

*The Medical News Report by Sam La Monte, M.D., FACC*



*February, 2014, #25*

*Welcome to the 25<sup>th</sup> edition of the report. This report reviews the biggest news in medicine for 2013, sleep abnormalities-narcolepsy, and I will spend most of the report on shorter subjects this month. It is the season for sweethearts (**Valentine's Day**), so think of something special for that someone. Enjoy this report. Why have you not had a flu shot? It is a bad flu season this year! Website: [www.themedicalnewsreport.com](http://www.themedicalnewsreport.com)*

- 1. Sleep abnormalities-part 3-Narcolepsy*
- 2. Medical news-top stories for 2013*
- 3. Short subjects: The other metabolic organ*



*Cancer death rates are dropping!*

*Finally...a blood test for Fibromyalgia*

*The future of Medicine*

*When does a "cold" become a sinus infection?*

*New guidelines for blood pressure*

*The big story about our body's bacteria!! A major contributor to disease!!!*

*Good news about deaths from strokes*

*Electronic cigarettes-are they safe? More cigarette harm*

*Does your doctor ask you about alcohol use?*

*Cancer death rates are down!*

*The Mediterranean Diet slows disease progression*

*Do smokers have higher post-operative complications?*

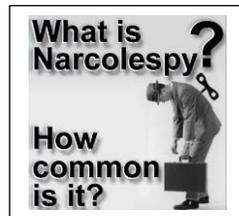
*What is the value of a placebo?*

*Gestational diabetes*



*Do not let the feds reduce the length of Medical School!! Don't dumb down the doctors  
3 factors contribute to increased risk for vascular disease in the Obese*

## *1. Sleep abnormalities—narcolepsy*



*Please review my previous report on sleep abnormalities on my website, about the physiology of sleep, why it is vital to health, and insomnia. **Narcolepsy is commonly known for people who suddenly just fall asleep during the day, especially with some emotion that keys it off. I wish it was that easy.** Narcolepsy can go undiagnosed because the person may just appear to suddenly get drowsy and drop off to sleep for periods of time. This is called **Cataplexy** (loss of muscle tone), which occurs in 75% of the cases. 50% of the cases have sudden onset of **distorted perceptions (tunnels of light, geometric forms, etc.)** as they go from awake to sleep (**hypnagogic hallucinations**), 50% have **sleep paralysis**, and most have **disturbed nocturnal sleep** with frequent awakenings. 60-80% of the patients have **automatic behavior** when first awakening. **Blurred vision, double vision, and even droopy eyelids** are frequently reported. These patients think they have reported seeing apparitions, feeling they have connection with an out of world experience, and other out of body experiences ("wakeful dreaming"). You can imagine what others are thinking when someone reports these experiences (from schizophrenia, seeing aliens to drug induced hallucinations).*

*This usually begins during the teenage years but is frequently misdiagnosed. 125-200,000 Americans have this diagnosis, but **only 50,000 are properly diagnosed** due the various symptoms. Anyone with extreme fatigue (**chronic fatigue syndrome**), bouts of severe drowsiness concentration difficulties, frequent wakefulness during the night, attention deficit (**ADD**), or seizures should be considered. Sleep apnea must be ruled out.*

*There are abnormalities in the **hypothalamus** part of the brain. There is an abnormal protein on the surface of their white blood cells (**human leukocyte antigen-HLA**), and is considered to be an **autoimmune disease**. **Infection or head trauma may initiate the autoimmune response.** It may run in families or those who have other sleep related abnormalities.*

*The diagnosis must be made with a **polysomnogram—a sleep study in a certified facility**—the same to diagnose sleep apnea. The study will demonstrate much greater numbers of **R<sub>EM</sub>** (dream) sleep in the sleep cycle occurring as quickly as 10-15 minutes after going to sleep (normal people don't get to **R<sub>EM</sub>** sleep for 80-120 minutes and then every 90 minutes). When these patients "fall out", their brain is going from awake immediately to **R<sub>EM</sub>** sleep, the cause of the hallucinations. You can search the **Stanford Narcolepsy Questionnaire** to see the questions that are asked to diagnose this disease.*

*The loss of motor function (**cataplexy**) can be brought on by a strong emotion (laughing or crying, etc.). Treatment includes amphetamines, **Adderal** in combination with amphetamines, or **Ritalin**. Other meds include **Cylert, Provigil, Nuvigil, tricyclic antidepressants, and other anti-depressants from Paxil to***

*Effexor. Xyrem is the latest medication to be approved by the FDA. Because these patients are sleep deprived, they should have planned naps during the day. A support network is available [www.narcolepsysupportnetwork.org](http://www.narcolepsysupportnetwork.org) Reference—MedicineNet.com*

