



Coventina's Column

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Coventina is concerned to hear that surgeons in Scotland have noticed a rise in incidence of oesophageal cancer in the last decade. The increase is not in the traditional squamous cell carcinoma but the adenocarcinoma type, and often there are no obvious risk factors such as smoking or excessive alcohol intake in the patients. A recent study (British Journal of Surgery 2008; 95: 1127-30) investigated the presence of low volume ascites as detected by endoscopic ultrasound in patients with oesophagogastric cancer. The researchers found that the presence of low volume ascites on endoscopic ultrasound was indicative of incurable disease in 76% of patients in whom it was present, and thus seemed to correlate with poor prognosis. It may therefore be possible to prepare patients for a poor prognosis earlier and set counselling and community support systems in motion pre-surgically.

On a more optimistic note, Coventina notes that patients with early gastric cancer (EGC) confined to the middle third of the stomach may benefit from pylorus-preserving gastrectomy (PPG) instead of the commonly carried out total gastrectomy. Surgeons in Japan (British Journal of Surgery 2008; 95: 1131-5) have found that PPG in a series of 611 patients with EGC was associated with zero operative mortality and a five-year survival rate of 96.3%. Advantages of PPG include prevention of rapid gastric emptying and biliary reflux. A degree of gastric stasis did occur in 8% of patients, but the authors felt that avoidance of dumping syndrome made this PPG form of surgery preferable.

Ventilator-associated pneumonia (VAP) is well recognised in patients in intensive care, and *Pseudomonas aeruginosa* is a frequent cause of gram negative VAP because it is often resistant to antibiotics commonly used in sepsis. A study from the United States (Critical Care Medicine 2008; 36: 2495-2503) shows that it is not only those patients with clinical and radiological evidence of ventilator associated pneumonia who have large quantities of *Pseudomonas* present in their endotracheal aspirate. A significant number of patients had a high burden of *Pseudomonas* present in endotracheal aspirate without showing any signs of pneumonia. These patients had a three-fold increased mortality when compared with those who showed clinical and radiological evidence of *Pseudomonas* pneumonia. This leads to all sorts of fascinating chicken and egg questions. Were those patients without signs of pneumonia prevented from mounting an appropriate immune response to the bacterium because they were so parlous from other causes that their immune system had given up? Or was it because they were immunosuppressed by steroids and other iatrogenic causes? Or was the bacterium itself causing immunosuppression? The answer was probably a combination of reasons.

The authors surmised that one factor may have been secretion of type 111 products by the more virulent strains of *Pseudomonas*; these products are known to prevent the patient from mounting a conventional immune response. In conclusion, it's possible that presence of evidence of pneumonia does not indicate all patients at risk of mortality from *Pseudomonas* lung infection, and intensivists should consider it in very sick patients with no evidence of pneumonia.

When Coventina was a young spritelet, alcohol abuse was confined to the over-enthusiastic quaffing of mead after a hard day's harvest. Nowadays, however, feral teenagers abusing alcohol and drugs are not uncommon in deprived areas of Scotland. Tackling addictive behaviour in the young is complex and difficult. Some studies have concentrated on investigating which youngsters are most at risk of falling into early dependency on alcohol. One such study (Addictive Behaviours 2008; 33: 1282-1290) found that a self concept consisting of many negative and few positive factors – or 'self schemas' – was associated with earlier onset of drinking, and, for boys, early drunkenness. The self schemas assessed included the adolescents' view of their own success at schoolwork, sports, socialising, romance, making and keeping friends, working in jobs, and physical attractiveness. Since many of these factors are modifiable by social measures, the study suggests that interventions to encourage development of positive self schemas, such as increased facilities for sports, hobbies and so on, may reduce anti-social drunkenness. Sadly, short-termism in public spending means that preventative measures like these are not always a priority.

Of course some of the aforementioned out-of-control teenagers may have undiagnosed attention-deficit-hyperactivity disorder (ADHD) which is often amenable to treatment. A recent study (Psychiatry and Clinical Neurosciences; 2008; 62: 421-6) looked at young army recruits and found that those subsequently diagnosed with ADHD were more likely to suffer from severe depression, anxiety, poor quality of life and daytime somnolence. The authors recommend including ADHD in the differential diagnosis of young people with symptoms of depression or anxiety.

In Coventina's day, glaucoma, like most other medical conditions, was not recognised or treated with the expertise it is today. However, in one respect, glaucoma patients might have been better off in days of yore. Swimming, long recognised as one of the best forms of aerobic exercise, carries a little known risk for the ocularly high pressured among us. A recent study (British Journal of Ophthalmology 2008; 92: 1218-1221) has shown that swimming goggles raise intra-ocular pressure (IOP). The rise in IOP demonstrated in the study was around 4.5mm Hg, not including any rise caused by water pressure, and was greater for goggles with a smaller goggle face area.