

Hygieia

CANCER RISKS IN SCLERODERMA

People with scleroderma have a higher risk of developing cancer especially that of the lung. Researchers examined data from the South Australian Scleroderma Registry and the South Australian Cancer Registry and found 90 cancer cases in 441 patients. The standardised incidence ratio (SIR) was high for all scleroderma patients, at 1.99, compared with the standard population. The SIRs for all cancers among the disorder subgroups (diffused scleroderma and limited scleroderma) were also significantly increased. The risk found is larger than that for polymyositis and is approaching that of dermatomyositis, leading the authors to suggest that clinicians should be as aware of the increased cancer risk from disorders as they are of that from those scleroderma. (*Ann Rheum Dis* 2003;**62**:728–31)

GASTROINTESTINAL DISEASE PREVALENCE

The increasing burden of gastrointestinal diseases prompted researchers to examine the prevalence of several conditions in members of two UK national birth cohorts from 1958 and 1970. Every cohort member living in the UK in 1999–2000 was interviewed, and the prevalence rates of Crohn's disease (CD), ulcerative colitis (UC), irritable bowel syndrome (IBS), gall stones (GS), and peptic ulcer disease (PUD) were calculated. People born in 1970 were significantly more likely to have CD and IBS, while UC, GS, and PUD were all more common in the 1958 cohort. The authors note that the high prevalence of IBD is of particular concern given the lifelong cost of care and greater risk of cancer. (*Gut* 2003;**52**:1117–21)

ULCERATIVE COLITIS IN INDIA

The frequency of ulcerative colitis (UC) in North India is similar to that of Europe and North America, refuting beliefs that the disease is less common in developing countries. A house to house survey was conducted in Punjab, North India, with a questionnaire formulated to inquire about symptoms suggestive of UC. Testing followed up those with symptoms, and a total of 23 people (from over 50 000 screened) were confirmed as having the disease, giving a crude prevalence rate of

44.3 per 100 000 people, the highest ever reported from the Asian subcontinent and broadly similar to that found in many countries where UC is common. (*Gut* 2003;**52**:1587–90)

ECONOMIC CRISIS AND INCREASED MORTALITY

Mortality increased substantially in Russia after the 1998 economic crisis. All cause mortality was compared across all seven federal regions in the country between 1991 and 2001, and the results showed an already high mortality level in 1991 that increased over the study period, with life expectancy falling to 58.9 years for men and 71.8 years for women. All trends observed were similar across the country, and an extra 2.5 to 3 million Russian adults are estimated to have died between 1991 and 2001 than would have been expected from the 1991 data. Increased alcohol consumption was implicated in being at least partially responsible for many of the trends. (*BMJ* 2003;**327**:964–6)

DEMENTIA PREVALENCE IN THE UK

A recent study has confirmed previous estimates of the prevalence of dementia in people under 65 years old in the UK. All residents under 65 with dementia in a large catchment area were identified and their medical and social care records examined. The prevalence of dementia in those aged 30–64 was 54 per 100 000 people and 98.1 per 100 000 in those aged 45–64. Extrapolation of these figures to national levels suggests that there are 18 319 people under 65 years old with dementia in the UK, which brings new accuracy to previous estimates and should permit improved service planning and delivery for affected people. (*J Neurol Neurosurg Psychiatry* 2003;**74**:1206–9)

QUALITY OF LIFE OF PEOPLE WITH EPILEPSY IN GEORGIA

The health related quality of life (HRQOL) of Georgian epilepsy patients is most negatively influenced by a high seizure frequency and long duration of epilepsy. Clinical, demographic, and socioeconomic factors were collected from 115 adult epilepsy outpatients and the results showed that 27.8% had more than 10 seizures a year, while 32.2% were entirely seizure free. Low education levels strongly correlated with low cognitive and social functioning and low overall quality of life, as did being of advanced age or female. A disconcerting 82.6% of patients were unemployed, but this was not found to

contribute significantly to lower quality of life scores. (*J Neurol Neurosurg Psychiatry* 2003;**74**:570–3)

BACK TO NORMAL OR BACK TO HOSPITAL

Returning to usual physical activity reduces the risk of readmission to hospital for exacerbation of chronic obstructive pulmonary disease (COPD). Researchers in Barcelona, Spain, followed up 340 patients for a mean period of 1.1 years in a bid to discover the factors that lead to readmissions for COPD. They found that 63% were readmitted at least once in the follow up period, and 29% died. The main risk factors were found to be three or more previous admissions for COPD in the year preceding treatment, lower forced expiratory volume in one second, and lower oxygen tension. (*Thorax* 2003;**58**:100–5)

NEW TOOL TO TRACK TUBERCULOSIS

The development of new molecular methods to track tuberculosis (TB) strains has helped to unmask a high rate of recent transmission in the Spanish island of Gran Canaria. The authors took *M tuberculosis* isolates from every eligible TB patient on the island between 1993 and 1996, amounting to 409 people. An epidemiological link could only be found in 147 patients, with 111 identified as having had previous contact with a TB patient. The high rate of recent transmission was unexpected, as Gran Canaria has free and universal access to public health services, in addition to good detection and cure rates. (*Thorax* 2003;**58**:618–22)

UNDERDIAGNOSED ASTHMA IN AUSTRALIA

Underdiagnosed asthma is common among the Australian population. Over 2500 adults in north west Adelaide, South Australia, agreed to participate in a telephone interview followed by a clinical assessment. Self reported health status (including current asthma diagnosis) and demographic variables were examined before the clinical assessment, which used spirometric testing to identify asthma. Asthma was detected in 11.6% of those studied, with 2.3% previously undiagnosed, making up 19.2% of the total. Those undiagnosed were more likely to be over 40 years old, receiving government benefits, and with an annual income of under \$A40 000, prompting the authors to recommend that targeted efforts to diagnose and treat asthma should perhaps be focused first on older men. (*Thorax* 2003;**58**:846–50)

Michael Muir
mmuir@bmjgroup.com