



Increasing confusion in an elderly man after a fall
Try the picture quiz in ENDGAMES p 593

How do people who've been admitted to hospital involuntarily come to terms with this experience, and integrate it into their life stories? In a small qualitative study, 15 patients who were interviewed about their admissions used terms such as "necessary emergency brake," or "unnecessary over-reaction" to describe their experiences, and "over, and not to be recalled" or "a life changing experience" to indicate how they'd integrated the incidents. The diversity of their perspectives suggests that they came to terms with coercive measures when confronted with danger to self or others (*British Journal of Psychiatry* 2011;199:239-44, doi:10.1192/bjp.bp.110.087841).

Over 2100 UK trainee doctors completed scales rating their confidence in dealing with diabetes mellitus and how often they contributed to the management of diabetic patients (*QJM* 2011;104:761-66, doi:10.1093/qjmed/hcr046). Of these, 27% were "fully confident" about diagnosing diabetes, 55% about managing hypoglycaemia, 43% about managing diabetic ketoacidosis, 27% about managing intravenous insulin, 39% about prescribing intravenous fluids, and just 18% about altering diabetic treatment before surgery. By contrast 66% and 65% were "fully confident" about managing angina and asthma ($P<0.05$).

Do postmenopausal women who intentionally lose weight put it all back on again later? Following an earlier randomised controlled trial of weight loss in postmenopausal women, researchers report that although not all the women regained the lost weight within a year, fat mass seemed more likely to be regained than lean mass in those who did regain weight. For every 1 kg of fat lost during the intervention, 0.26 kg of lean tissue was lost—and for every 1 kg of fat regained over the following year, only 0.12 kg of lean tissue was regained (*American Journal of Clinical Nutrition* 2011;94:767-74, doi:10.3945/ajcn.110.004895).

Everyone gets frustrated when surgery is cancelled at short notice, and in many units over 10% of procedures are cancelled on the day itself. Does the type of hospital or service influence rates of cancellation? A German study involving elective surgical cases in 25 hospitals of different types found that services



A 65 year old school cleaner described developing a "crack" (fissure) on his finger, probably caused by an irritant contact dermatitis, and presented to us with multiple erythematous nodules on the dorsum of his right hand and right lower arm in a sporotrichoid pattern. The culture from an incisional skin biopsy grew *Mycobacterium marinum*, which presumably gained access through the fissure and was acquired from the tropical fish tanks he cleaned. He was advised to wear long waterproof gloves to clean the fish tanks and was treated with minocycline 100 mg twice daily for three months.

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Patient consent obtained.

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in university hospitals had cancellation rates 2.23 (95% CI 1.49 to 3.34) times higher than mid-sized to small community hospitals—12% compared with 5%. General surgery had a significantly higher cancellation rate than gynaecology services—11% compared with 7% (*Anesthesia and Analgesia* 2011;113:578-85).

A new type of human immune cell has been identified in gut and lung tissue. These cells influence the severity of asthma and allergic responses and express the cell markers CRTH2, CD127, and CD161, which distinguish them from others in the lung and gut. Once activated, this subgroup elicits allergic types of immune reactions. Patients with chronic rhinosinusitis, for example, have higher numbers of activated CRTH2-positive cells. The challenge for allergy researchers will be learning how to "tame" the cells (*Nature Immunology* 2011;doi:10.1038/ni.2104).

Children with severe sickle cell disease often receive prophylactic blood transfusions. The results of a trial that assessed the risks associated with stopping this practice suggest that transfusions should be continued. Children whose transfusions were discontinued had a high rate of reversion to abnormal cerebral blood flow, leading to silent infarcts in some cases (*Blood* 2011;118:894-8, doi:10.1182/blood-2010-12-326298). At the start of the trial, 21 of 79 patients had evidence of silent

infarcts; at the end, 8% of patients in the continued transfusion groups developed new brain infarcts compared with 28% in the transfusion halted group ($P=0.03$).

US recommendations for the use of intravenous nicardipine and labetalol for treating acute hypertension in the emergency department were tested in a multicentre randomised clinical trial. Of the 226 randomised patients, 110 received nicardipine and 116 labetalol. Within 30 minutes, the nicardipine group more often reached the target range of systolic blood pressure than the labetalol group (92% versus 83%, $P=0.039$). The need for rescue medication did not differ between groups, while labetalol patients had slower heart rates at all times (*Critical Care* 2011;15:R157, doi:10.1186/cc10289).

Cultural differences operate when cancer diagnoses are disclosed. A Japanese survey found that 44% of neuro-oncologists disclosed a diagnosis of malignant glioma to patients aged under 60, and 41% to those aged 70 years or over. For anaplastic astrocytomas disclosure rates were 62% and 52%. Disclosure depended on the volume of glioma cases operated on at the unit, whether patients lived in cities or not, the social support available to them, and the wishes of the patient's family (*International Journal of Clinical Oncology* 2011;16:230-7, doi:10.1007/s10147-010-0152-8).

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