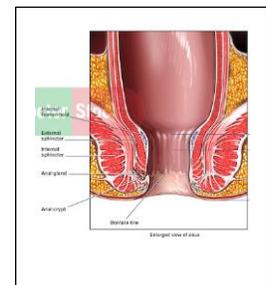
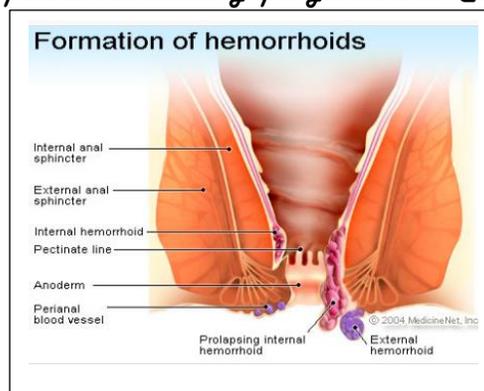
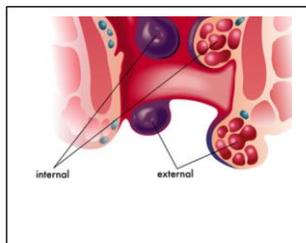
## 2. The top Medical News in 2013



1. *The American College of Cardiology changed its approach to following **cholesterol levels**. It switched to risk factors that cause the problem, and withdrew following actual levels of **LDL-Cholesterol** after initial findings. It also came up with a calculator of risk factors for doctors to use to define whether high or low doses of statins should be used. This change could increase the number of Americans on statins considerably. See last month's report.*
2. *Choosing Wisely Campaign—emphasis was made on **overdiagnosing and overtreating patients**. Stress echocardiograms were not recommended in asymptomatic patients. Judicious use of antibiotics for minor non-bacterial infections (i.e. colds), over use of ear tubes in children, decreasing the number of planned C-sections, less use of cardiac stents in asymptomatic patients, stop the ordering of CT scans for children with minor head injuries.*
3. ***Obesity was declared a disease** for the first time, allowing a more aggressive approach to diagnosis and treatment. \$190 billion is spent on obesity healthcare yearly in the U.S. and is rising fast.*
4. *There was better delineation of **post-concussion consequences of head injuries**, specifically cognitive deficits and depression.*
5. ***Angelina Jolie** made news regarding her decision to have bilateral prophylactic mastectomies because of her having the hereditary **BRCA-1** gene mutation which has a risk of 60-80% of these women having breast cancer in their lifetime, and ovarian cancer in 20-30%. It opened up the discussion on the fact that **too many women are opting for a second mastectomy** after an initial breast cancer (without the gene) when the risk is only 3-4%. It also points out the need to seek professional **genetic counseling** before seeking genetic testing if there is a history of breast cancer in a first degree relative. See a previous discussion on this subject in my previous reports. **Tom Hanks** came out about his **type 2 diabetes**.*
6. *There was a major drug alert about the erythromycin azithromycin (**zithromycin**) causing a specific **FK506** abnormality, **fluoroquinolones** (i.e. **Levaquin**) causing permanent neuropathy, **clarithromycin plus calcium channel blockers** (antihypertensives) causing acute kidney failure, and **statins** causing severe muscle damage, especially high doses, which can lead to muscle necrosis, joint dislocations, strains, and sprains. Certain **statins** can cause a mild elevation of blood sugar especially if the patient is on diuretics was publicized.*

7. **Calcium** supplements have a higher all cause **cardiovascular death rate**. Check with your doctor if you take calcium. **Coffee** can actually decrease the risk of certain cancers. **Sweeteners** can actually cause weight gain by increasing the desire for sweet tasting foods. There was some confusing information about antioxidants within cancer cells causing resistance to chemotherapy. Antioxidants have long been touted to be anti-disease foods. (more studies are needed).
8. **Probiotics** are very important in our guts and can help gastrointestinal diseases. They can help combat oral fungal infections and mucositis from chemotherapy. The bacteria in our gut have much more to say about our overall health than ever before. They also modulate brain activity and emotion in women. The microbiome is what these bacteria are being called, and I will report on this soon. **Fecal implants** can cure *C. difficile* infections in the gut from antibiotics have been very effective. These fecal bacteria are ingested in a capsule.
9. **Cinnamon** supplements have been reported to help lower blood sugar. A tsp. a day of real cinnamon may help. It also decreases cholesterol, helps stop medication resistant yeast infections, has anti-clotting benefits, and may help arthritis.
10. A new type of diabetic drug, **Invokana**, for type 2, inhibits glucose from being transported out of the cell. A new drug, **paroxetine**, used to perform a brain wave test to help diagnose *AD/HD*. **Sofosbuvir**, a nucleotide analog inhibitor was *FDA* approved to treat *Hepatitis C* which will dramatically improve the outcome of patients.
11. There are new drugs that may hold a cure for **HIV-Aids**, by crossing the blood-brain barrier and will reach the virus in the brain (triple antiretroviral/radioimmunotherapy).
12. The **Mental Health Parity Legislation** has increased the parity between mental health/substance abuse disorders with other health plan benefits. This is a big deal.
13. **The American Cancer Society** has announced that the death rate for cancer has dropped 20% in 20 years. 1,340,000 lives have been saved in that time. Wow! We are making great strides!
14. **Called the breakthrough of the year—cancer immunotherapy** that targets the patient's immune system, not the cancer itself, fights the cancer. **Yervoy and Nivolumab** combined to give a 53% clinical response rate for metastatic melanoma. Another drug that is experimental called **PD-L1 MPDL3280A** that gave lung cancer (non-small cell) patients a 21% response rate. This is a true beginning to help lung cancer patients. **fastly**, Lymphocyte T-cells are altered and replaced into the patient and have a complete clinical response in 19 out of 22 pediatric patients with chronic lymphocytic leukemia. Cancer research had some great news for patients in 2013.

