

Abstracts from the Journals of the East

Pages with reference to book, From 184 To 185

Analysis of Drug Abuse among Adolescent Psychiatric In-patients at Veterans General Hospital, Taipei. Yeh, H.S., Chen, Y.S., Sim, C.B. Chin.Med.J. (Taipei), 1995;56:325-330.

The psychiatric in-patients records of Veterans General Hospital, Taipei were reviewed to analyse the drug abuse among adolescents. The period studied was from January, 1991 to June, 1993. There were 296 admissions of 260 adolescents (upto age 21 years) of various psychiatric problems. Thirty-eight admissions of 27 youngsters were related to drug abuse. Only 27 subjects were analyzed as the others had repeated hospitalizations. There were 23 boys and 4 girls with a mean age of 19 years. All had left school, 26 were single and one girl cohabited with a man.

Twenty-one adolescents abused mainly amphetamine, 4 used glue simultaneously and 2 girls smoked heroin. Fourteen were taking alcohol daily. The age for starting alcohol was 15.6 years and for amphetamine 16.8 years. Glue sniffing began at 15.4 years. Heroin smoking was started by the two girls at 18 years age. Fourteen adolescents tried abstaining from the substances for abuse without success which they attributed to craving, peer pressure and boredom. Family problems were the prime cause for drug abuse in 16 cases. Of these 7 had lost their parents, 5 had parents with marital discord and 6 with inconsistent attitude and 4 mothers were psychotic. Misconduct behaviour had been reported in 10 patients of the 21 cases who were on amphetamine, 17 were diagnosed as amphetamine induced delusional disorder. One each was labelled as amphetamine intoxications, schizophreniform disorder and schizophrenia. The average hospital stay was 18.3 days with 14 showing violent behaviour. After discharge only half the patients came for a follow-up more than 3 times.

It was concluded from the study that amphetamine was the most popular drug of abuse among adolescents in Taiwan and that family factors are the prime predisposing factors for the misuse of drugs.

Maximum Mid-Expiratory Flow Rate: A Better Index of Detection of Early Small Airway Obstruction Than FEV1 in Healthy Smokers. Ansari, A.K. Pak.J.Med.Res., 1995;34:112-114.

Expiratory spirometry was performed on 40 male asymptomatic smokers of ages between 21 and 40 years. All inhaled and considered themselves in good health. There was no past history of any serious chest disease and there had been no respiratory tract infection in the previous 3 months. The control population consisted of 26 healthy subjects who had never smoked. Body mass index was determined and those individuals with figures more than 30 were excluded.

Expiratory spirometry was performed on S-model vitalograph. The spirometric variables as FEV_i (forced expiratory volume) and MMFR (maximum mid expiratory flow rate) decreased with age in both the study and control groups but did not have a significant value. In the smokers, MMFR was found to be significantly lower in the 31 to 40 years group. The measure of the lung capacity to ventilate depends on timed vital capacity and flow rates. It has been reported that MMFR is the test most affected by small airway obstruction. Other studies have shown a reduced MMFR and an elevated residual volume in asymptomatic smokers. This study concluded that MMFR is a better and a more sensitive test for early detection of small airway obstruction in healthy asymptomatic smokers.

Peripheral Nerve Injury induced by Cryotherapy. Kabir, M.R., Shcikh, A.S., Chowdhry, I.H., Shamim, G.A.S.M. Bangladesh Med.J., 1995;24:25-27.

Five cases of peripheral nerve injury secondary to cryotherapy are presented. There were 4 male footballers and one female sprinter. Cryotherapy with ice pack application caused neural injury to the perineal nerves in the 4 males and to the lateral femoral cutaneous nerve in the female sprinter. Ice bags had been applied for 30 to 50 minutes after acquiring the injury to the respective area during sports. Decreased sensation and motor power were observed between 30 and 40 minutes. All the players were

advised rest and to abstain from games. Recovery was complete in all.

Cooling of nerves from 5° to 8°C produces variable lesions ranging from a mild conduction block to Wallerian degeneration. The thickness of the subcutaneous fat acts as an insulation. The more the thickness the bigger will be the distance between the cooling source and the nerve. The warming provided by the circulation is reduced by the vasoconstriction due to the cooling. Cryotherapy in acute injuries can thus cause neuropathies which may be transient or prolonged but eventually full recovery is had.

Comparative Study of Haemorrhoidectomy with Rubber Band Ligation for Second and Third Degree Haemorrhoids. Shaikh, A.R., Ahmed, I. Specialst; PakJ.Med.Sci., 1995;12:39-45.

A prospective study was conducted on 120 patients with second and third degree haemorrhoids, subjected either to rubber band ligation or haemorrhoidectomy. The results of the two procedures in terms of complications, relief of symptoms and patient convenience were noted. All the patients were between 30 and 40 years age and the male to female ratio was 5:1. All patients with first or fourth degree haemorrhoids, rectal prolapse, carcinoma rectum, anal fissure and polyp were excluded. Rubber band ligation was performed as an outdoor procedure using the BarronLigator. No anaesthesia was given.

Haemorrhoidectomy was carried out under general or spinal anaesthesia and the standard procedure of low ligation and excision was done. Sixty patients were included in each group. The mean duration of symptoms was 3 years with bleeding per rectum being the main complaint in 96.6% cases.

Constipation was present in 83.3% patients with three haemorrhoids in 60%.

Bleeding was encountered in 3 subjects undergoing haemorrhoidectomy and one from the rubber band ligation group. Post-operative pain occurred in all the former group cases and only in one case from the latter. Urinary retention was observed in 35 patients from the haemorrhoidectomy group. A one year follow-up in both groups with 40 patients reporting in the rubber band ligation procedure showed 37 to be asymptomatic, two still continued to bleed and one had no improvement. Of the 25 patients returning in the haemorrhoidectomy group, 24 were asymptomatic and one was still bleeding. The mean time off work was 3 days in the rubber band ligation group and 2 to 4 weeks in the haemorrhoidectomy group. The study results concluded that rubber band ligation as an out-patient procedure is a good alternative to haemorrhoidectomy with adequate long term effectiveness, convenience and less loss of working days.