

# This Month's IMJ

This Month June 2019, Vol 112, No. 6

## Commentary

### [Measles Outbreaks Continue to Cause Concern](#)

J.F.A. Murphy

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## Editorials

### [Challenges of Cancer Screening](#)

D. Kelly, M. O'Connor

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## Original Papers

### [The Prevalence of \*Pseudomonas Aeruginosa\* Infection Over a Ten-Year Period in Children with Cystic Fibrosis](#)

**K. Al Shidhani, R. O'Reilly, S. Javadpour, N. O'Sullivan, P. McNally, D.W. Cox**

Shidhani et al found that the overall *Pseudomonas aeruginosa* (PA) prevalence was 28.1% in '04 and 21.3% in '14. In 2014, 49% of CF children were never infected with PA. PA infection is declining.

Table 2: Prevalence of different types of PA infection among the different age groups in 2004 compared with 2014:

	Chronic	Intermittent	Free	Never
<b>2004</b>				
0-5 years	4.3%	10.9%	17.4%	67.4%
6-11 years	28.8%	30.8%	19.2%	21.2%
12-18 years	45.2%	21.0%	14.5%	19.4%
Total	28.1%	21.3%	16.9%	33.8%
<b>2014</b>				
0-5 years	4.7%	7.0%	11.6%	76.7%
6-11 years	14.0%	7.0%	28.1%	50.9%
12-18 years	39.1%	6.3%	26.6%	28.1%
Total	21.3%	6.7%	23.2%	48.8%

## [Awareness and Preventative Behaviours Regarding Toxoplasma, Listeria and Cytomegalovirus Among Pregnant Women](#)

**I. Basit, D. Crowley, M. Geary, C. Kirkham, R. Mc Dermott, M. Cafferkey, G. Sayers**

## [Key Performance Indicators in Paediatric Anaesthesia](#)

**K. Doody, D. Barry, C. Holmes**

Doody et al studied the post-operative nausea and vomiting (PONV) and post-operative pain rates in children after anaesthesia. 12% had a pain score greater than 4/10. 1.2% had PONV.

**Table 1 : Incidence of Post Operative Pain**

	Number of patients	%
Pain	86	12%
No Pain	657	88%

**Table 3 : Incidence of PONV by Surgery Type**

	Number of Patients	%
Orthopaedics	2	13%
General	5	33%
Plastics	3	20%
ENT	3	20%
Neurosurgery	1	7%
Ophthalmic	1	7%

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## [Hip Fracture and the Weekend Effect in an Irish Trauma Hospital](#)

**C. Downey , S. Flannery , A. Izydorczyk, J.F. Quinlan**

Downey et al report that among 646 hip fractures, 178 (27.5%) were admitted at weekends. 183 (28.4%) underwent surgery at the week-end. 93 (14.4%) were admitted during the NCHD changeover months in Jan and July. There was no difference in outcomes.

Table 2. Univariate Logistic Regression Analysis

Variable	Number (%)	Univariate Logistic Regression OR [95% CI]*
Weekend Admission	172 (27.5)	1.053 [0.669 – 1.656]
Weekend Surgery	178 (28.4)	0.843 [0.531 – 1.340]
NCHD Changeover Admission		
Jan/July	93 (14.4)	0.813 [0.441 – 1.497]
Other	553 (85.6)	

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[Caring for Caregivers: An Evaluation of Schwartz Rounds in a Paediatric Setting](#)

**A. Silke, H. Rushe, K. Keating, R. Thurstan E. Barrett**

Schwartz rounds (SR) are a multi-

-disciplinary intervention to support healthcare professionals in their work. Participants share their experience around a pre-selected theme. In a survey of 189 staff, the majority (95%) found the SRs beneficial.