### 3. Hemorrhoids



To understand hemorrhoids requires understanding the anatomy of the anus and the rectum. The anal canal is the first 4 centimeters (2.2cm to an inch) of the rectum. Above that is the rectum, which then

connects to sigmoid colon, descending colon, transverse colon, and ascending colon. The anal canal has a sphincter made up of muscle to prevent leakage. The blood supply of this canal has superficial veins, which dilate with straining and act as a cushion for the feces to pass out of the anus. These veins, when dilated and inflamed are called hemorrhoids.

75% of adults have hemorrhoids at some time, and 4% of the population seek medical treatment for this condition. There are 2 types of hemorrhoids based on where they begin. The dentate or pectinate line (see drawings) separates these two types: **internal and external hemorrhoids**.

**Internal hemorrhoids** are clumps of vascular tissue in the anal canal similar to a varicose vein with muscle and elastic fibers surrounding the actual vessel. The **external hemorrhoids** are enlarged blood vessels surrounding the anus. These occur from pregnancy, standing on your feet at work all day from gravity, straining with bowel movements, and some heredity. **Most importantly a rectal cancer above the anal canal can cause pressure on these vessels and create a hemorrhoid. Recto-sigmoidoscopy is mandatory before assuming that the cause is innocent. Hemorrhoids are more common in cancer, cirrhosis of the liver (which dilates veins in the body), leukemia, those with sexually transmitted diseases, anal intercourse, HIV/AIDS, and Crohn's disease because of frequent diarrhea (up to 25% have fissures and/or fistulas as well).**

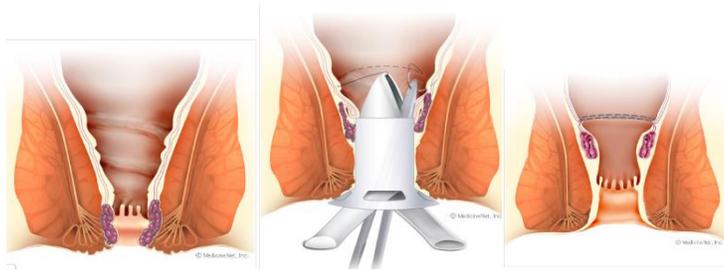
The complications are what bring a patient to the doctor (bleeding, itching, pain, prolapse, thrombosis, and strangulation with resultant scar tissue called a tag. A **thrombosed hemorrhoid** is very painful and usually external. These must be lanced and the blood clot removed for relief.

The **home treatment** of these cases starts with good personal hygiene using tucks or some wipe after defecation to prevent infection. **No straining at the stool, lubrication, stool softeners (psyllium or methylcellulose), high fiber diet, local anesthetics, astringents (witch hazel), and gels or creams that shrink the tissue.** These meds have decongestants just like for nasal decongestion (phenylephrine). **Hydrocortisone** containing suppositories also lower the inflammation that is a major problem with hemorrhoids. **Sitz baths** are very helpful to decrease the inflammation and dissolve small clots, preventing a thrombosis in a hemorrhoid. If there is considerable spasm trying to defecate, nitroglycerin (**glyceryl**) containing suppositories or **calcium channel blockers** in creams (actually meds for hypertension) can relax the sphincter with dilation using a finger cot. **Botox injections** work in 87% of the cases according to one study.

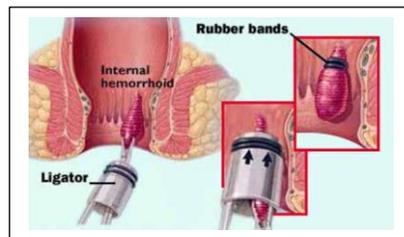
Frequently associated with having hemorrhoids are **fissures and less commonly fistula-in-ano with or without an abscess**. A fissure is a small tear in the anal canal tissue, which can continue to reopen with each stool. Therefore, the treatment is the same as the above. A **fistula starts as a fissure** which heals over leaving a small tunnel into the deeper tissues, which can get infected and cause a serious infection leading to an abscess. This is a surgical emergency. Pain and swelling around the anus with severe tenderness, and foul smelling drainage will alert the patient to see a doctor immediately.

80-90% of acute hemorrhoids heal spontaneously, and chronic ones 40%. That means 60% of those with chronic hemorrhoids will need some type of surgical intervention. The recurrence of these complications will give a patient no choice. **Conservative therapies** (sclerotherapy, botox, rubber band ligation) could be tried first, but if not successful, an operation may be necessary.

