

CARPHOLOGY by A Fo Ben



Pract Neurol 2009; 9: 190

Unnecessary imaging for back pain

The temptation to image the lumbar spine in patients with low back pain (but without features suggesting a serious underlying condition) should be resisted, according to a recent meta-analysis (1804 patients in six studies). Short- and long-term clinical outcomes were no different in patients with acute or subacute low back pain undergoing lumbar imaging compared with those receiving usual clinical care. The results were most applicable to patients investigated in a primary care setting.

Lancet 2009;**373**:463–72.

CT angiography radiation risk

CT angiography is regarded as relatively non-invasive but the radiation exposure is not trivial. In a multicentre study of 1965 patients undergoing CT angiography in a cardiac setting, the median "dose-length product" (DLP) was 885 mGy × cm, corresponding to a radiation dose 12 mSv (equivalent to 600 chest x rays). There was a worrying variability in DLP between study sites and CT systems. "Non-invasive" investigations are clearly not without risks.

JAMA 2009;**301**:500–7.

Big impact for big pharma

A systematic review of studies designed to evaluate influenza vaccines confirmed that industry-funded studies are more likely to give a positive result for the sponsor's drug compared to government-funded studies. *Where* these articles were published was also interesting. The average journal impact factor for the 92 studies funded by the government was 3.74: for the 52 industry-sponsored studies it was 8.78. Could income from lucrative article reprints influence an editor's decision?

BMJ 2009;**338**:b354.

Fibromyalgia ... the bad news

Physicians and medical students from Norway rank fibromyalgia as the least "prestigious" disorder (from a choice of 38). Although a novel finding it may not be surprising, until you consider that AIDS was 6 places above, multiple sclerosis 12 and ankylosing spondylitis 14 places higher; brain tumour was joint third from top. Diseases associated with chronic conditions located in the lower parts of the body or having no specific bodily location, were given the lowest prestige scores.

Soc Sci Med 2008;**66**:182–8.

Fibromyalgia ... and the good news

Fibromyalgia is associated with significant disability and disease-related costs. A large meta-analysis from Germany (1427 patients in eight studies) supports the common practice of amitriptyline prescription for fibromyalgia symptoms. Antidepressants were effective in controlling pain, fatigue, low mood, sleep disturbance, and health-related quality of life; tricyclics were more effective than SSRIs.

JAMA 2009;**301**:198–209.

Familial influence in post-traumatic epilepsy?

The epilepsy risk after head injury persists for years, perhaps more than previously supposed. A large study from Denmark identified 1017 people with epilepsy after a head injury, from over 1.5 m born 1977–2002. The risk increased with injury severity and remained increased, even after mild head injury, after 10 years. A family history of epilepsy notably increased the risk (by tenfold after severe injury). The authors view the long latent interval as a window of opportunity for potential preventative intervention.

Lancet 2009;**373**:1105–10.

Unintentional art

A haemodialysis patient with suspected osteomyelitis underwent a aTc^{99} -labelled diphosphonate bone scan, which, through calcium release into muscle, showed the generalised changes of rhabdomyolysis. A repeat scan at 1 month was normal. The authors describe the images as "strikingly aesthetic".

Lancet 2009;**373**:154.

Father of neuroscience

Raymond Adams (1911–2008), former Chief of Neurology at the Massachusetts General Hospital, was a neuropathologist and clinician scientist. Perhaps known best worldwide for his textbook *Victor and Adams' principles of neurology*, he is credited with changing neurology from a largely descriptive field to a science: the "single most important person in modernizing neurology into a hard science".

Lancet 2009;**373**:294.

And finally ... the cello scrotum

Handmaid's knee, tennis elbow, clergyman's bursitis ... cello scrotum? Baroness Murphy, who was once upon a time a psychiatry trainee at the National Hospital for Neurology and Neurosurgery, owned up to a 30-year hoax in a letter to the *BMJ*. Her report of cello scrotum was inspired by a letter on guitar nipple, in 1974. As stated in the confession, "anyone who has ever watched a cello being played would realise the physical impossibility of our claim". Is there a neurological condition that you have always suspected was a swindle, a tongue-in-cheek fabrication? If so, please contact *Carphology* and perhaps we could organise a hoaxers' amnesty?

BMJ 2009;**338**:b288.