

MINERVA

Does acupuncture reduce anxiety before an endoscopy? Fifty two children participated in a trial of acupuncture at the “Extra-1” (Yin-Tang) point and at a sham point. Thirty minutes after the intervention, the children in the Extra-1 group had less anxiety than at baseline, and those in the sham group had more. But Extra-1 acupuncture didn’t affect propofol requirements during the procedure (*Anesthesia & Analgesia* 2008;107:811-6).

Is the depression induced by bereavement similar to depression associated with other stressful life events, or does it deserve special status? A comparison of 82 people with confirmed depression related to bereavement and 224 with confirmed depression related to other important life events found that the similarities between the two groups substantially outweighed any differences. This raises the question of whether diagnostic criteria for depression should exclude bereavement (*American Journal of Psychiatry* online 15 August 2008, doi:10.1176/appi.ajp.2008.07111757).

Clinical reading of a bedside chest x ray alone is inadequate to decide whether a central venous catheter is correctly placed outside the right atrium. Transoesophageal electrocardiography is superior but not always available. A study in *Chest* (2008;134:527-33) found that if the tip of the catheter was 55 mm below the tracheal carina, the catheter was in the right place. Using this distance will allow inexperienced radiologists to avoid the atrium, say the authors.

People who use complementary therapies don’t always view them as “treatments.” Sometimes they are just “treats”—personal luxuries not directed at an identified health need. This isn’t a problem until researchers come along and try to impose their own taxonomies. Meaningful dialogue with users about complementary therapies needs to start with careful terminology (*American Journal of Public Health* 2008;98:1700-5).

When lung tissue is traumatised by the dissection of interlobar fissures during pulmonary lobectomy, the resulting air leakages are tricky to seal. A randomised pilot trial compared a stapling technique with precision dissection and use of a sealant



An 80 year old man presented with an asymptomatic dermatomal rash in the left thoracic 4-8 region. Examination showed an indurated erythematous plaque. Skin biopsy confirmed a cutaneous metastasis from a rectal carcinoma that was surgically resected 18 months ago. A computed tomography scan showed bone and liver metastases. A rash in an apparently dermatomal distribution should be taken in context of the history. We ruled out herpes zoster and cellulitis as they are classically painful and tender. The mechanism of this zoster-like metastasis is unknown.

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(*Journal of Thoracic and Cardiovascular Surgery* 2008;136:383-91). In the dissection and sealant group, electrocautery and collagen patches coated with human fibrinogen and thrombin were used to stop the leaking; routine surgical staplers were used in the stapler group. The sealant technique proved effective, safe, and cheaper than the stapler, but larger studies will determine whether these differences are statistically significant.

Are patients put off by long waiting times to see the surgeon of their choice? A survey of patients waiting for hip and knee replacement surgery and some who had already undergone surgery found that 63% overall said they would be unlikely to switch surgeons to cut their waiting time. Being male, highly educated, and having already undergone surgery were

the factors linked to an increased chance of switching surgeons (*CMAJ* 2008;179:327-32).

The final report from the randomised Parkinson’s Disease Research Group trial in the UK confirms an interim report that found no long term advantages to starting treatment with bromocriptine rather than L-dopa in early Parkinson’s disease. After 14 years of follow-up the message is similar: initial treatment with bromocriptine doesn’t reduce mortality or motor disability—and, interestingly, the initial reduction in motor complications was not sustained. L-dopa is the drug of choice in early Parkinson’s disease (*Neurology* 2008;71:474-80).

Neuroscientists have discovered how adults who lose their hearing still manage to speak intelligibly: they use non-auditory feedback from skin, muscle, and soft tissues in the vocal tract to compensate for disturbances of speech movements. Researchers asked deaf adults to repeatedly speak short syllables while a robotic device tapped them on the jaw. This initially caused their speech to be distorted, but over time their speech improved because they were able to adapt their speech movements (*Nature Neuroscience* online 14 September 2008, doi:10.1038/nn.2193).

Oats are processed by “kilning,” which is thought to alter their antigenic properties and make them safe for people with coeliac disease. A pilot study in the *Scandinavian Journal of Gastroenterology* (2008;43:1094-01) describes how one group of patients with stable coeliac disease ate kilned oats for six months and another group ate unkilned oats. Then they switched. The groups were similar in terms of their wellbeing, endomysial antibodies, and small bowel histology.

Magicians and doctors are not so different—they both want to leave the “client” better off than when the two parties met. A medical ethicist writing in the *Journal of the Royal Society of Medicine* says that practising doctors may gain insight by looking at doctoring through the lens of the magician (2008;101:443-6). Magicians require clear presentation and communication just as much as technique and sleight of hand. Doctors know what they want to say and achieve, but they tend to focus too much on substance and not enough on process.

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