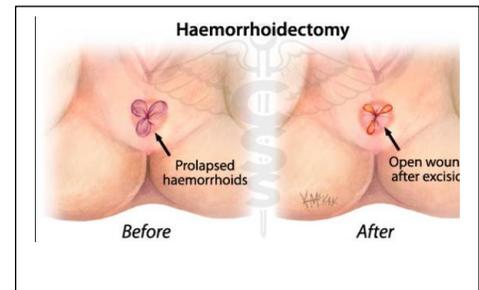
Surgical intervention requires a surgeon to provide the patient with a host of options. They include **cryotherapy, Doppler ligation of the vessels, sphincterotomy (partial cutting of the anal muscle), and hemorrhoidectomy**. There are different types of hemorrhoidectomy. Complications include stenosis from anal canal from scarring, further bleeding, and recurrence. Treating any underlying disease is important as well.



Hemorrhoids prolapsed! The Anoscope forces the hemorrhoids back up into place and allows a suture or stapler to pull the tissue up relieving the prolapse and allowing the hemorrhoids to heal.



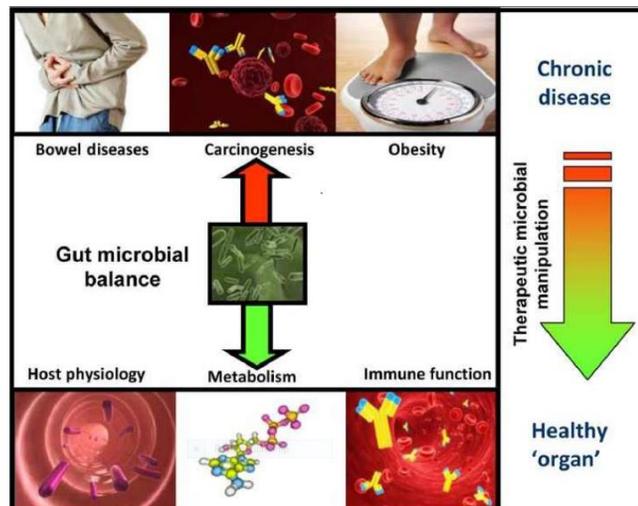
Rubber Band technique



Traditional hemorrhoidectomy

#### 4. Short Medical Subjects

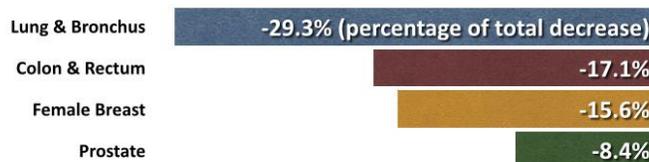
*A. The other metabolic organ you didn't know you had—our body's bacteria. There is more genetic influence from these bacteria in our bodies than our own DNA. It influences most serious diseases. We will know much more in the next few years. This table shows the influence these bacteria have on our bodies.*



*B. Cancer death rates are dropping, but there are some cancers rising in numbers. These 4 cancers (below) are the reason for the downward trends in death rates. Lung cancer is now being diagnosed with low dose CT scans and smoking rates are dropping. Colon and rectum is decreasing because of screening*

colonoscopies as are **breast cancers** because of mammography and fewer women are taking estrogen replacement therapy. The **PSA** tests are not being as frequently ordered, especially for men over 75, and therefore prostate cancer deaths are declining. Since 2008, it has been recommended to discuss whether a **PSA** test should be performed routinely, and obviously more men are not requesting it. It is a decision between a man and his doctor. However, in the past few years, there has been an increase in prostate cancer with spread when first diagnosed because the **PSA** is not being ordered. Even in the face of those stats, many men live out their life even with metastatic prostate cancer. You can't have it both ways. Major progress continues, however, **pancreas, liver, melanoma, uterus, and soft tissue sarcomas** are rising. More hepatitis C, type 2 diabetes with fatty livers, drug and alcohol abuse all contribute to pancreatic and liver cancer. Melanoma continues to increase because of heredity, poor use of sunscreens, tanning beds, and not seeing a dermatologist regularly for a skin check. Uterus cancer occurs in older women, and since the life span of women is increasing, and delay in diagnosis is occurring, there has been more deaths. Soft tissue carcinoma may come from so much radiation therapy for cancer patients as does skin and thyroid cancer.

