

Selected Abstracts

Pages with reference to book, From 85 To 85

Treatment of Retinal Arterial Occlusion. Hermann Rossmann. Ophthalmologica' 1980, 180:68.

OVER THE YEARS, a variety of approaches have been used to treat acute arterial occlusions of the retina. It was felt that if the occlusion is less than six hours old thrombolytic agents might successfully be tried. A large dose of corticosteroid was administered intravenously to reduce the inflammatory component and this was followed by 250,000 I.U. of streptokinase given within ten minutes. There is a further infusion of 750,000 to 1,000,000 units over the next 12 hours. An anticoagulant is given to prevent further occlusive processes. Low molecular weight dextran solutions have been used with some success, although there is a risk of serious side-effects. The most promising recent development is the use of acetylsalicylic acid as an antithrombocyte aggregation agent.

David Shoch.

Prognosis in Uveal Melanoma with Extrascieral Extension. John C. Affeldt, Don S. Minckler, Stanley P. Azen and Lin Yeh. Arch Ophthalmol., 1980, 98 :1975.

ENUCLEATION was performed upon 60 eyes for melanomas of the uvea, all these patients had extrascleral extension of the tumors. Two-thirds of the 60 patients eventually died of metastatic disease. The authors attempted to correlate clinical findings with the incidence of metastatic death. They found that there was a significant correlation between the development of metastases and large intraocular tumor size, malignant cell type, invasion of the optic nerve by the tumor and surgical transection or non-encapsulation of the extraocular tumor margin. Recurrence of the tumor occurred in the orbit in 10 per cent of the patients and there was a significant correlation with large intraocular tumor size and optic nerve invasion. In seven of the patients, exenteration was performed and this did not improve the prognosis.

-David Shoch.

Surgical Treatment of Primary Hyperparathyroidism in the Elderly. D.A. Heath, A.D. Wright, A.D. Barnes and others.Br. Med.7, 1980, 280:1406.

BIOCHEMICAL SCREENING of serum calcium and parathyroid hormone concentration in the elderly is recommended for the diagnosis of primary hyperparathyroidism. The majority of patients exhibited no evidence of bone disease or renal disease. The most common group of patients with hyperparathyroidism presenting at the clinic complained of muscle weakness, tiredness and general malaise. In such patients, the nonspecific nature of the symptoms may readily be attributed to aging. Twelve patients, age over 70, with primary hyperparathyroidism, underwent parathyroidectomy, which was well tolerated by all. After the operation, serum calcium concentration returned to normal and the most common symptoms before operation, muscle weakness, malaise and mild to severe dementia, although not related in severity to the degree of hypercalcemia, improved. Mental function was greatly improved.

-George C. Wee.

Cerebral Abscesses in Children After Pencil- Tip Injuries. P.Foy and M. Sharr. Lancet, 1980, 2:662.

THE AUTHORS report their experience with the management of three children in whom a cerebral abscess developed as a result of cranial penetration by a pencil tip. The selected method of treatment was initial aspiration of the abscess, followed by elective craniotomy with adequate antibiotic coverage for excision of residual abscess and any foreign body fragments. It was stressed that if any

roentgenographic or clinical evidence of intracranial penetration are present, surgical explorations is mandatory.

-Mahmoud C. Naguib.