**Table 2: Items, means, standard deviations, 5-item responses and number of respondents for each item for statements in the questionnaire**

Item	Mean	SD	n (out of 189)
Helps me to do my work	3.88	0.57	189
Helps me to work with patients	3.77	0.67	184
Helps me to work with colleagues	3.50	0.50	184
Helps me to learn	3.50	0.60	188
Understanding colleagues work	3.50	0.57	184
Understanding my own work	3.48	0.58	189
Helps me to work with my patients	3.47	0.67	189
Recommend Schwartz reports to colleagues	3.30	0.50	182
Engaged in work	3.22	0.60	180
Overall score	3.36	0.55	182

**Impact of Introduction of a Clinical Pathway for the Management of Pyelonephritis on Obstetric**

Pa-  
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Project

**L.**  
**Clooney**  
**, A. Ron-**  
**ayne, K.**  
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**Bren-**  
**nan, N.**  
**Hickey,**  
**C.**  
**Magee,**  
**S. Coo-**  
**ley, M.**  
**Eogan,**  
**R.J.**  
**Drew**

Clooney  
et al  
studied  
23 pa-  
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and 19  
patients  
post-in-  
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tion of a  
clinical

pathway.  
The proportion receiving antibiotics for 10 or more days reduced from 48% to 21%.  
The proportion who received Gentamicin increased from 13% to 52.6%.  
The proportion who had a renal ultrasound increased from 17.3% to 47.3%.

## Research Correspondence

### Solitary Plasmacytoma Management and Outcomes

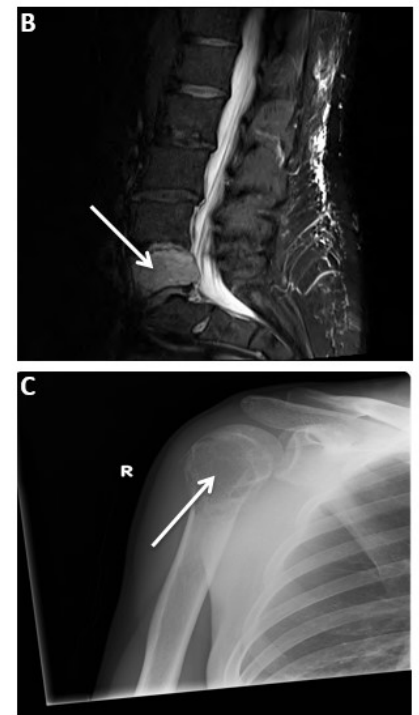
**C. Comerford, S. McKey, N. Wallace, O. McArdle, C. Faul, S. Glavey, J. Sargent, P. Thornton, P.T. Murphy, J. Quinn**

Comerford et report on 17 cases of solitary plasmacytoma (SP) over a 17 year period. The condition is related to multiple myeloma which in contrast is characterized by widespread involvement.

**Figure 1**

<b>A</b>	<b>ALL PATIENTS</b> (n=17)	<b>SBP</b> (n=15)	<b>EMP</b> (n=3)
<b>Demographics:</b>			
Median Age* (yrs) (range 27-73)	48	49.5	41
Male (n)	15	15	1
<b>Site:</b>			
Vertebral	8	8	-
Skull	4	4	-
Humerus	1	1	-
Pelvis	1	1	-
Extradural space	1	-	1
Nasopharynx	1	-	1
Oropharynx	1	-	1
<b>Serum paraprotein present</b>	12	9	3
<b>SFLCr:</b>			
Tested (n=13)	13	11	2
Raised at diagnosis	4	4	0
Progressed if raised	1	1	0
<b>Progression to MM</b>	5	4	1
<b>Median time to progression (yrs)</b> (range= 0.5-18yrs)	2.2	-	-
<b>Alive**</b>	16	14	2

\*Median age at diagnosis \*\*At last clinical review



**A.** Baseline characteristics, investigations and outcomes **B.** L5 solitary bone plasmacytoma **C.** Right shoulder solitary bone plasmacytoma

## Case Reports

### Hypercalcaemia due to Hypervitaminosis D in a Self-Supplementing Multiple Sclerosis Patient: A Case Report

## E. Duffy, M.J. Brassill

Duffy and Brassill describe a patient with MS who presented with hypercalcaemia following vitamin D self-medication. The initial serum Ca 3.69 umol/L was extremely high and the vitamin D was 1617 nmol/L. He was treated with IV fluids, prednisolone and calcitonin.