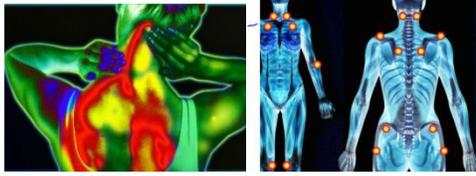
How death rates from four major cancers contributed to the downward trend in U.S. cancer death rates from 2001 to 2010



### *C. Finally.....a blood test for Fibromyalgia!*

*Epigenetics Co. in California has a simple blood test to diagnose **fibromyalgia**, a crippling auto-immune disease characterized by major fatigue, morning stiffness of most joints, and widespread pain, headache, anxiety/depression, "fibro fog"-cognitive, sleep problems, and numbness and tingling sensations in the extremities. There are several trigger points usually close to but not on the joints. It is hard to treat and the diagnosis has been questioned for years by many doctors if it was really a disease. Now there is finally proof with a protein in the blood that promotes the body to lessen pain. The levels in fibro patients are low compared to other patients, thus pain is felt more intensely. Their study cited a 93% accuracy. One problem is the cost=\$744.*

*Getting this test is a decision you and your doctor will have to make. If confirmation of the disease is the issue, when patients are demonstrating symptoms, then it may be worth the cost. The photos below show a thermogram with heat in the muscles and the other trigger points in fibro patients.*



*D. Increase in Medicaid recipients with Obamacare is predicted to log-jam the emergency rooms even more in 2014. Everyone was worried that the huge number of Medicaid recipients would jam the doctor's offices (which they will), but studies in Oregon are already showing that with an increase in Medicaid patients, they are increasing their visits to the ER as well. **This was not predicted by the feds.** So much for clearing out the ERs! These folks won't be able to find primary doctors in many cases and therefore will continue abuse of the ERs. That means longer waits for an appointment for you and me. Hopefully, with time, that prediction will reverse, but for the next few years, don't expect it. Reference: Medscape*

*F. Vitamin B-12 deficiency and acid reducers. For those of us who are on daily proton pump inhibitors (PPI) (Aciphex, Nexium, Prevacid, Prilosec, Protonix, and Dexilant- drugs to suppress acid in the stomach to prevent **gastroesophageal reflux**) and have been for a long time, need to know that there is a possibility of vitamin B-12 deficiency. It is not an issue for those on H2 inhibitors (Pepcid, Tagamet, Axid, Zantac), the other class of acid suppressors. Gastric acid is necessary for the stomach which produces an intrinsic factor necessary to absorb the vitamin from the stomach food. If you are not anemic, chances are you are ok, but talk to your doctor about it. A recent article listed it as a common side effect of these medications. One other note: if you take these acid reducers, it can reduce the magnesium in your blood and increase the likelihood of osteoporosis. That means for chronic users of it would be good to check the magnesium levels, take Vitamin D, and be sure you have had a Dexascan for bone density; always consult your doctor about this information.*

*F. There is a pill identifier found on the website -- [www.WebMD.com](http://www.WebMD.com)*

*Log on and describe your pill with the numbers on it, and chances are you will find your pill.*

*G. Stroke deaths have dropped 30% in America in the last 11 years according to a recent study from the University of Alabama at Birmingham. This decrease is due to better recognition of early strokes (time is critical), and faster treatment with "clot busters", but also due to better management of blood pressure, cholesterol, and type 2 Diabetes. That is not to say that we could be doing much better with weight loss, lowering cholesterol and triglycerides, decreasing type 2 Diabetes, and even better nutrition in our diets. But it is good news and now has **dropped to the #4 cause of death in America from #3.** Heart attacks are #1. We should be calling strokes...**BRAIN ATTACKS.** For more information, log on to [www.WebMD.com](http://www.WebMD.com)*

*Look familiar? This is an e-cigarette package*



*H. E-cigarettes are being heavily marketed in major cities, but not as a smoking cessation technique. I counted 5 advertising signs in the first mile from my home on Hwy 19 in Clearwater. Stopping the addiction of nicotine means stopping nicotine completely. These e-cigarettes are going to be misused, mark my word! Other drugs could also be placed in the cylinder. They are not yet FDA regulated, and many smokers continue to smoke and use e-cigarettes too when they need a nicotine fix where smoking is not allowed. There are those who swear by them to quit cigarettes. They do not have cancer causing tars, and that is great. Only one study reported in the Lancet medical journal that compared e-cigarettes containing nicotine, an e-cigarette with no nicotine but flavorings, and a nicotine patch in a large number of smokers, and there was NO Difference in quit rate after 12 months. The quit rate is 19-26%. Most go back to smoking regardless. This is a very hard addiction to kick, and many take 8-10 times before being successful. The oral addiction is also another factor in kicking the habit, and electronic cigarettes may form harmless visible vapor, but the simulation of smoking and inhaling is too close for comfort. The nicotine is absorbed through the lining of the mouth rather than the lungs. There is no second hand smoke, which is good. No long term studies have been performed as yet. The sale of these e-cigarettes must be going gangbusters. Discourage people from using them until we have more facts.*

*While on the subject of smoking cessation, 17% of American adults still smoke. There are good studies that report benefit from Chantix, and when combined with Wellbutrin, the sustained quit rate is even better, but willpower is still necessary. Staying quit is always the hardest, but if you "fall of the wagon", start over the next day. By the way, this is the 50<sup>th</sup> Anniversary since the US Surgeon General declared that smoking caused cancer. With the Clean Air Act, we have cleaned up our environment and decreased second hand smoke exposure. Thanks to organizations like the American Cancer Society!*



