NOT FOR THE HIP?

Results of an Australasian randomised, placebo-controlled trial have challenged the recommendation that all patients undergoing total hip replacement should take a short course of postoperative NSAIDs to prevent residual symptoms by preventing ectopic bone formation in the soft tissues around the operated hip. The trial involved 902 patients undergoing elective primary or revision total hip replacement surgery who were randomly assigned to receive 14 days' treatment with either ibuprofen (1200 mg daily) or placebo, starting within 24 hours of surgery. While postoperative ibuprofen reduced ectopic bone formation after the surgery, this does not translate into less pain or disability 6 to 12 months after surgery. There was also an increased risk of major bleeding complications in the ibuprofen group during admission. The researchers said that their findings provided evidence that clinical care guidelines should be based on clinically important outcomes rather than unproven surrogate outcomes, like radiographic ectopic bone formation.

BMJ 2006; 333: 519-523

18 HOLES TO HEALTHIER LIVING

In the fight against overweight and obesity, walking 10000 steps each day has been promoted as a part of a general physical activity plan. Now, GPs can be reassured by Mayo Clinic research which has determined that playing an 18-hole round of golf is likely to meet this recommendation, whatever the patient–player's golf handicap. Adult volunteers (12 men; 30 women) walked each of three municipal 18-hole golf courses while wearing an electronic pedometer. The golfers carried their clubs or used a push or pull cart or an electric golf caddy. Each golfer took an average of about 12000 steps per round.

Mayo Clin Proc 2006; 81: 1041-1043

GP DEFIBRILLATORS

Equipping GPs with defibrillators could be a useful strategy for reducing deaths from sudden cardiac arrest, according to UK research. Since 1985, the British Health Foundation, a major national charity, has funded the purchase of defibrillators for UK GPs on condition that GPs are capable of responding rapidly to calls for help and that they agree to return a report form after each resuscitation attempt. An analysis of the 555 report forms received from 1986 to early January 2004 found that 149 resuscitated patients (27%) survived to leave hospital. Survival was much more likely when the initial rhythm was shockable (VF or pulseless VT), with 144 of 351 such patients (41%) surviving, and also when heart disease was responsible for the arrest, with 148 of 436 such patients (34%) surviving. While about half of the cardiac arrests occurred in the patient's home, about one in five occurred at or near the doctor's surgery.

Resuscitation 2006; 70: 229-237

OILS AIN'T OILS

Virgin olive oils may be more beneficial in modifying cardiovascular risk factors than refined olive oils, according to European research. The Effect of Olive Oil on Oxidative Damage in European Populations (EUROLIVE) Study Group compared the effects of three different types of olive oil on plasma lipid levels in 200 healthy male volunteers. Although each of the olive oils had a similar monounsaturated fatty acid content, they differed in phenolic content — high (virgin olive oil, 366 mg/kg), low (refined olive oil, 2.7 mg/kg) and medium (mixed oils, 164 mg/kg). Volunteers took 25 mL daily of one of the oils for 3 weeks, preceded by a fortnight's washout period, and then did the same for each of the other two oils. As phenolic content of an olive oil increased, so did HDL cholesterol, whereas the total cholesterol to HDL cholesterol ratio and triglyceride levels decreased. A higher phenolic content was also associated with a decrease in serum biomarkers of oxidative damage.

Ann Intern Med 2006; 145: 333-341

SEROTHERAPY FOR BIRD 'FLU?

A modern-day meta-analysis of eight studies conducted during the Spanish influenza epidemic in the early 20th century has determined that serotherapy may be useful in combating an avian influenza (H5N1) epidemic. The data, although from studies of poor design by today's standards, suggest that early transfusion of influenza-convalescent human blood products reduced mortality as well as clinical signs and symptoms in patients with influenza complicated by pneumonia. The biological hypothesis is that the virus was neutralised by anti-influenza antibodies in the blood products. A US expert, commenting on the meta-analysis, called for more coordinated clinical research among institutions in countries currently experiencing cases of avian influenza, including proving the concept of serotherapy for treatment of severe H5N1 infections.

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