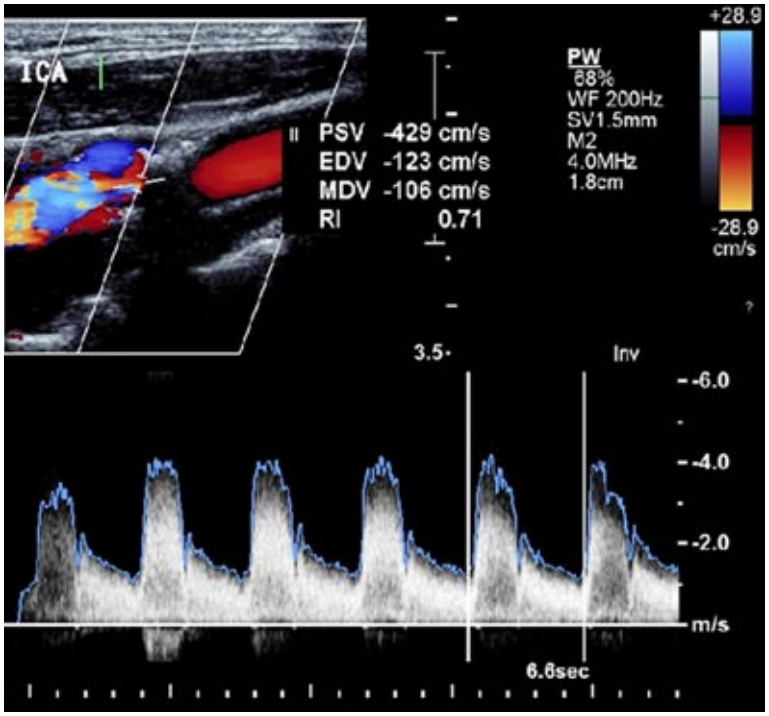
FOR SHORT ANSWERS
See p 807
FOR LONG ANSWERS
Use advanced search at bmj.com and enter question details

ENDGAMES

We welcome contributions that would help doctors with postgraduate examinations
See resources.bmj.com/bmj/authors/types-of-article#endgames



PICTURE QUIZ "Brain attack"

A 57 year old, right handed man was seen as an emergency after an episode of "flinging" movements of his right arm and leg and slurred speech. He had no visual or sensory symptoms. Examination showed mild right pronator drift, and dysarthria. His symptoms resolved within 45 minutes.

Blood pressure was 135/75 mm Hg and blood sugar was normal. Electrocardiography confirmed sinus rhythm, and computed tomography of the brain was reported as showing a well defined left cerebellar infarct. The figure shows two images of the origin of the left internal carotid artery.

1 What is the patient's ABCD2 score?
2 In the figure, what do the upper and lower carotid ultrasound images show? What value of peak systolic velocity is usually quoted as indicating a >70% stenosis, and what is the interpretation of the peak systolic velocity in this figure?
3 What is the likely vascular territory of the patient's symptoms? Is any intervention indicated? If specific intervention is required for the carotid stenosis, how soon should this be performed?
4 What further imaging would be helpful?

Submitted by S Macdonald, A Dixit, and M G Wyatt
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STATISTICAL QUESTION

Comparing length of stay

The mean length of stay in one hospital after stroke was 21 days, the median was 12 days, and the standard deviation was 13 days. Which of the following, if any, are true?

a) The typical length of stay was 21 days
b) The mean length of stay may be affected by long stay patients
c) As many patients stayed for fewer than 12 days as stayed longer than 12 days
d) When comparing length of stay in this hospital with that in another hospital, survival methods would be preferable to a *t* test

Submitted by John Fletcher
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ON EXAMINATION QUIZ

Contraception

The answer to this question and more questions on this topic are available from www.onexamination.com/endgames until midnight on Wednesday.

This week's quiz is on contraception and is taken from various examinations.

Would any of the following treatments reduce the efficacy of the combined oral contraceptive?

- Oral tetracycline two months into treatment for acne
- Oral rifampicin as acute prophylaxis for meningitis
- Oral omeprazole for gastritis
- Oral metronidazole for trichomoniasis
- Oral sodium valproate for epilepsy

CASE REPORT

A breathless man with diffuse chest pain

A 63 year old white man was referred to hospital with a two month history of left sided diffuse chest pain, weight loss, and progressive breathlessness on exertion. He was a retired joiner and had a 20 pack year history of smoking. He had not recently travelled abroad. He was taking bendroflumethiazide for hypertension.

On examination, his blood pressure and heart rate were normal, respiratory rate was 14 beats per minute, and oxygen saturation was 97% on air. He had no clubbing, pedal oedema, or lymphadenopathy. Respiratory examination showed dullness and reduced breath sounds in the left lower and middle zones. Cardiac and abdominal examinations were normal.

Chest radiography showed a moderate left sided pleural effusion, and electrocardiography was normal. Renal function, biochemistry, and bone profile were normal. Straw coloured pleural fluid was aspirated under ultrasound guidance; subsequent analysis showed total protein of 44 g/l (total serum protein 68 g/l), glucose 5.3 mmol/l, and lactate dehydrogenase 423 U/l, with no malignant cells or microbial growth.

1 What type of pleural effusion is this and what causes it?
2 What investigations should be carried out next?
3 What are the most likely differential diagnoses?

Submitted by Mahendran Chetty, Ratna Alluri, and Graeme P Currie
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