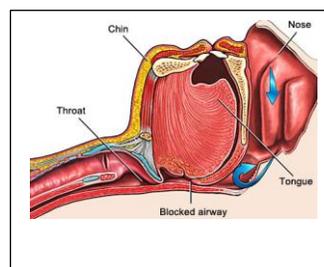
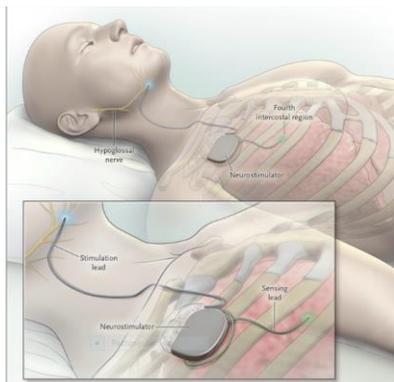
*I. Follow up on diabetic neuropathy from last month. The first line of treatment includes Neurontin, Lyrica, Cymbalta, and tricyclic anti-depressants. These essentially decrease impulses to nerves reducing pain, as much as 50% in 50% of diabetics. Now, triglycerides (the other fat besides cholesterol which causes atherosclerosis) are being considered a risk factor in neuropathies, and therefore the main treatment, which is fenofibrate, is now being recommended as an adjunct to treatment if the triglycerides are elevated. Ask your doctor, since recent studies report 50% reduction in diabetic minor extremity amputations. They also may reduce diabetic retinopathy. This is all new information, and the reason you read the Medical News Report! I will report more triglycerides next month.*

*J. Only 25% of primary care doctors ask specific questions about their patient's drinking alcohol habits and whether it interfered with their personal or professional lives. The federal healthcare agency (US Preventive*

Services Task Force) has officially asked primary care doctors to include asking all of their patients about alcohol use. Only 16% of patients, in one study, brought the subject up to their doctors. As physicians, we are obligated to monitor our patients for such important social habits. I guess the docs need to ask about marijuana use too, thanks to more and more liberal attitudes in this country. In 10 years, we will have studies condemning pot unless medically necessary, in my opinion.

⚡ **Obstructive sleep apnea** is a very common occurrence (13% of all males and 9% of all females) that I have reported on extensively in previous reports. The collapse of the throat muscles and the tongue create sleep apnea in most patients. The University of California, San Diego performed a study with the **implantation of a device under the skin of chest wall (see drawing below), much like a pacemaker, with an electrical wire directed to the nerve that stimulates the tongue, thus giving tone to the that organ that tends to fall into the airway during sleep.** There are many patients that do not tolerate CPAP (continuous positive airway pressure) or dental devices. This device has **3 components** 1) a wire to the muscles between the ribs (intercostal m.) 2) a neurotransmitter that gets impulses from the wire 3) a second wire that is run under the skin to the hypoglossal nerve deep in the upper neck, which is the nerve to the tongue. When the wire between the rib muscles senses no contraction of the chest wall during an apneic episode, a message is transmitted to the sensor, which in turn, sends a small electronic impulse to the tongue nerve. This creates tone in the tongue and reflexly the tongue comes off the back of the throat, the throat muscles are more toned and apnea is relieved. This ingenious study found tremendous success in a majority of patients relieving them of a major number of apneic episodes per minute (from 30 per minutes to 9). Without the significant apnea, all the abnormal physiologic responses are relieved, preventing hypertension, cardiac arrhythmias, pulmonary hypertension, strokes, heart attacks, etc. With refinement, I see this as a very viable alternative to CPAP when it is not tolerated or unsuccessful. Of course, surgery (uvulopharyngopalatoplasty) on the throat is very successful in selected patients. In my hands, over 60% were relieved of sleep apnea, especially with weight lost. Refer to my archives on the basics of obstructive sleep apnea [www.themedicalnewstepott.com](http://www.themedicalnewstepott.com)

the 3 parts of the sleep apnea pacemaker.



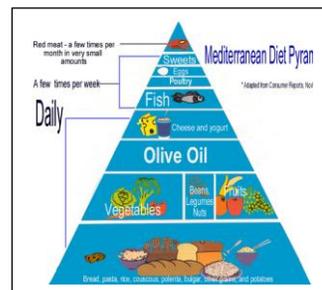
Anatomy of apnea

Surgical Results

*L. The Mediterranean Diet excels in reducing type 2 diabetes and many other diseases*



*Mediterranean Diet starts with Olive Oil!*



*This type of diet is not magic. It or any diet plan with around 1800 calories or less with nuts, olive oil, minimal refined sugars, reduced white flour products, reduced polyunsaturated fat, with lots of vegetables and fruits, fish, poultry, and less red meat will lose weight and prevent progression of the many diseases. It can taste as good as any diet. It really is not a diet....it is just a behavior modification of what is good for your body. Add exercise (30 minutes a day), and you are looking good. This type of diet has proven to reduce:*

