

SELECTED ABSTRACTS FROM NATIONAL MEDICAL JOURNALS

Pages with reference to book, From 58 To 59

Fatema Jawad (Sughra Bai Millwala Hospital, North Nazimabad, Karachi.)

FORCEPS DELIVERY. Memon, M.A. The Medicus, 1969,39:67-69.

625 deliveries conducted in the period January to July 1968 in the Obstetric Unit of a teaching hospital in Lahore were analyzed. 394 were non-booked cases and 231 were booked ones. 51 were forceps deliveries with the primiparas having a ratio of 2.4:1 with the multiparas. Anaesthesia used was local infiltration with pudendal block in 48 women and 3 required general anaesthesia. In these 3 cases 2 babies had a birth weight of more than 10 pounds and one lady was an eclamptic case. There were two neonatal deaths in the series both being in the non-booked cases, and with one of the mothers having eclampsia. The other neonate had asphyxia following mid-cavity forceps delivery. Most of the non-booked cases had been handled by unqualified midwives with no skilled antenatal care and were brought to the hospital as a last resort. Maternal morbidity was due to pyrexia, retention of urine, infected episiotomy wounds or its breaking down. The incidence was also higher in non-booked cases. It was concluded that the procedure of forceps delivery is safe with skilled judgement of the indications. Local anaesthesia is adequate except in severe toxæmic cases where general anaesthesia is more advisable.

BLOOD LIPID-URIC ACID INTER RELATIONSHIP IN PATIENTS WITH CORONARY HEART DISEASE. Beg, M.A., Siddiqi, M.K., Abbasi, AS., Raza, M., Masood, A. and Syed, S.A. The Medicus, 1969,39 :51 - 55.

149 patients with coronary heart disease, diagnosed on the lamb criteria, were investigated for levels of serum cholesterol, triglycerides and uric acid. The ages ranged between 32 and 80 years with the average body weight being 133 pounds. 14 patients had hypercholesterolaemia (more than 275 mg/100 ml), 82 cases had hypertriglyceridaemia (more than 150 mg/ 100 ml) and 18 had hyperuricaemia (more than 6.5 mg/ 100 ml). A close association was found between triglycerides and uric acid with the group with raised triglycerides having 9 of the 18 cases of hyperuricaemia. This corresponds with the findings of Berkowitz and others. It was thus concluded that triglyceride levels might prove to be a better index for detecting coronary prone individuals. The relation with uric may direct attention to another means of reducing blood lipids by way of uric acid.

SOME EXPERIENCE WITH PROPRANOLOL. Muhammad, A. The Medicus, 1969, 39: 56-60.

Propranolol was used in patients suffering from angina pectoris, cardiac arrhythmias and Fallots tetralogy. 12 patients with angina pectoris of which 11 were males and one female and with ages ranging between 39 to 67 years were given Propranolol in a dose of 10 mg four times daily. All patients had a normal heart size and no evidence of compromised cardiac reserve. Two were mild hypertensives. The dose of the drug was increased by 10 mg every fourth day till a total of 400 mg or if any side effects occurred. Nitroglycerine tablets were used in case of chest pain and this was documented. 3 patients showed an excellent response (no anginal attacks). 6 individuals had a good result graded by the decrease in the nitroglycerine by 75 percent to the pre-trial consumption. Two cases were classed as fair with a reduction in the nitroglycerine by 25 to 50 percent. One patient had a decrease of less than 25 percent in the Nitroglycerine requirement and was graded as poor. Propranolol was also put to use in cardiac arrhythmias such as ventricular ectopic beats, supraventricular and ventricular tachycardias and gave good results. In Fallots tetralogy propranolol reduced the number of anoxic spells. It was concluded that selected patients of angina pectoris benefit with propranolol.

TRIMETHOPRIN AND SULPHAMETHOXAZOLE (SEPTRAN) IN THE TREATMENT OF PNEUMONIA. Chaudhry, N.A., Shahnaz, N., Khan, N., Saleem, A. The Medicus, 1969, 39: 157-

162.

15 patients with lobar pneumonia and one with suppurative pneumonia were treated with Trimethoprin Sulphamethoxazole. 13 were males and two females with ages ranging between 17 and 50 years. All patients presented with fever, chest pain, cough and breathlessness (except in 2 cases). Chest examination revealed signs of consolidation which were confirmed by radiology. Sputum culture was positive in six cases of pneumonia giving a growth of diplococcus pneumoniae in 3, Staphylococcus Aureus in 2 and Klebsiella pneumoniae in one specimen. The sputum of the lung abscess patient also had a positive growth of staphylococcus. The drug was dispensed in tablets containing 400 mg of Trimethoprin and 80 mg of sulphamethoxazole and each patient was given 2 tablets thrice daily for 10 days in the pneumonia cases. The lung abscess patients had to take the drug for six weeks. Liver function tests, blood urea, total leucocyte count and ESR were estimated at the start of treatment and a day before stopping the therapy. The patients became afebrile in an average period of 1.8 days. 80 percent of the cases were relieved of cough in 10 days and were free of chest pain in 8.2 days. Physical signs improved in a mean of 7.6 days and radiological normality was achieved in 12 cases after 14 days of therapy. No physical or biochemical side effects were noted. The patient with lung abscess became afebrile on the sixth day, the sputum stopped on the eighteenth day and the cavity was obliterated after 42 days of starting the drug. The study went to prove that trimethoprin-sulphamethoxazole gave excellent results in cases of pneumonia and lung abscess with no complications or side effects.