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Confusions in everyday medicine

The thermometer is one of doctors' most traditional tools, and so it's a shock to discover that about one in seven general practitioners never uses one while some general practitioners use them two or three times a day (p 961). Here is another area of medicine in which custom predominates over science. A further topic of confusion is where to measure the temperature, and Duncan Keeley advocates overcoming Anglo-Saxon sensibilities and using the rectum in infants (p 931).

Another issue that arises in everyday practice is when to offer antibiotic prophylaxis to patients undergoing dental treatment. R A Cawson summarises the user friendly guidelines from the British Society for Antimicrobial Therapy on giving prophylaxis against infective endocarditis but considers too whether to offer prophylaxis to patients with artificial joints (p 933). Many Americans recommend such prophylaxis routinely, and half of 104 orthopaedic surgeons surveyed in Britain also recommend it (p 959). But

Professor Cawson says that the risks of such prophylaxis exceed its benefits.

Three papers that we publish today throw new light on drug side effects. A paper from Sweden reports 36 cases of angio-oedema caused by angiotensin converting enzyme inhibitors (p 941), while a second paper from Sweden shows how β_1 blockers can have adverse effects on the haemodynamics of fetuses when the drugs are given to their mothers and might thus damage fetal development (p 946). Thirdly, a follow up of 16 422 children cured of cancer found that exposure to epipodophyllotoxins greatly increased the chance of developing leukaemia (p 951).

Finally, the suggestion of Peter Richards and the Council of Deans that the preregistration period in Britain should be increased from one to two years has provoked a large correspondence (p 980). There seems to be a generation divide in the response, with most younger doctors suspicious of the idea.