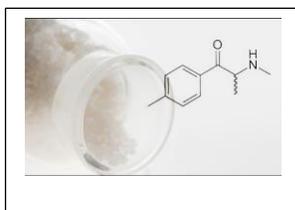
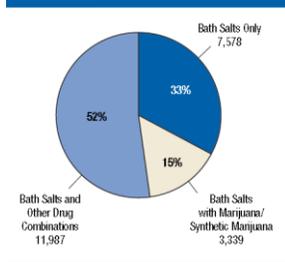
- 1. Type 2 diabetes even without weight loss*
  - 2. Kidney disease*
  - 3. Metabolic syndrome progression (hypertension, elevated lipids, elevated blood sugar, overweight, type 2 diabetes)*
  - 4. Fatty liver disease seen in obesity and type 2 diabetes*
  - 5. Insulin resistance*
  - 6. Cognitive decline*
- Annals of Internal Medicine, 2014*

*M. Bath Salts (cathinones) are a common reason for emergency room visits*

*Bath salts have been sold legally, but it is clear these hallucinogens are far from safe. These so-called bath salts are a group of synthetic drugs called **cathinones**. These are known to cause heart problems (arrhythmias, palpitation, and ischemia), hypertension, seizures, psychosis, and occasionally death. 33% of those who wind up in the ER are not just taking bath salts, but often are combined with pot, and other illicit drugs.*

*Be aware of these substances, because your kids may be taking them, and you need to ask them if they are experimenting with these. Just as I recently reported on "Molly" (the illicit designer drug- fctasy), these are very commonly used by young people. Be informed!! Reference: Drug Abuse and Mental Health Administration*

**Emergency Department Visits Involving Bath Salts, by Drug Combination 2011**



## *N. Differentiating a Cold from a Sinus Infection*

*Although there is a tremendous effort by medicine today to come up with guidelines and standards for every disease and medical situation (medical practice is not cook-book medicine), as much as the academicians would like us to believe. A physician's clinical acumen, experience, etc. allow that doctor to make a good medical decision. Physicians are trained to make decisions based on each individual patient. No two patients are exactly alike. Having practiced for 30 years and taught at LSU Medical School for 12 years, I and most physicians have made our decision based on the age of the patient, the co-morbidities (other chronic diseases the patient has), medications the patient is currently taking, the overall health of the patient, and patient potential compliance, etc. When I saw a totally healthy individual (child or adult), if that patient had classic symptoms of a virus or allergy, I would treat them with **decongestants** (Sudafed or phenylephrine if not hypertensive), a **mucus splitter** (Mucinex-guaifenasin), **nasal saline douches**, **extra rest**, **Tylenol** for fever and perhaps muscle ache. If I suspect the flu, I would prescribe **Jamiflu** if the symptoms had just begun in the last 1-3 days, and remind them not to forget their flu shot next year. After 4-5 days, if the color of the mucus thickened and turned yellow green, or they were developing bronchitis secondarily (which happens frequently), I would consider starting a round of **antibiotics** (ampicillin or an erythromycin antibiotic). Because of the heart issues that have recently been discovered, I would warn them about the possibility of heart irregularities from **Z-packs** or **Z-packs-rare**. I would examine the depths of the nose with an endoscope after vasoconstriction of the inside of the nose, to see if pus was coming from an opening of one or more sinuses. Listening to the chest is a must to rule out an asthmatic component or pneumonia. I would expect the patient to return in one week or sooner if any swelling occurred in the cheek or corner of the eye. If the teeth were sensitive (maxillary sinus), that would alert me as well. A cold that lingers can become an infection if a sinus can't drain. Just giving antibiotics right off the bat is poor medical practice.*

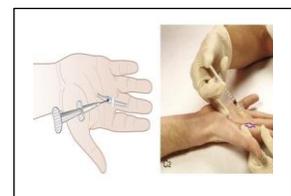
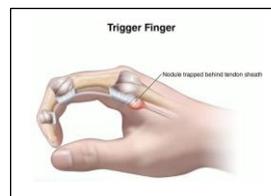
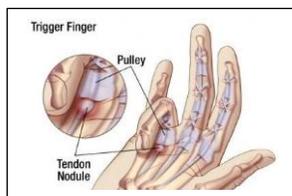
*Giving antibiotics early is not indicated, but it is the **responsibility of your doctor to decide**. Too many people push their doctors to prescribe unnecessarily for innocent colds and flu. **Antibiotic resistance** has occurred in the past decade or so because doctors give in to insistent patients. Colds take 7-10 days to resolve, and flu can take 2 weeks or more. Remember, the best way to fight a virus or an allergy attack is with more rest.*

*While I am at it, do not take antibiotics for a **sore throat** unless it is a strept throat. Let your body do the work. Get it?*

***Q. Does smoking increase post-operative complications?** The *Annals of Surgery* reported a 30% increase of complications and a 50% increase in risk of dying after colon surgery in smokers. The article pointed out that the number of cigarettes per day smoked correlated with an increased complication and death rate risk. I have read other articles in the past that stopping smoking for as little as a 2-4 weeks before surgery helps bring down the risk. Some doctors will not operate on smokers unless it is an emergency. As Obamacare switches the way doctors and hospitals are paid, to a lower complication rate, less readmissions, etc., smokers may be really up against the wall. Quit for God's sake.*

