

## FOR SHORT ANSWERS

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## FOR LONG ANSWERS

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# ENDGAMES

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## STATISTICAL QUESTION

### Correlation

Which of the following, if any, does not measure correlation?

- a) Kendall's  $\tau$
- b) Spearman's  $\rho$
- c) Cronbach's  $\alpha$
- d) Pearson's  $r$

Submitted by John Fletcher

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## ON EXAMINATION QUIZ

### Lipids

The answer to this question and more questions on this topic are available from [www.onexamination.com/endgames](http://www.onexamination.com/endgames) until midnight on Wednesday.

This week's quiz is on lipids and is taken from the OnExamination revision questions for part 2 (written) of the MRCPI examination.

A 44 year old male attended a health check at a mobile cardiovascular risk assessment clinic. He took no medication but led a sedentary lifestyle. He was a non-smoker and his father had a myocardial infarction at 60 years of age. Investigations showed:

- Total cholesterol 5.0 mmol/l (normal value <5.2)
- Triglycerides 4.0 mmol/l (normal range 0.45-1.69)

Which of the following is the most common cause of an isolated hypertriglyceridaemia?

- A Alcohol
- B Diabetes mellitus
- C Drug therapy
- D Familial hyperlipidaemia
- E Obesity

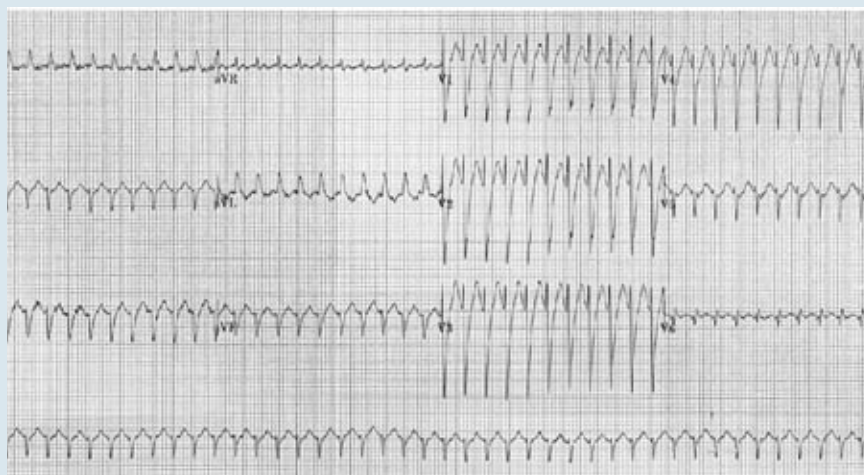


Fig 1 Electrocardiogram on admission

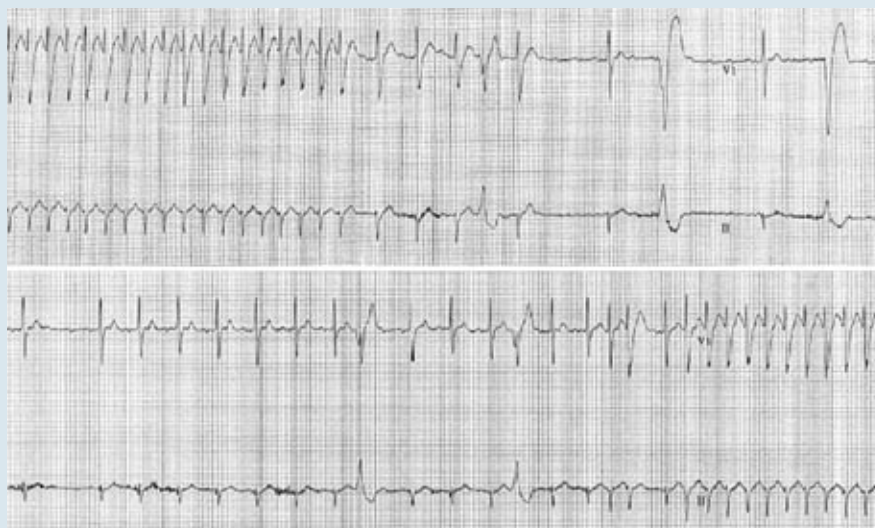


Fig 2 A two lead electrocardiogram recorded during and after administration of an adenosine bolus. Top panel: trace from the precordial leads during administration of an adenosine bolus; lead V1 at the top and lead II below. Bottom panel: continuation of the trace from the precordial leads following administration of an adenosine bolus; lead V1 at the top and lead II below

## PICTURE QUIZ

### Fast and furious

A 65 year old man attended the accident and emergency department complaining of episodic palpitations associated with dizziness. He had a pulse of 250 beats/min with a regular rhythm and a blood pressure of 105/78 mm Hg. Physical examination was otherwise normal. He had a history of paroxysmal atrial fibrillation and was taking flecainide 100 mg twice a day and warfarin. Electrocardiography was performed on admission (fig 1). Subsequently, a 6 mg bolus of adenosine was administered and a continuous two lead rhythm electrocardiogram recorded (fig 2).

- 1 What is the arrhythmia shown in this patient's electrocardiograms?
- 2 What important element in this patient's history could have precipitated his presentation?

Submitted by Justine Bhar-Amato

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