

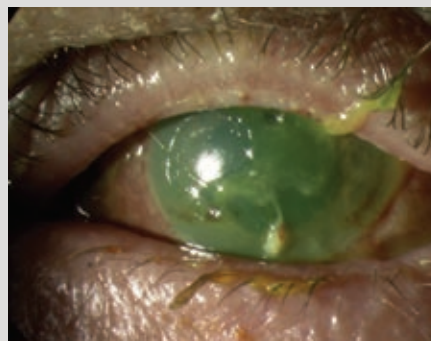
A 4 year old boy with recurrent wheeze and chest infections
Try the picture quiz in **ENDGAMES, p1085**

Minerva apologises for causing dismay in “propagating a surgical myth” by drawing attention to a case report in *Neurology* about wonky noses causing headaches, a curiosity which an otolaryngologist points out (*BMJ* 2009;338:b1289) is a non-evidence based anecdote “dismissed by most rhinologists a long time ago.” Minerva blushes at the thought that she has unwittingly provided validity to the phenomenon in question, but reminds readers that she draws on all manner of information to include in her column, including studies which would never survive the rigours of the *BMJ*’s own publishing process.

A retrospective study of cardiac function in an African population undergoing regular dialysis and with a low prevalence of pre-existing cardiovascular disease suggests that dialysis and uraemia per se may not be major contributors to cardiovascular morbidity. In the study population, cardiac function seemed to be preserved over time and cardiac morbidity and mortality were low. In the developed world cardiac disease is common in patients undergoing dialysis, but these findings suggest that this heart disease is probably present before dialysis is started (*Renal Failure* 2009;31:211-20, doi:10.1080/08860220802669867).

How does intensive insulin therapy compare with conventional insulin therapy in terms of effects on mortality and severe hypoglycaemia in the intensive care unit? A meta-analysis in *CMAJ* concludes that the intensive approach increased the risk of hypoglycaemia and moreover conferred no overall benefit on mortality in critically ill patients (2009;180:821-7, doi:10.1503/cmaj.090206). Some patients may benefit from such treatment—it’s just not clear which these patients are.

Are there so many alarms going off at any one time in an intensive care unit that they are ignored? Up to 94% are false alarms, and a study attempting to identify a means of reducing the number of false alarms found that by introducing a 19 second alarm delay, 67% of the false alarms would be removed. The researchers identified that suctioning, washing, repositioning, and oral care caused 152 ignored or ineffective ventilator alarms alone (*Anesthesia and Analgesia* 2009;108:1546-52, doi:10.1213/ane.0b013e31819bdfbb).



This passenger sustained serious bilateral chemical injuries to the eyes after activation of the vehicle’s protective airbag during a road traffic accident. Airbags are inflated by nitrogen gas produced from sodium azide; deployment also produces sodium hydroxide, a highly alkaline and irritant chemical. This substance permeates through the airbag on deflation and on contact can cause an alkaline burn to the eye. These eye injuries shown stained with fluorescein were not detected until 36 hours after the incident, by which time serious, potentially blinding corneal damage had been sustained. An ophthalmic examination should be considered in all patients exposed to airbag deployment.

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Patient consent obtained.

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“Choice” is currently the buzzword in medical circles, not least among the UK’s maternity services. Maternal request is thought to be pushing up rates of caesarean section in the UK, but a study that tracked 454 women accessing maternity care for the first time from antenatal booking to birth reports that most women expressed a preference for a vaginal delivery, but accepted that the actual method would be determined by the circumstances of the pregnancy. The desire for caesarean delivery on maternal request fell to 2% by the end of the group’s pregnancies, and the wish for vaginal deliveries rose to 80% (*BJOG* 2009; published online 22 April, doi:10.1111/j.1471-0528.2009.02119.x)

Administering *N*-acetylcysteine to patients who have overdosed on paracetamol may actually delay the recovery of their liver from

hepatotoxicity, according to an animal study in *Critical Care* (2009;13:R55, doi:10.1186/cc7782). Seventy-two hours after a paracetamol challenge that induced acute liver injury, *N*-acetylcysteine treatment significantly increased serum transaminases, induced hepatocyte breakdown, and delayed liver regeneration, compared with saline treatment.

Why is it that some people accumulate navel fluff, and others don’t? It’s a conundrum that few would dare bother their doctors about. Abdominal hair is responsible for navel lint, so by definition, it’s mainly a male phenomenon. Abdominal hair is thought to collect fibres from cotton shirts and direct them into the navel where they are compacted into a felt like matter. When the abdominal hair is shaved, lint no longer collects, and old T shirts and dress shirts produce less matter than new T shirts. A possible function of the lint may be to fulfil a cleaning function for the navel (*Medical Hypotheses* 2009;72:623-5, doi:10.1016/j.mehy.2009.01.015).

The Dutch seem quite keen to use diagnostic self-tests acquired over the internet on various body materials. 16% of nearly 800 survey respondents admitted they’d used at least one self-test, but the average was 2.1 tests per self-tester. The most popular tests were for diabetes and cholesterol. Self-testers as a whole tended to have a higher body mass index than non-testers, and reported poorer health. But self-testers were also more likely to take dietary supplements and homeopathic medicine. Better information about the efficacy of self-tests is needed (*BMC Public Health* 2009;9:100, doi:10.1186/1471-2458-9-100).

An study of outcomes after coronary artery bypass surgery in the United States claims that bypass grafting done by trainee surgeons within a supervised programme is safe in the short and mid term. Trainees had longer perfusion and cross-clamp times than consultants, and the incidence of myocardial infarction was higher in patients operated on by trainees (0.8%) than in those operated on by consultants (0.4%, p=0.046). But other early postoperative outcomes and survival rates up to 5 years seemed similar in both groups (*Journal of Thoracic and Cardiovascular Surgery* 2009;137:1088-92, doi:10.1016/j.jtcvs.2008.10.011).

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