



A case of recurrent ventricular tachycardia
Try the picture quiz in
ENDGAMES, p 1267

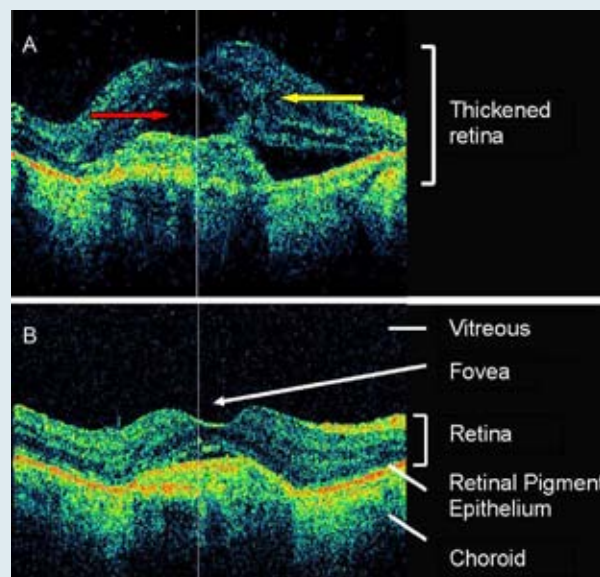
Following studies that showed an association between schizophrenia and infection with the protozoan parasite *Toxoplasma gondii*, a cohort study of over 45 500 women born in Denmark shows that mothers with high levels of *T gondii*-specific IgG antibodies have a significantly increased risk of developing schizophrenia spectrum disorders. People become infected mainly by consumption of undercooked meat containing *T gondii* cysts, by ingestion of oocysts from the faeces of infected cats, or congenitally from a mother with primary infection during pregnancy (*American Journal of Psychiatry* 2011; doi:10.1176/appi.ajp.2011.10091351).

What is the effect of physician-led remote telemedical management on death and hospital admission for patients with chronic heart disease, compared with usual care? Very little, according to a paper in *Circulation* (2011;123:1873-80, doi:10.1161/circulationaha.111.018473). In ambulatory patients with chronic heart failure, telemedical management was not associated with a reduction in all cause mortality. Portable devices were used for electrocardiograms and to measure blood pressure and body weight, connected to a personal digital assistant that sent automated encrypted transmission through cell phones to the telemedical centres.

The lack of evidence supporting complementary medicine leads to frequent calls for more studies, but researchers say the evidence gap cannot easily be closed (*JRSM* 2011;104:155-61, doi:10.1258/jrsm.2011.100271). Unblinded pragmatic trials comparing a treatment with usual care or no additional care carry an overlooked risk of bias. Outcome measures represent both the specific effect of the intervention and non-specific effects, such as true placebo effects or cognitive measurement biases. Negative true placebo effects in the comparison group and cognitive biases in both groups can make the non-specific effect look like a benefit for the intervention group.

An uncontrolled pilot study and a placebo controlled crossover study investigated the effect of drinking cranberry juice on vascular function in people with established coronary heart disease. The investigators report that chronic consumption of cranberry juice reduced carotid

A 76 year old woman presented with metamorphopsia (distortion of straight lines) and reduced vision of 6/36. Optical coherence tomography of the retinal layers showed subretinal fluid (A, red arrow) and intraretinal fluid (yellow arrow). She was diagnosed with wet age related macular degeneration and received monthly injections of antivascular endothelial growth factor into the vitreous. After three injections the retinal fluid resolved (B) and her vision improved to 6/9.5. Metamorphopsia is a typical symptom of wet age related macular degeneration. Early referral and prompt treatment with antivascular endothelial growth factor can result in visual improvement, with the best results if treated within two weeks of symptom onset.



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Patient consent obtained.

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femoral pulse wave velocity—a clinically relevant measure of arterial stiffness. The uncontrolled pilot study suggested an acute benefit of drinking cranberry juice, but found no chronic effect on measures of vasodilator function (*American Journal of Clinical Nutrition* 2011;93:934-40, doi:10.3945/ajcn.110.004242).

Serotonin transport is regulated by a specific gene, and people who have a more efficient version of the gene tend to be happier, according to an article in the *Journal of Human Genetics* (2011, doi:10.1038/jhg.2011.39). Genetic data from over 2500 participants in the national longitudinal study of adolescent health were examined, looking specifically at the functional variant of the 5-HTT gene. A much higher proportion of people with the efficient (long) version of the gene—which results in increased gene expression and more serotonin transporters in the cell membrane—were either very satisfied (35%) or satisfied (34%) with their life, compared with 19% in both categories for those with the short form of the gene.

Could an electronic prescribing system identify doctors at risk of making serious prescribing errors? Over 800 000 completed prescriptions

issued by 381 junior doctors in a large UK teaching hospital were analysed. Doctors varied greatly in the extent to which they triggered and responded to alerts of different types, but these data were no help in identifying doctors at high risk of making serious errors. The researchers say that routine data from an electronic prescribing system should not be relied on to identify doctors at risk of making mistakes (*Journal of the Royal Society of Medicine* 2011;104:208-18, doi:10.1258/jrsm.2011.110061).

Another salutary tale involving prescriptions: a case described in May's issue of *MPS Update* (www.medicalprotection.org/uk) tells of a woman who was inadvertently issued with prescriptions for the wrong sort of hormone replacement therapy for a year, resulting in her taking unopposed oestrogen and developing endometrial cancer. She made a claim against all the GPs involved in her care. Words of advice: if the specialist in secondary care issues the first prescription, mistakes are far less likely to happen. And don't issue a prescription until you have it clearly in writing from the specialist.

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