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CASE REPORT

Hoarseness in a 79 year old woman

A 79 year old woman was referred to our ear, nose, and throat outpatient clinic with a history of hoarse voice. This symptom had been present for around three months. It initially fluctuated in severity but eventually became constant. There was no associated pain, weight loss, cough, dysphagia, odynophagia, or other upper airway symptoms. She had not recently had surgery or experienced trauma. Her medical history was of chronic obstructive pulmonary disease, and she was an ex-smoker.

There were no abnormalities on head and neck examination. Flexible laryngoscopy showed no mucosal lesions in the nasopharynx, oropharynx, or hypopharynx. The left vocal cord was normal in appearance but fixed in the paramedian position. Contrast enhanced computed tomography from the skull base to the diaphragm was performed. This showed a large saccular aneurysm of the distal part of the aortic arch, near the origin of the left subclavian artery, measuring 4.5 cm in diameter (figure).

- 1 What is the differential diagnosis of hoarseness?
- 2 How did the abnormality seen on the computed tomogram lead to the patient's symptoms?
- 3 How can the problems be managed?

Submitted by Thomas Jacques, Tarik Abed, Sunil Sharma, and Jonathan Philpott

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STATISTICAL QUESTION

Open label crossover trials

Researchers compared transdermal fentanyl with sustained release oral morphine in the treatment of chronic non-cancer pain. A randomised, open label, crossover trial design was used. Transdermal fentanyl was administered using patches. Participants were 256 patients (aged 26-82 years) with chronic non-cancer pain who had been previously treated with opioids. The treatment period for both transdermal fentanyl and oral morphine lasted four weeks.

The outcome measures included patients' preference for treatment (transdermal fentanyl or sustained release oral morphine), pain control, quality of life, and safety assessments. The researchers reported that transdermal fentanyl was preferred to sustained release oral morphine by patients with chronic non-cancer pain previously treated with opioids. The main reason for preference was superior pain relief, which was achieved with less constipation and an enhanced quality of life.

Which of the following statements, if any, are true?

- a) The crossover trial is referred to as a "within subject" study design
- b) Confounding was minimised in the comparison of treatments
- c) It was essential that the crossover trial incorporated a washout period
- d) The measurement of outcomes was liable to ascertainment bias

Submitted by Philip Sedgwick

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