These discussions relate to the CME quiz appearing in the May 1996 issue of JAOA.

1. (a) Patients with juvenile rheumatoid arthritis often have inflamed and unstable joints. High-velocity/low-amplitude (HVLA) techniques may worsen instability. Manipulation using HVLA techniques in patients with cervical involvement may result in spinal cord damage.

2. (c) The pauciarticular/antinuclear antibody–positive juvenile rheumatoid arthritis (JRA) is the subtype/subset most closely associated with visual loss. Antinuclear antibodies are associated with the highest risk for eventual blindness in JRA. Involvement may be subclinical but progressive. Patients having antinuclear antibodies should be examined quarterly by an ophthalmologist.

3. (d) By blocking painful stimuli before they arise, preemptive analgesia may prevent or attenuate postoperative pain by preventing peripheral and central sensitization.

4. (d) The American Academy of Pediatrics (AAP) guidelines for the standard of care during sedation of children recommends continuous pulse oximetry and heart rate monitoring during conscious sedation. In defining sedative states, the AAP recognizes that a child is able to maintain a patent airway independently and continuously during conscious sedation but may not be able to do so during deep sedation.

5. (a) Ninety-six percent of all giant sigmoid diverticula are consistent with pseudocyst formation. They are usually found on the antimesenteric wall of the colon. The tissue is dense, thick, and fibrotic without an epithelial lining.

6. (b) False. The majority of the patients with giant sigmoid diverticulum have intermittent, colicky, abdominal pain with distention.

7. (b) Renal cell carcinoma is notorious for distant metastasis both at time of presentation and also many years after resection of primary tumor. The most common site by far is lung, followed by bone, and then regional lymph nodes. Many different organ systems may be involved.

8. (d) The most common site involved regarding the adjacent structures in renal cell carcinoma are the regional nodes in the aortic and vena cava regions, the structure depending on which side the primary tumor arises. These involvements occur at the site of the renal vein or artery takeoff (or both). This metastasis is followed closely by main renal vein involvement and then involvement of perineal fat. ◆

From the FDA

Home screening test for HIV approved

Screening for the presence of the human immunodeficiency virus can be done in the privacy of one's home, with the approval of the Confide H.I.V. Testing kit (Direct Access Diagnostics, Bridgewater, NJ). Beginning in June, the kit is expected to be marketed by mail and over the counter in Texas and by mail in Florida. Nationwide availability is scheduled for early 1996 when consumers can obtain the kit at pharmacies, healthcare centers, clinics, and other retail outlets. Users of the kit will mail a blood sample obtained with a retractable lancet to a certified testing laboratory, where results should be known in 1 week. The kit, which includes a telephone number for follow-up results and an identification number, is expected to retail for $40.

More than 60% of Americans who are at risk for the HIV infection have not been tested.

Expanded use granted for implantable defibrillators

Implanted defibrillators can now be used with a wider range of patients who have had a myocardial infarction or who continue to have a rapid heart beat despite drug therapy. The expanded use enables the implantation of defibrillators in patients who have had myocardial infarction and are at high risk of death from abnormal heart rhythm but who have no other symptoms of cardiac abnormalities.

The expanded approval application was granted, in large part, because of a study involving 196 patients that compared survival rates among patients receiving an implanted defibrillator with those of patients taking cardiovascular agents. The implantable defibrillator reduced the incidence of deaths by 54%.◆