JAOA
medi-notes

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Editor in Chief

Antihypertensive drugs and the quality of life

Antihypertensive medications can have negative effects on physical, emotional, sexual, social, and cognitive functioning. This may result in noncompliance and ineffectual long-term treatment. This randomized, double-blind study compares the side effects of captopril, methyldopa, and propranolol on 626 men with mild to moderate hypertension.

All 3 drugs had similar blood-pressure control results after 24 weeks of treatment. Patients in the captopril group were least likely to withdraw from the study because of adverse effects (8 percent) than those taking propranolol (13 percent) or methyldopa (20 percent). The captopril group fared better than the other 2 groups in terms of general well being, physical symptoms, and sexual function, and better than methyldopa with regard to cognitive function, work performance, and life satisfaction. All groups had similar scores for sleep dysfunction, visual memory, and social participation.

Croog, S.H., et al.: The effects of antihypertensive therapy on the quality of life. *N Engl J Med* 314:1657-64, 26 Jun 86

Carpal tunnel syndrome

Provocative tests for the diagnosis of carpal tunnel syndrome are performed on the premise that stress on a damaged median nerve will increase the symptoms of pain or paresthesia. The usefulness of 3 such tests was evaluated in a group of patients (67 hands) with electrodiagnostically proved carpal tunnel syndrome. A group of 50 subjects served as control.

The wrist-flexion (Phalen) test was found to be the most sensitive and useful of the tests (sensitivity 71 percent, specificity 80 percent). The median-nerve percussion test was least sensitive (44 percent) but most specific (94 percent). The tourniquet test was least reliable of all (sensitivity 65 percent, specificity 60 percent). All patients also underwent the Semmes-Weinstein monofilament test and the two-point discrimination test. The combination of these two clinical tests currently represents the most complete and accurate diagnostic routine for carpal tunnel syndrome.

The authors conclude that the wrist-flexion and percussion tests are useful adjuncts in the clinical diagnosis of carpal tunnel syndrome. However, a negative test result does not rule out the diagnosis. The tourniquet test is not recommended for routine use.

Gellman, H., et al.: Carpal tunnel syndrome. An evaluation of the provocative diagnostic tests. *J Bone Joint Surg* 68A:735-7, Jun 86

Cervical rheumatoid arthritis

Almost half of patients with rheumatoid arthritis experience cervical involvement. The abnormalities become clinically significant in the elderly, because the degeneration can mistakenly be attributed to osteoporosis, which often occurs concurrently. The current article reviews the clinical and radiologic findings of craniovertebral abnormalities.

Only two cervical lateral projections, one in flexion and one in extension, are necessary in a routine preoperative check up. Computed tomography is recommended over conventional tomography and radiography. The anterior atlantoaxial dislocation is the most common disorder. It is often the first and only detectable sign of cervical arthritis. Treatment is usually conservative, although patients with severe neurologic disturbances may benefit from occipitocervical fusion.

Redlund-Johnell, I.: Evaluation of craniovertebral abnormalities in rheumatoid arthritis. Geriatric Med Today 5:94-102, Jul 86

Chlamydial infections

Chlamydial infections have captured attention as the most prevalent sexually transmitted diseases in the U.S. The obligate intracellular parasites cause conjunctivitis and pneumonia in infants, and urogenital and ocular infections in adults.

This article describes routes of transmission, current diagnostic criteria, newly available diagnostic tests, and treatment recommendations for specific infections. Tetracyclines are the favored drugs for treatment, although erythromycin is preferred for pregnant women and neonates with conjunctivitis.

Pruessner, H.T., Hansel, N.K., and Griffiths, M.: Diagnosis and treatment of chlamydial infections. Am Fam Physician 34:81-92, Jul 86

Head and neck cancer

Head and neck cancer is four times more common in men than in women, and usually appears in later life. However, this pattern may shift because of the increasing number of female tobacco and alcohol users, as well as the growing popularity of snuff among school-aged children. The basic principles of diagnosis and treatment are discussed. It is interesting that the sites of synchronous primary lesions often are associated

