

Short cut

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Roshandel G, Sadjadi A, Aarabi M, Keshkar A, Sedaghat SM, Nouraiie SM, Semnani S, Malekzadeh R. Cancer incidence in Golestan Province: report of an ongoing population-based cancer registry in Iran between 2004 and 2008. Arch Iran Med 2012;15:196-200.

This Iranian team collected data of newly diagnosed cancer cases in the Golestan province of Iran in a 5 year period from 2004 to 2008. This area previously had one of the highest oesophageal cancer rates in the world. 9007 new cancer cases were reported from 68 healthcare centres in the province and the death registry. 71% of cases had microscopic verification. Incidences were reported as age-standardised rates (ASRs) per 100,000 person-years. The ASRs were 175 and 141 in males and females, with median ages of 62 and 53 respectively.

Cancers of stomach (ASR 31), oesophagus (ASR 24.3) and lung were the commonest cancers in males. In females breast cancer (ASR 27) followed by oesophagus (ASR 19) and stomach (ASR 12). The study found a decreasing trend of oesophageal cancer rates and increasing incidence of colorectal and lung cancer compared to a previous study in this area between 1968 to 1971. The trend was postulated to be attributed to better socioeconomic status and adoption of a western type lifestyle. Data collection in the study did however vary from being retrospective between 2004-2005 to prospective after that.

Yi F, Ge L, Zhao J, Lei Y, Zhou F, Chen Z, Zhu Y, Xia B. Meta-analysis: total parenteral nutrition

versus total enteral nutrition in predicted severe acute pancreatitis. Intern Med 2012;51:523-30.

This study highlights the conventional thought of 'pancreatic rest' promoting healing is not necessarily true but should be replaced by the concept of pancreatic stimulation being maintained to improve outcomes.

The meta-analysis looked at 381 patients from 8 randomised control trials to compare results for total parenteral nutrition (TPN) versus total enteral nutrition (TEN). TEN had associated lower mortality (RR 0.37, infectious complications (RR 0.46) and surgical intervention (RR 0.41). There was no statistical difference in the length of hospital stay or duration of supplementary nutrition noted.

Emami MH, Hashemi M, Kouhestani S, Taheri H, Karimi S. Should We Look for Celiac Disease among all Patients with Liver Function Test Abnormalities? Int J Prev Med 2012;3:167-72.

This interesting review highlights the awareness of coeliac disease as being the sole potential cause of deranged liver function test (LFTs) as well as contributing to it alongside other chronic liver diseases.

The Iranian group looked at measuring IgA anti-tissue transglutaminase (t-TG) antibodies in 224 patients, mean age of 39, who presented to 3 outpatient in clinic in the province of Isfahan with abnormal LFTs not known to be related to ischaemic injury, drugs or alcohol toxicity. All those who were t-TG positive went ahead and had

endoscopy with D2 biopsies performed. 10 patients (4.4%) were seropositive for coeliac disease of which 8 patients had a biopsy confirming 6 cases (2.7%) of coeliac disease. These patients were then all put on a gluten free diet with either a significant drop or normalization of their deranged LFTs in 8 weeks. 3 of the cases had other associated chronic liver disease, 2 had autoimmune hepatitis and the other had cryptogenic cirrhosis.

The study did not comment on if any of these patients had symptoms or other laboratory markers suggesting coeliac however does add weight to screen patients with abnormal LFTs for coeliac disease.

Lesmana LA, Lesmana CR, Pakasi LS, Krisnuhoni. Prevalence of hepatic steatosis in chronic hepatitis B patients and its association with disease severity. Acta Med Indones 2012;44:35-39.

This cross sectional study in Indonesia looked at 174 chronic hepatitis B patients between 2007-2009 and checked the prevalence of liver steatosis and assessed whether there was an association with more progressive disease. It showed that unlike in hepatitis C liver steatosis was not related to a more progressive disease but associated with central obesity.

44% of case were HBeAg +ve with liver steatosis present in 30%. Those with steatosis had a

significantly higher BMI (25.1 v 22.7) and waist circumference (88.3cm v 79.0cm). There was no association between liver steatosis and HBeAg status, HBV-DNA levels or liver stiffness.

Girotra M, Kumar V, Khan JM, Damisse P, Abraham RR, Aggarwal V, Dutta SK. Clinical predictors of fulminant colitis in patients with Clostridium difficile infection. Saudi J Gastroenterol 2012;18:133-39.

This 10 year retrospective review of patients with *C.difficile* associated diarrhoea (CDAD), admitted to a hospital in the Maryland state of America, compared 18 fulminant *C.difficile* colitis (FCDC) patients who underwent a colectomy to randomly selected non-fulminant CDAD to highlight several clinical and laboratory features. They showed that FCDC patient were older (mean 77yrs v 65yrs). They were more likely to have the triad of symptoms of abdominal pain (89%), diarrhoea (72%) and distention (39%). Prior *C.difficile* was commoner in FCDC (28% v 5%) as well as significant leucocytosis (18.6 v 10.7) which increased until point of surgery. They also showed that use of anti-peristaltic medications were likely to worsen the clinic condition by precipitating toxic megacolon. There were no statistical differences highlighted in the 2 groups in relation to proton pump inhibitor use or current or prior antibiotic use.

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