	1 <sup>st</sup> admit	1 <sup>st</sup> D/C	OPD 1: 2 <sup>nd</sup> admit	2 <sup>nd</sup> D/C	OPD 2	OPD 3
Urea (mmol/L)	14.1	6.4	13.2	6.5	5.4	4.4
Creatinine (µmol/L)	312	168	267	152	118	95
eGFR (ml/min/1.73m <sup>2</sup> )	18.7	38.4	22.5	43.1	57.7	60
Corrected Ca (mmol/L)	3.69	2.55	2.77	2.4	2.38	2.4
25-OH Vit. D (nmol/L)	1617				846.5	

Table 1: Progression of blood results from first admission through to third outpatient review at six months post initial presentation

## [Metastatic Solitary Fibrous Tumour of the Kidney Presenting more than a Decade Later with Pulmonary Disease](#)

### A. Daly, A.M. Dorman, J. Hinchion

Daly et al describe a case of a renal fibrous solitary tumour (SFT) that was removed. 11 years later the patient re-presented with an SFT in the right upper lobe of the lung. The tumour was successfully removed.



Image 1: 3.4cm right upper lobe mass at the oblique fissure



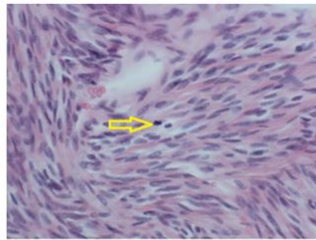


Image 2: (a) Primary renal tumour. H + E stained section x400 showing tumour with spindle shaped nuclei and pale eosinophilic cytoplasm with mitotic figure (arrow)

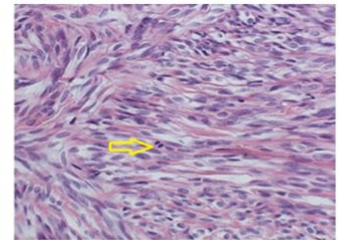


Image 2: (b) Lung tumour. H + E stained section x400 with similar histology, also mitotically active (arrow)

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## Bilateral Neonatal Suppurative Sialadenitis Progressing to Abscess Formation in a Preterm Neonate

**N. Shaughnessy, T. McGrath, M. Moore, B.H. Walsh**

Shaughnessy et al report a 27 weeks gestation infant who developed bilateral submandibular masses at age 18 days. Bilateral sialadenitis was diagnosed on ultrasound. She was treated with antibiotics and needle drainage of the abscess.



Image 1



Image 2

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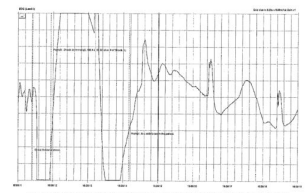
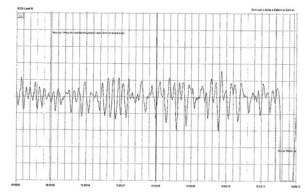
## Commotio Cordis Caused During Hurling Game

**C. Connellan, S.**

**Kelleher (co-authors)**

**Islam, D. Kenny, A. James, T. Prendiville, K. Walsh**

Connellan, Kelleher et al report the case of a 14 year old boy who had a cardiac arrest following a blow to the chest by a hurling ball. His mother, a nurse, commenced CPR on the pitch. An AED was applied and one shock achieved return of spontaneous circulation. The down time was less than 4 mins and there were no neurological sequelae. After admission to hospital he had further shorter runs of ventricular tachycardia that responded to medication.



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## Letters to the Editor

### Laparoscopic Guided Regional Analgesia (Lagra) Reduces Post-Operative Pain After Laparoscopic Cholecystectomy

**D. Joyce, R. Craig, S. Mansoor, S. Toomey**

### Parental Support Experience Following Late Miscarriage, Stillbirth or Neonatal Loss at a Regional Hospital

**R. Mc Govern, M. Pentony, L. Dempsey, P. Gaffney, A. Finan**

### Is the Current Consent Process Appropriate for Patients and Fair to Newly Qualified Doctors?

**P. Rohan, G.D. Keane, C. O'Connell, M.K. O'Reilly, G.J. Nason**

### "No DVT" is not a Diagnosis, Discharge Diagnoses in Patients Investigated for Deep Venous Thrombosis

**S. Gilmartin, C. McInerney, V. Varley, B. McNicholl**

**Feasacht Sláinte: Irish Medical Students' Perspective on the Importance of**

## **Continual Professional Development**

Please take our quiz (link below), at the Irish Medical Organisation to earn extra CPD/CME points.

### [\*\*CPD QUIZ\*\*](#)