*P. I always suspected it!!! Taking a placebo, even when the patient knows it is a placebo, still works. A recent study reported that taking a placebo for migraine headaches still has the “placebo effect” of helping the patient with pain by the brain secreting endorphins (100 times more powerful than morphine). Is it just the act of taking a pill? These researchers think so. Half of the patients were given a bonafide migraine medicine and half were told they were being given a placebo (no chemicals in the pill were active). The very act of taking a pill at a given time has value, and in many cases is as valuable as the real medicine. Obviously, this was used on a painful condition. That does not necessarily mean a placebo can drop your cholesterol as well as a statin. But, it does point out the complex nature of treating pain, and how our own endorphins can be secreted if “just taking a pill” is of some clinical value. It also makes proving certain drugs are really beneficial above and beyond the placebo effect. Interesting!*

*Q. Trigger finger (digital stenosing tenosynovitis). This is an inflammation of the pulley tendon of the finger that allows flexion of the fingers. Trigger fingers are very common in people who use their hands extensively in sports (golf tennis, baseball, etc.) or in manual labor. With overuse, inflammation of the tendon occurs just in front of the sheath that keeps the tendon in place causing an inflammatory nodule (see drawing). This inflammation can also occur in patients with arthritis, especially rheumatoid.*



*Classically the finger starts sticking when flexed, and as it worsens will require the other hand to pull the finger back out straight. Conservative therapy includes ice, stretching, and non-steroidal anti-inflammatory meds (Aleve, Motrin, etc.)*

*A cortisone injection usually will fix the problem, but if it does not help after 2 injections, surgical repair is necessary to remove the swollen nodule on the tendon. The sooner the finger is injected the better.*

*R. The Federal Screening task force (USDTF) has recommended routine screening for all pregnant females after the 24 week of gestation. Because of the risks to baby and mother of undetected gestational diabetes, OB doctors need to be more aggressive in detecting this pre-diabetic state.*

*S. Don't let the feds reduce the length of medical school to churn out doctors faster!*

*This is stupid! The push from the feds to churn out more doctors because of a shortage is not the way to resolve the shortage of physicians. They have already allowed 17 states to legally allow nurse practitioners to practice medicine without supervision from a physician, and there is a big lobbying effort from them to be uniformly able to practice independently from supervision. I am not against PAs and nurse practitioners. They are a vital extension of any doctor's practice. Most surgeons have these outstanding well-trained PAs to assist with surgery, see patients in the hospital and office and allow more patients to be followed by any one doctor. PAs and nurse practitioners can see less complicated patients and can expedite management. But I*

feel strongly that these professionals still need a guiding hand. In my practice, I frequently asked one of my partners for their opinion. For a nurse to be able to practice independently is an error in judgment, in my opinion.

*The push to limit medical school to 3 instead of 4 years does not allow doctors to develop enough maturity and confidence to practice medicine at the highest level. It is the reason that GPs today have to go through a residency for family practice. The complexity of medicine continues to increase, and therefore requires constant updating of the physician's knowledge. Having researched these medical news reports has vastly improved my overall knowledge of medicine. Just keeping up with ENJ, Facial Plastic Surgery, and Head and Neck Surgery was a full time job while I was in practice for 30 years. Doctors today get pigeon-holed into not knowing nearly enough general medicine. It creates unnecessary specialty consults, more tests, and covering their butts because of the legal profession.*

*The doctor business has tried limiting training before, by dropping the internship. That year allowed me a giant step in maturity and confidence when I started my residency. Doctors are not just technicians. They require a keen sense of diagnostic acumen, sizing up each patient based on the huge complexity of overlapping conditions that might influence the current complaints. Fully 60% of patients have more than one major illness to deal with as they age. Don't let the system dumb down your future doctors!!!*

*J. Obesity—Most of the risk for vascular disease come from 3 of the metabolic factors in the metabolic syndrome. 1) hypertension 2) high lipids 3) type-2 diabetes!! These 3 factors, which are 3 of the factors that make up the metabolic syndrome and account for 76% excess risk for stroke and 46% excess risk for coronary artery disease. Hypertension is the most potent factor of the 3. These factors are more important for risk than even losing weight. I have harped on the metabolic syndrome many times, and this combination of several studies confirms the potency of these factors. Losing weight is, of course, part of getting those risk factors under control. **Let me add an additional factor to the risks: Gout!** Most people who have gout have these other factors as well. I will discuss more on gout next month when I resume the discussion on obesity, even though I have reported on gout as a form of arthritis in a previous report a year ago. [www.themedicalnewsreport.com](http://www.themedicalnewsreport.com) reference The New England Journal of Medicine, 2014*

*This completes the February Medical News Report. It is my pleasure to provide you with more medical information to empower you to take control of your medical problems and do a better job of controlling your medical problems. Happy Valentine's Day (love is the greatest gift)! Stay healthy and well, my friends, Dr. Sam*

