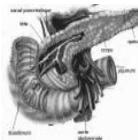


Hello,
 And very **Happy New Year** to you!
 It is early days in the new year and it is time when we review & summarize last year's cases, review our administration



& staff performance; check patient satisfaction and set goals for new year. That done, now let us check out this month's newsletter.

While browsing the free medical journals website, I came across 'Journal Of Pancreas'. And I found an editorial telling about **pancreatic hyperenzymemia**. As described in the article,



there are lots of reasons for this phenomenon including number of diseases associated with and some completely unrelated to pancreas. I have reproduced an **algorithm about diagnosis of hyperenzymemia** here. (Page 2)

Another interesting article is a symposium from Journal of Postgraduate Medicine where they are discussing the **Leptospirosis**; which is **endemic** in our country; and should be considered in differential of any febrile illness. Article says that DGM or **dark ground microscopy**



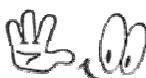
though useful in diagnosis, can not be used alone, as false +/- results are known. **Culture** is said to be **impractical**. Now a days, number of **serological tests** other than MAT & ELISA are available. And they are increasingly being used for diagnosis of this disease. **Role of MAT** (Microscopic Agglutination Test) is **complicated** by lack of baseline titers & may lead to **over diagnosis**.

As we know, **tuberculosis** remains a major health problem for us. One study comparing the **efficacy of smear, PCR and culture** for diagnosis of **joint tuberculosis** is published in recent Indian Journal of Medical Microbiology.



The study found that **PCR test, BACTEC culture and ZN smear had sensitivities of 78.2%, 43.3% & 21.7%** respectively. And **PCR beats others, hands down in diagnosing joint TB**. A table depicting the positivity of these tests done on synovial fluid and tissue is reproduced here. (Page 2)

So, this is it for this month; send your comments & suggestions to me at drss.kale@gmail.com.

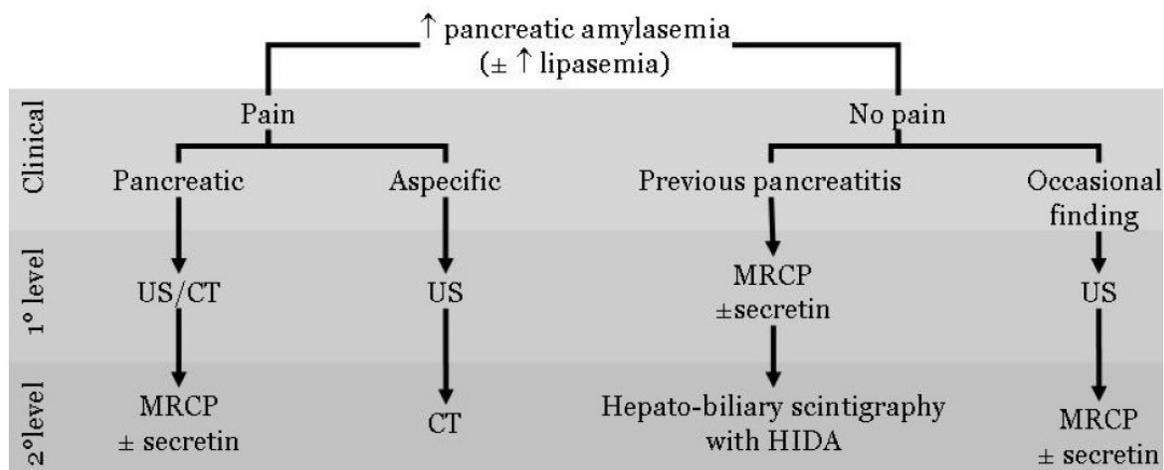


And yes, would you mind giving suggestions or contributions for the "humour corner" also. Till next month, its bye from me!
 - Sachin

Dr. Sachin Kale, MD (Pathology),
 Kale Path Lab, A'bad.
 Phone: 2340558, 9823244033.

Back issues of this newsletter available online at - <http://sachinkale1.tripod.com>

Possible algorithm for diagnosis in patients with pancreatic hyperenzymemia



From Journal of the Pancreas -- Vol. 6, No. 6 -- November 2005. [ISSN 1590-8577]
http://www.joplink.net/prev/200511/200511_01.pdf

Frequency of positivity of different tests for diagnosis of Joint TB

Nature of sample (No. of cases)	Tests performed and their positivity		
	AFB Smear No (%)	BACTEC No (%)	PCR No (%)
Synovial fluid (23)	4 (17.39)	9 (39.13)	17 (73.9)
Synovial tissue (23)	2 (8.6)	6 (26.08)	14 (60.8)
Combined (23)	5 (21.7)	10 (43.3)	18 (78.2)

From Indian Journal of Medical Microbiology (2005), 23(4):245-8

Humour Corner

"Vital signs stable. Urine input and output are fine."
 - Medical Student on rounds.

Our brain is a masterpiece, divided into two parts, left and right.
 In the left nothing is right and in the right nothing is left.
 - A brainy anatomy student describing the brain.

One day, a woman called in very upset because she caught her little daughter eating ants. The doctor quickly reassured her that the ants are not harmful and there would be no need to bring her daughter into the hospital.

She calmed down, and at the end of the conversation she happened to mention that she gave her daughter some ant poison to eat in order to kill the ants. The doc had to tell her that she better bring her daughter in to the ER right away.

The Monthly Microscope

(2, End)