



## **On the other hand**

The hand you favour as a 10-week-old fetus is the hand you will favour for the rest of your life. The finding comes as a surprise because it had been thought that lifelong hand preferences did not develop until a child was 3 or 4 years old. A team led by Peter Hepper of the Fetal Behavioural Research Centre at Queen's University, Belfast in the UK reached this conclusion after studying ultrasound scans of 1000 fetuses. In one study, nine out of 10 fetuses at 15 weeks' gestation preferred to suck their right thumbs. Hepper's team followed 75 of those fetuses after birth, and found that at 10 to 12 years old all 60 of the right thumb-suckers were right handed, while 10 of the 15 left thumb-suckers were left handed and the rest right handed.

New Scientist, 24 July 2004

## **Tonsillectomy and postoperative haemorrhage**

Apparently diathermy and coblation (a variation of electrosurgery with lower tissue temperatures than diathermy) have overtaken dissection as the favoured tonsillectomy techniques. However, in a recent overview of 252 hospitals in England and N. Ireland it has been found that the overall haemorrhage rate was 3.1 times higher with diathermy tonsillectomy than with cold steel tonsillectomy without any use of diathermy ( $p < 0.001$ ). The corresponding relative risk for coblation tonsillectomy was 3.4; ( $p < 0.001$ ). When cold steel was used for dissection and diathermy only for haemostasis the relative risk was 2.2. ( $p = 0.002$ ). Therefore the authors recommend that these newer methods should be used with appropriate caution and only after proper training.

Lancet 2004;364:697-702

## **Graduate vs conventional entry to medical school?**

In a study from the University of Newcastle (New South Wales, Australia) the careers of the first 16 years' graduates have been evaluated. The researchers found no significant differences between graduate and conventional entrants in terms of academic performance (as measured by the award of medical school honours) or research outcomes (as measured by completion of a research degree during or after medical school training, publication of scientific papers or holding career posts in the research sciences).

There were no differences in career positions held by clinicians, choice of general practice or another specialty as a career, practice location (rural or urban) or employment sector (public or private). They found no clear advantage, at least on the outcomes measured in this study, to limiting medical school entry to either group and felt that medical schools could reasonably broaden their selection criteria to include more graduate entry candidates.

Medical Education 2004;38:778-86.

## **Evidence based bad medicine**

The Randomized Aldactone Evaluation Study (RALES) demonstrated that spironolactone significantly improves outcomes in patients with severe heart failure. Use of angiotensin-converting-enzyme (ACE) inhibitors is also indicated in these patients.

That is the good news. The down side is that these patients are susceptible to the development of hyperkalaemia. In a paper from Canada it has been demonstrated that after the publication of RALES there was an increase in the rate of hospitalisation for hyperkalaemia from 2.4/1000 patients to 11/1000 patients ( $p < 0.001$ ) and a commensurate increase in deaths in these patients. Unlike the selected trial patients, older patients with renal impairment and those on potassium supplements should not have spironolactone and all should have regular biochemical blood tests.

N Engl J Med 2004;351:543-51

## **Polio about face in Nigeria**

The Nigerian government came under severe pressure last year from radical Muslim leaders opposed to the immunisation campaign on the grounds that the vaccines contained antifertility substances, which they contended may have been targeted mainly at the Muslim population in northern Nigeria.

The bickering led to a suspension in August 2003 of a UN backed campaign to eradicate polio by the end of 2004. This resulted in a marked increase in the number of polio infected and paralysed children and the reinfection of previously polio free states in Nigeria and exportation of the virus in at least six neighbouring countries.

However, in July the Nigerian Health Minister apologised on behalf of the Nigerian government for this development and at the same time pledge to work harder to make polio history by the end of this year.

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