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Admission of elderly people with dementia to long term care

Coping with someone with moderate or severe dementia at home is difficult, and consequently many such people live in residential homes or long stay hospital wards. Providing help for relatives or other carers might reduce the number of people with dementia admitted to long term care. On p 871 O'Connor *et al* describe a controlled study in which people with dementia and their carers were offered wide ranging support. Support had no effect on admission rates in subjects who lived with carers but increased the rates in those who lived alone. This may reflect the fact that usually people with dementia living alone do not become known to the authorities until neighbours or families become unable to cope.

Depression in mothers of twins

Motherhood presents stresses that may cause some women to become depressed, and among mothers of twins the additional stresses associated with multiple pregnancy, birth, and subsequent childcare may contribute further. On p 875 Thorpe *et al* analyse the data from the five year follow up of the 1970 British birth cohort, comprising 139 mothers of twins and 12 573 mothers of singletons. All mothers completed the Rutter malaise inventory—a measure predictive of depression. Mothers of twins had a significantly higher proportion of scores indicative of clinical depression, suggesting that five years after the birth of their children they are more vulnerable to depression than mothers of singletons. Depression was particularly prevalent in mothers who had borne twins when one of the twins had died. The authors call for better preparation of potential mothers of twins and follow up support after the birth.

Second routine neonatal examinations

Though the routine examination of each neonate shortly after birth is accepted as a valuable medical surveillance procedure, the necessity for a second detailed examination is questionable. In a prospective survey of all routine examinations of 1795 neonates before discharge Moss *et al* (p 878) confirmed the initial examination as an effective means of child surveillance. The value of the second examination was chiefly limited to detecting hip abnormalities, and Moss *et al* conclude that a second, detailed neonatal examination cannot be justified but that a repeat examination of the hips in the first week of life is necessary.

Management importance of common surgical procedures

A surgeon's workload may be largely encompassed by relatively few different procedures performed in many patients. On p 882 Ellis reports a study that showed

that as few as 20 surgical procedures accounted for over 70% of the workload. Transurethral prostatectomy was the treatment that consumed most resources. He concludes that clinicians must ensure that these most common treatments are performed well and costed accurately as they contribute disproportionately to overall results and use of resources.

Treatment of ankle injuries

Ankle injuries are among the commonest causes of referral to accident and emergency departments. Some evidence suggests that radiography may be used too often to diagnose these injuries and that patients without fractures receive inadequate follow up. After reviewing departmental procedures Packer *et al* (p 885) introduced an algorithm for treating ankle injuries. Although the number of patients receiving radiography fell by 9%, patients referred to the soft tissue clinic more than doubled in number and inappropriate referrals to the fracture clinic were reduced.

Cholesterol screening and life assurance

Prevention may be better than cure, but it is not without its hidden costs. On p 891 Neil and Mant report on the effect of cholesterol screening on term life assurance. In a survey of 49 companies underwriting life policies in the United Kingdom companies expect to be informed of the results of screening, but increases in term life assurance premiums were likely to be restricted to patients with severe hypercholesterolaemia, in particular familial hypercholesterolaemia. In the absence of other cardiovascular risk factors milder degrees of hypercholesterolaemia were unlikely to result in higher premiums. For patients with multiple risk factors or with familial hypercholesterolaemia the increase in premium may be substantial. The authors found a surprising variation among companies in excess mortality rating. Unfortunately, they do not identify the companies giving preferential rates.

Indication for prostatectomy

Elderly men who experience difficulty with micturition postoperatively are assumed to have bladder outflow obstruction due to an enlarged prostate gland. Once they have failed their trial without a catheter they often have a prostatectomy. On p 894 Anderson and Grant present their findings of a prospective study of 32 elderly men, which show that postoperative urinary retention is not an indication for prostatectomy. Of 22 men undergoing urodynamic evaluation within one month after referral, only five had bladder outflow obstruction. In the remaining men, most of whom had a low pressure-low flow voiding pattern or complete detrusor inactivity, spontaneous voiding returned with intermittent self catheterisation, and the men were subsequently able to discontinue self catheterisation.