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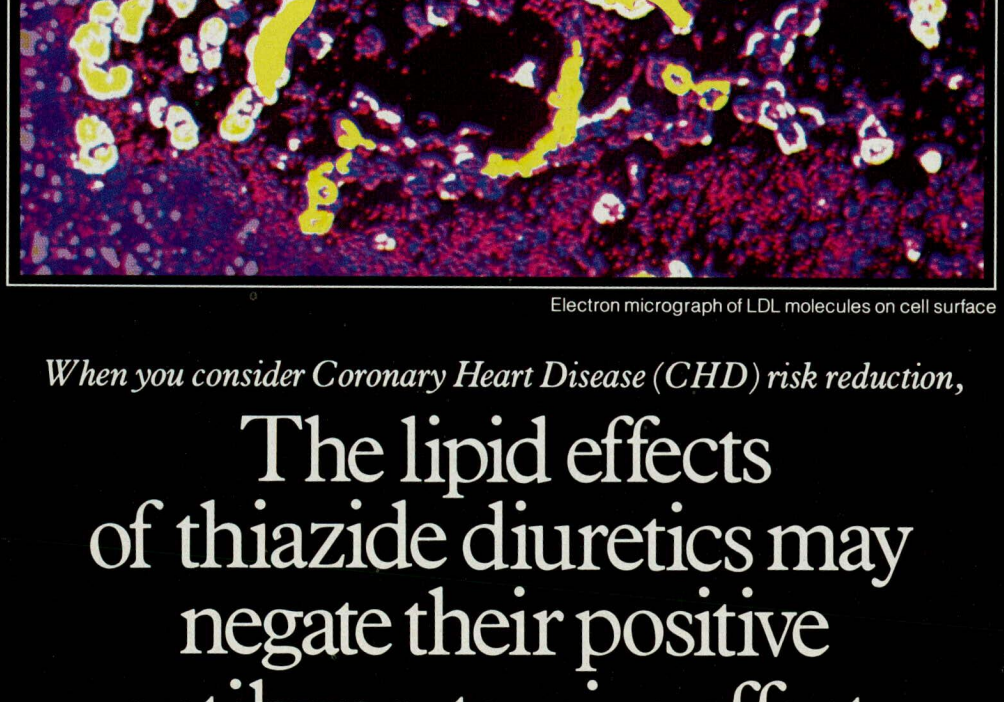
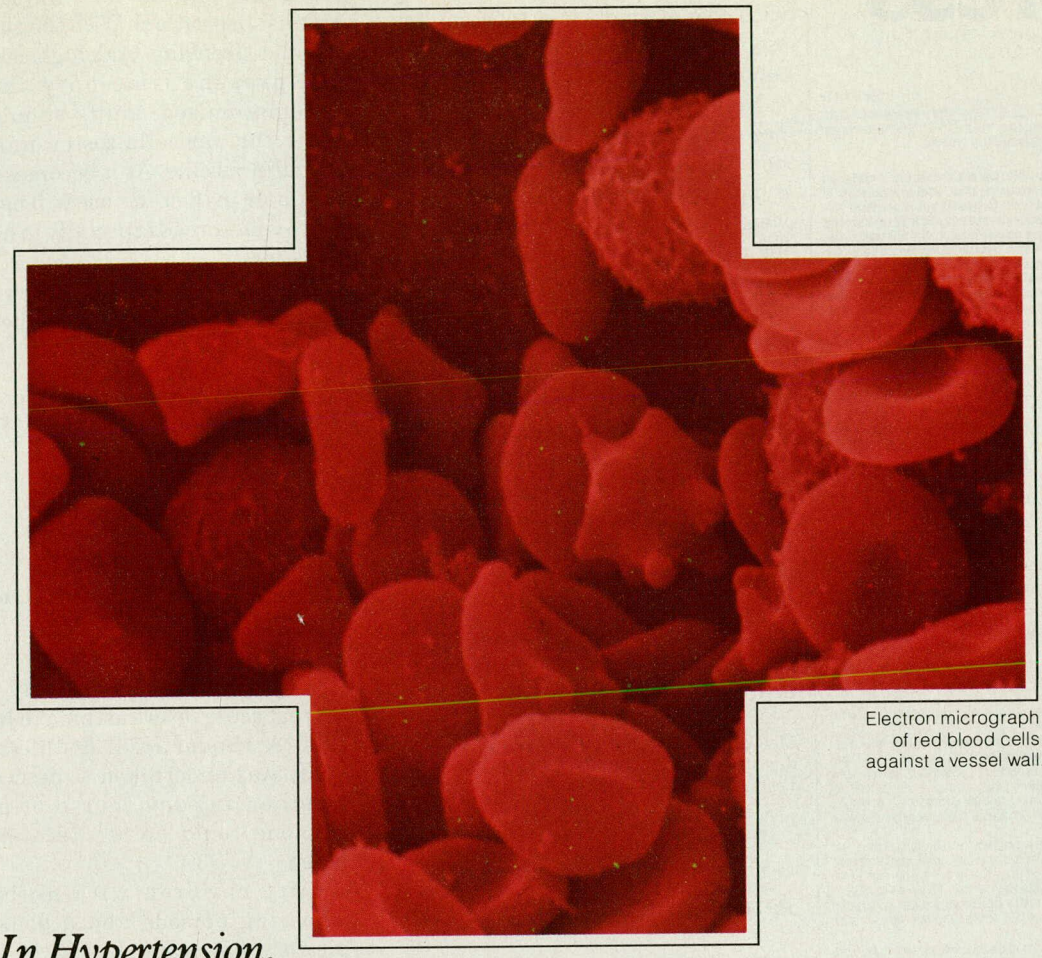


Electron micrograph of LDL molecules on cell surface

When you consider Coronary Heart Disease (CHD) risk reduction,

The lipid effects of thiazide diuretics may negate their positive antihypertensive effect.

