

# Rural Healthcare Quality Network

A Clinical Forum Newsletter



## Medical Literature Review

### Infectious Disease

**Question:** Does dexamethasone have a role in the pain management of individuals with exudative pharyngitis?

**Answer:** Yes, eight (8) mg of IM dexamethasone, at the time of initial evaluation, significantly reduced the pain associated with exudative pharyngitis.

**Source:** *Journal of Emergency Medicine* 2008, 35 (4): 363-67.

### Family Practice/Internal Medicine

**Question:** Is BNP-guided therapy superior to symptom-guided heart failure therapy?

**Answer:** The debate continues! Patients less than 75 years of age whose therapy is guided by BNP measurement may have reduced risk of hospitalization. Of note, most all patients (age 60-74) can benefit from intensified medical therapy whether guided by BNP or symptoms.

**Source:** *JAMA (two articles)* January 28, 2009

### Medication Management

**Question:** Do PPI's (proton pump inhibitors) interfere with the efficacy of clopidogrel (Plavix)?

**Answer:** Recently published reports support this drug interaction concern.

**Source:** *FDA*

### Urgent/Emergent Care

**Question:** What is the current role for vasopressin in the treatment of cardiac arrest?



**Answer:** Two consecutive, large, randomized studies have indicated that vasopressin appears to be associated with worse neurological outcomes. It would appear that vasopressin has joined high dose epi as of no value in cardiac arrest.

**Source:** *NEJM* 2008; 359: 21-30

### Nursing Focused Care

**Question:** Is there any difference between oral and rectal acetaminophen with respect to reducing fever in pediatric patients?

**Answer:** No, the two routes have comparable efficacy.

**Source:** *Archives of Pediatric/Adolescent Medicine* 2008; 162(11): 1042-6

### Risk Management:

**Question:** Patients at low risk for ACS, who are discharged from the ED, should receive what treatment and instructions?

**Answer:** These patients should receive daily aspirin, NTG tablets and consideration for beta blockers. Stress testing within 72 hrs is recommended along with explicit return to ED instructions.

**Source:** *Circulation* 2007; 116: 803-807

## Practice Pearl:

**Question:** What is the value of obtaining a serum lactate in patients suspected of severe sepsis?

**Answer:** Serum lactate offers a valuable measure of tissue ischemia. Also, an initial lactate greater than 4 mmol/liter is associated with a significantly increased mortality (>25%). Serial levels may be even more useful as septic patients whose lactate level does not fall after the first six (6) hours have mortality levels >50%. Thus, lactate levels may assist with early triage to a tertiary facility.

**Source:** *Critical Care Medicine* 2004; 32:1637-42