



## A rapidly enlarging swelling of the left orbit

Try the picture quiz in **ENDGAMES**, p 35

“I am a doctor who stops people’s drugs.” That’s the boast of many a geriatrician, and “deprescribing” is the word now used for this process. In an anonymised electronic survey (*Age Ageing* 2015, doi:10.1093/ageing/afv028), geriatricians rated limited life expectancy and cognitive impairment as important drivers of deprescribing practices. Doctors’ attitudes varied greatly, and—as the concepts of “choosing wisely,” “too much medicine,” and “minimally disruptive medicine” gain ground—the investigators call for further exploration of the factors that influence deprescribing and how it affects patient outcomes.

Better than deprescribing would be not to prescribe in the first place. People with type 2 diabetes are typically prescribed several long term drugs, and there is a strong ethical argument that they should be fully informed of the estimated individualised benefits and harms of each before starting. Several decision aids have been produced, but a qualitative study of patient responses (*British Journal of General Practice* 2015, doi:10.3399/bjgp15X683953) to one of them evoked a wide range of complex cognitive and emotional responses. This happened despite the care taken to present risk information in a range of formats using natural frequencies and visual displays.

Decisions about thrombolysis for acute stroke fall at the opposite end of the urgency spectrum. Disabled patients or shocked relatives are required to make an irreversible decision at the behest of a doctor who needs a swift answer. The challenge of making this a truly informed and shared decision was tackled by a team from Newcastle that used an exemplary process of iteration with clinicians and patients to develop a computerised decision tool called COMPASS (*BMC Medical Informatics and Decision Making* 2015;15:6, doi:10.1186/s12911-014-0127-1). In a situation where delay can cause brain cell loss, the median time in use was 2.8 minutes.

Most patients with heart failure show disordered breathing patterns during sleep, as shown in a series of 1117 patients admitted with acute heart failure to the Ohio State University Ross Heart Hospital (*European Heart Journal* 2015, doi:10.1093/eurheartj/ehu522). In sleep



A systemically well 49 year old man was referred with a two week history of severe left groin pain, reportedly worse when lying supine. He had no history of trauma. The pain resolved spontaneously before his appointment. Clinical examination was normal. A plain radiograph of his pelvis showed unilateral left sided dystrophic calcification in the tendon of rectus femoris (arrow). Aberrant deposition of insoluble calcium within soft tissues can occur secondary to local tissue injury and inflammation. This condition is analogous to supraspinatus tendonitis, which is much more common. Treatment options include analgesia and ultrasound guided injections of steroids or local anaesthetic.

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studies, 344 patients (31%) had central sleep apnoea (CSA), 525 (47%) had obstructive sleep apnoea (OSA), and 248 (22%) had no or minimal sleep disordered breathing (nmSDB). After correction for other variables, both CSA and OSA carried a 50-60% higher risk of death compared with nmSDB over a median follow-up of three years.

Man’s best friend is also his biggest biter, and it is estimated that more than four million Americans are bitten by their dogs each year. A Cochrane review of randomised trials in 2001 (*Cochrane Database of Systematic Reviews* 2001;2:CD001738) found no evidence to support the use of prophylactic antibiotics

for dog bites. However, an observational study (*Emergency Medicine Journal* 2015, doi:10.1136/emmermed-2014-204378) carried out in three Californian emergency departments shows a 5% rate of wound infection, mostly limited to puncture wounds and wounds requiring closure.

Most doctors who would like to be allowed to help dying patients end their lives at a time of their choosing are keen to emphasise that this should be done only at the confirmed request of the patient. Opponents cite cases from countries like Holland to show that there is a “slippery slope” by which euthanasia comes to be practised without consent. But a qualitative study (*BMC Medical Ethics* 2015;16:7, doi:10.1186/1472-6939-16-7) involving 16 Dutch medical specialists, 19 GPs, 16 elderly doctors, and 16 members of the general public demonstrates a widespread reluctance to carry out euthanasia in advanced dementia even if the person has deposited a written advance euthanasia directive.

Women who washed the clothes of men who worked with asbestos (it was usually that way round in the 1950s) were at risk of mesothelioma decades later. A study of textile rag workers in Tuscany (*Annals of Occupational Hygiene* 2015, doi:10.1093/annhyg/meu114) confirms that sorting cotton fabric from wool carries a similar risk. Between 1988 and 2012, the crude incidence rate of mesotheliomas in rag sorters in Prato was 41-92 times higher than that calculated for the general resident population in that province.

The depiction of pain in art has a long history—think of the Laocoön or the dying Gaul—and it became ubiquitous in Christian art from about AD 1100 onwards. But conveying the quality of pain pictorially can be tricky, as investigators from Leeds found when they tried out a set of 12 images depicting different sensory pain qualities on a group of 25 student nurses and 38 design students (*British Journal of Pain* 2015, doi:10.1177/049463715569805). Only two of the images were correctly interpreted by more than 70% of the sample. They need to come up with something more generalisable—perhaps half way between a grumpy face emoticon and Michelangelo’s Pietà.

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