Opposite: micrograph from *Tissues and Organs: A Text-Atlas of Scanning Electron Microscopy,* by R.G. Kessel, R.H. Kardon. W.H. Freeman and Co., 1979.



Electron micrograph of red blood cells against a vessel wall.

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First-line control of hypertension without the negatives of diuretics

Minipress and diuretics both deliver effective first-line blood pressure control. But unlike thiazide diuretics, Minipress does not compromise lipid metabolism[1-4]; additionally, potassium balance[5] and diabetes control are not compromised.[6,7] And sexual dysfunction is seldom a problem with Minipress.[8] Impotence has been reported but in less than 1% of patients on Minipress.

With Minipress, most common adverse reactions, generally mild and transient, are: dizziness, headache, drowsiness, palpitations, and nausea. Syncope has been reported in about 0.15% of patients at the recommended 1 mg initial dose. Fluid retention may occur.

Minipress. The positive first-line approach to hypertension. Instead of diuretics.

	Minipress	Thiazide Diuretics
Controls Hypertension	+	+
No adverse effect on Blood Lipids	+[1-3]	−[4]
No adverse effect on Potassium Balance	+[5]	−[9]
Does not compromise Glucose Tolerance	+[6,7]	−[6]
Rarely compromises Sexual Function	+[8]	−[10]

+ = Yes − = No

Minipress®
(prazosin HCl) Capsules 1 mg, 2 mg, 5 mg

Please see MINIPRESS® (prazosin HCl) brief summary on adjacent page.

with the patient's habit—lung and larynx with smoking, oral cavity with use of smokeless tobacco, and esophagus and oropharynx with alcohol abuse.

Nonoccult squamous cell cancer presents with such symptoms as hoarseness, obstructed breathing, dysphagia, bloody sputum, and weight loss. It is important to histologically differentiate verrucous carcinoma from the more aggressive squamous cell carcinoma. Excising a metastatic lesion in a cervical node increases the incidence of distant metastasis and local recurrence; thus, one should assume that all asymmetric cervical nodes are metastatic and refrain from open biopsy until a thorough head and neck evaluation (described in the article) proves otherwise. Monthly follow-up after treatment is essential because of the great likelihood of recurrent disease, metastasis, or a second metachronous primary cancer.

McGuirt, W.F.: Cancer of the upper aerodigestive tract. Basic principles and concepts. Postgrad Med 80:77-96, Jul 86

Adult immunization

Adult immunization is more challenging than across-the-board childhood vaccination. Adults may have received ineffectual vaccination during childhood, or may have fallen behind on their immunization schedule. This article reviews the protocol for rubella, measles, poliomyelitis, tetanus, diphtheria, influenza, pneumonia, hepatitis B, rabies, and varicella-zoster.

For example, almost 20 percent of young adults born in the 1960s or earlier are unprotected against rubella and measles. Americans over 18 years of age do not need the poliovirus vaccine unless traveling to endemic countries. All adults need boosters of the tetanus-diphtheria (but not pertussis) toxoid at 10-year intervals. Everyone over the age of 65 as well as persons of any age with cardiac or pulmonary disease, anemia, immunodeficiency problem, or metabolic disorder, are candidates for influenza and pneumonia vaccinations. High-risk individuals, including homosexuals and health care workers, should be immunized against hepatitis B. With the current limited licensing and high cost, at the present time only immunocompromised adults should receive the varicella-zoster immune globulin vaccine. As it becomes more available in the U.S., use will become more widespread especially to health workers.

Immunization travel requirements are also discussed in the article.

Fedson, D.S.: Adult immunization. Protocols and problems. Hospital Practice 21:143-58, 15 Jul 86

Steroid use in home treatment of acute asthma in children

Corticosteroids are commonly used to treat acute severe asthma in hospitals. A randomized, double-blind study was undertaken to determine whether a 3-day course of prednisolone could hasten recovery at home.

Fifty children with an acute wheezing episode and a peak expiratory flow rate (PEFR) of 15-80 percent of expected value were admitted to the study. Each child received one dose of a nebulized bronchodilator and a 3-day supply of prednisolone or placebo (2 mg./kg. on day 1, 1 mg./kg. on day 2, and 0.5 mg./kg. on day 3). All participants recorded PEFRs in the morning and evening until their return on day 4. Six of the patients' diary cards were incomplete or incorrect, thus the results of a total of 44 patients were used for analysis.

Both groups were found to have improved significantly at the end of treatment. However, improvements in PEFR were significantly greater in the steroid than in the placebo group. The authors conclude that early treatment with corticosteroids would prevent serious deterioration, speed recovery, and make a return to the hospital less likely.

Deshpande, A., and McKenzie, S.A.: Short course of steroids in home treatment of children with acute asthma. Br Med J 293:169-71, 19 Jul 86

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