

## DEFG

To help those of you who are so committed as Emergency Physicians that you can find no reason to ever stray beyond the first three letters of the alphabet, Nigel Salter and colleagues have provided a case report that might open up your world. Go to (*see page 720*) to broaden your horizon.

## H

If you survived that then it's time to go even further. One of Sir William Osler's most famous aphorisms is 'the greater the ignorance, the greater the dogmatism'. Daniel Butler and colleagues from Oxford, UK, have bravely entered a field of firmly held opinions and have attempted to lessen the ignorance and the dogmatism by reviewing all the available evidence. H is, of course, for Helicopter and the question they have addressed is whether it is the helicopters, the skills of those who fly in them or a combination of the two that might change the outcome for trauma patients.

It would be far too hard for me to try and précis the evidence that they uncovered and the conclusions they draw. Far better for you to turn to pages (*see page 692*) and look at the comprehensive summary tables that they have produced, and then draw your own informed, non-dogmatic opinions.

## CPU

Why are some chest pain units very active and others not? Surely activity reflects the demand (ie, the number of appropriate chest pain patients that present to the hospital). Michael Mackintosh and co-investigators from Sheffield, UK, studied this question in six units of the ESCAPE study, using qualitative methods. Find out

what really makes a difference by reading their paper on (*see page 672*).

## 40% rise shock

In another paper from Sheffield, UK, Jones and Goodacre report the results of a study designed to see if the apparent licensing law-related increase in alcohol-attributable attendances at one Emergency Department in London was matched in South Yorkshire. They established and compared the number of attendances that were directly attributable to alcohol at four Emergency Departments in the 12 month before and after the liberalisation of the licensing laws in England and Wales in 2005. The biggest surprise in this paper (for the tabloid press at least) will be their findings about the absolute burden of alcohol-attributable attendances for Emergency Departments (expressed as a percentage of the total attendances). Not a shocking 70% of attendances—not even a frightening 7%! You'll have to turn to (*see page 688*) to see this result and to see the size and nature of the change in attendances after the law was introduced. Once you've done this challenge yourself to write the most frightening headline you can using the data presented. Any that are better than mine win a prize—a lecture on absolute risk (*the Editor's decision is final—Ed*).

## Repeated visits by the elderly

In an interesting study from Dublin, Ireland, Corina Naughton and co-workers investigated 306 elderly Emergency Department attenders and established factors associated with repeated visits (within 6 months). Unsurprisingly, previous hospital admission tops the list—more interesting are the various social and psychological factors that also appear. Go to (*see page 683*) to see this paper for yourself.

## Ischaemia modified albumin (again)

Richard Ming-Hui Lin and colleagues from Perth, Australia, have looked carefully at the possible use of ischaemia modified albumin (IMA) as a rule-out test for acute coronary syndromes (ACS). They recruited 248 consecutive patients with symptoms suggestive of ACS and measured IMA and troponins. Their results and conclusions are set out on (*see page 668*). The ROC curves are particularly telling—go and look for yourself.

## Kissing noses

Colleen Taylor and Tim Coats from Leicester, UK, report the success of the kissing technique at removing nasal foreign bodies in young children. In a retrospective survey of 116 children, those who were instructed in the technique by the triage nurse had a shorter Emergency Department stay and a lower requirement for instrumentation. Softer outcomes (such as giggling) were also improved. The paper can be seen on pages (*see page 712*).

## Ultrasonic paramedics

Finally Mike Brooke and colleagues from Liverpool, UK, present a literature review about the possible use of ultrasound by paramedics in the prehospital setting. It is unsurprising that the use of this technique by prehospital practitioners should be on the cards—and it is refreshing to see a thorough academic review before implementation. This paper is well worth a read and is an exemplar for paramedic researchers. Go to pages (*see page 702*) to see the papers they found and the conclusions they draw.