PERIODS AND THE TOO-SENSITIVE RECTUM

There are many consolations to being of the female gender but one assumes that having menstrual periods is not one of them. At such times, bowel motions tend to be both more frequent and more loose. Whorwell’s group has earlier shown that, despite these changes in bowel habit, rectal sensitivity is unaffected by the menstrual cycle in normal women. However, patients with irritable bowel syndrome are often more symptomatic at period time and, in contrast with healthy women, rectal sensitivity increases significantly with menstruation. Sex hormones get the blame.

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ILLUMINATING IDEAS FOR PANCREATIC CANCER

Few gastroenterologists would willingly select pancreatic cancer as their exit visa from the woes of this world. Palliation is often so unsatisfactory and new ideas are always welcome. Bown and colleagues administered photodynamic therapy to a series of 16 patients with inoperable pancreatic adenocarcinoma. Tumour necrosis was seen in all though morbidity was not negligible—with haemorrhage and duodenal obstruction occurring in five individuals. Median survival was 9.5 months and 7 were alive after one year. This seems promising but we look forward to a controlled trial.

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SAFE AND SOUND IN IBD

Many clinicians who treat inflammatory bowel disease still feel somewhat uneasy about using azathioprine. Earlier concerns about short and long term toxicity may, to some extent, have been assuaged by careful monitoring and reassuring surveillance data. Nevertheless, reports of the long term use of the drug remain welcome. The Oxford group has some experience of treating inflammatory bowel disease. A retrospective review of patients attending the clinic over 30 years identifies 622 patients who had been given azathioprine for a mean of just under 2 years. Having ulcerative colitis (rather than Crohn’s) and a low white cell (and neutrophil) count favoured remission, as did being a man (but only if he had Crohn’s). In essence, toxicity was minimal with no mortality from neutropenia-related sepsis. Hesitant azathioprine prescribers can draw strength and comfort from such studies.

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THE POWER AND THE GLORY OF ULTRASOUND

Milan is a city one associates with elegance, style, and ultra-modernism. It is not surprising then to see two studies in this issue from that city which elegantly reveal the potential of ultrasound to help in the diagnostic evaluation of patients with complicated Crohn’s disease. In one study (p 490) ultrasound was shown to have high sensitivity and specificity in assessing disease extent and location (in comparison with barium studies and colonoscopy), particularly where strictures were present. In the second report (p 496), power Döppler sonography revealed the degree of vascularity around fistulae and spectral analysis was used to assess disease activity. Very stylish.

See pages 490 and 496

WHY THE SUGAR GOES AT THE END

In chronic pancreatitis it is widely known that exocrine failure occurs well before the development of glucose intolerance. This clinical observation is reflected in pathology by the development of acinar cell destruction but preservation of the islets. Bateman and colleagues speculated that differential epithelial kinetics might account for this interesting exocrine:endocrine discrepancy. They found that apoptosis played a major role in acinar cell loss, possibly as a result of increased expression of certain cell cycle associated molecules. Cell cycle modulating proteins were different in islet tissue. Differential apoptosis in a neat explanation for the acinar/islet discrepancy and this study begins to touch on relevant mechanisms.

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THE DEMAND FOR PACING THE GUT

Attempts to enhance gastrointestinal motility with electrical stimulation have had a chequered history. The paper from Amaris and colleagues reviews the success (or mostly otherwise) of previous attempts, and goes on to describe a technique of high frequency stimulation of the colon in 6 dogs. Subserosal stimulating electrodes were implanted in their descending colons and the movement of dog food and plastic pellets assessed. Powerful phasic contractions followed sequential 50 Hz stimulation. Those who have never quite understood the difficulties in pacing the gut will find this a stimulating read.

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