless government has hardly been functioning at all. Indeed, Asia’s biggest problem right now is political uncertainty, which is keeping foreign capital away, for example, from Southeast Asia.