Simulation of medical emergencies improves patients' care

On-site simulation of rare emergencies may improve the management of real patients without exposing them to inadequate care. Thompson and colleagues (p 269) report on a fire drill programme, using on-site simulation, to

evacuate patients with eclampsia. They recorded the action of staff in written and video format during the drills, and identified problems with activation of the team, use of protocols, individual skills, drug usage, time wasting, and staff coordination. The authors developed and implemented solutions that resulted in improved care of simulated patients in subsequent drills, applying evidence based management and enhancing the level of efficiency.

POEM*

Many taking twice daily proton pump inhibitors can step down

Question Do patients taking high doses of a proton pump inhibitor really need it?

Synopsis It's bad enough that many physicians routinely recommend an expensive proton pump inhibitor (PPI) for any patient with reflux, instead of initially trying an adequate dose of a histamine-2 antagonist (150-300 mg twice a day). Many patients also are bumped up to taking the drug twice a day because they have a little breakthrough discomfort. Although some people need more than the standard dose once a day, the authors hypothesised that many patients taking these agents in large or frequent doses could step down to standard dosing without any harm. For this prospective cohort study, they identified 298 consecutive patients at a Veterans Hospital in Ann Arbor, Michigan, who were taking a PPI for gastroesophageal reflux disease; those already taking standard dose PPI with persistent symptoms on their current therapy, already taking a PPI for a reason other than gastroesophageal reflux disease, or who had alarm symptoms or cancer were excluded. That left 126 who were eligible for the heartburn clinic (really, a "let's reduce the dose of their medicine" clinic). Patients were evaluated and given a single dose of either lansoprazole 30 mg or omeprazole 20 mg 30 minutes before breakfast. The patients also received education regarding lifestyle modifications. If they still had no symptoms at two weeks, they returned at three months. If they were still doing well at three months, they were told to come back at six months, at which time they underwent another evaluation. If symptoms recurred at any point, patients were placed back on their original higher dose. At the end of six months, 77% had successfully stepped down to a single dose of PPI per day without any recurrence of symptoms.

Bottom line Most patients who have no symptoms when taking a high dose of a proton pump inhibitor (PPI) can be successfully stepped down to a standard dose of lansoprazole 30 mg or omeprazole 20 mg per day.

Level of evidence 2b (see www.cebm.net/levels_of_evidence.asp). Individual cohort study or low quality randomised controlled trials (<80% follow up).

Inadomi JM, McIntyre L, Bernard L, Fendrick AM. Step-down from multiple to single-dose proton pump inhibitors (PPIs): a prospective study of patients with heartburn or acid regurgitation completely relieved with PPIs. *Am J Gastroenterol* 2003; 98:1940-4.

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* Patient-Oriented Evidence that Matters. See editorial (*BMJ* 2002;325:983)

Editor's choice

Economics first; health third, fourth, or nowhere

Editors of medical journals look with admiration and envy at the *Economist* (or at least I do). It has managed to break out of a specialist ghetto and influence the world. It could do so because everything from world politics to football is driven by economics. But doesn't health also relate to everything? Could a journal run by those concerned with health legitimately consider everything? It might, but I doubt if it would ever have the influence of the *Economist*. Similarly a health forum that considered the big issues would probably not attract the most powerful in the world.

In contrast, the World Economic Forum, which is held in the Swiss ski resort of Davos each year, attracts many of the world's most powerful people. This year Bill Clinton spoke at the beginning and Dick Cheney near the end. In between there were presidents, prime ministers, and a king, and the audience was so glutted by power that Bertie Aherne, the Taoiseach and president of the European Union, spoke to a hall that was mostly empty. But then the audience comprises chief executives of the world's biggest companies, glittering academics, archbishops, politicians of every stripe, social entrepreneurs, writers, artists, and Nobel prize winners.

The forum is "committed to improving the state of the world" and "provides critical insight to global leaders" so that they can do a better job of running the globe. This year's meeting had the theme of "Partnering for security and prosperity." The argument is that you can't have security without prosperity and vice versa. Health is a crucial component of both security and prosperity—and the forum considers health extensively—but I couldn't help but notice that "the big guys" I heard didn't mention health once.

Dick Cheney, the American vice president, used the word freedom perhaps 50 times and the word democracy almost as often. Governments had three responsibilities to achieve security and prosperity and defeat terrorism: promote democracy; cooperate; and be willing to go to war when all else failed. Many of the chief executives at the conference believed that security could never be achieved in a world of gross inequity, but Cheney didn't mention poverty reduction.

Bertie Aherne gave a workaday speech on Ireland's agenda to improve competitiveness in the European Union, but it was an inward looking speech for a world forum. Ironically with the vogue for democracy, inspiration and vision came not from an elected politician but from a hereditary king—His Majesty King Abdullah II, King of the Hashemite Kingdom of Jordan. A Harvard Business School style king, he was most concerned with justice. "Peace, equity, and justice are not just lofty goals. They are critical to the success of every nation ... and the hopes of every individual ... the credibility of the world's commitment to justice is being tested."

Health must now—and perhaps for ever—take a subservient place to lofty goals.

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Richard Smith's Davos diary can be found on bmj.com