Cardiothoracic medicine

Left pleural effusion in a woman with coronary artery by-pass grafting

O Kayacan, D Karnak, S Beder, D Köksal

Answers on p 370.

A 74 year old woman presented with dyspnoea on exertion. She had been hypertensive for 25 years and underwent triple coronary by-pass grafting (CABG) with saphenous vein and left internal mammary artery through a median sternotomy 14 days previously. She was on diuretics and digitalis. Physical examination revealed a sternotomy scar and decreased breath sounds at the left lung base. Vital signs and other systems were normal. Chest radiography and thoracic computed tomography are shown in figs 1 and 2. She had a high white blood cell count 15×10^9/l, neutrophilia (78%), lymphopenia (10.6%), a high erythrocyte sedimentation rate (68 mm/hour) and a low serum albumin level (33 g/l). Diagnostic pleural tap yielded turbid milky fluid consisting 0.045 g/l protein, 226 IU lactic dehydrogenase, 11.6 mmol/l triglycerides, and 3.7 mmol/l cholesterol. Lymphoscintigraphy showed lymphatic leakage to the mediastinum.



Figure 1 Chest radiograph.

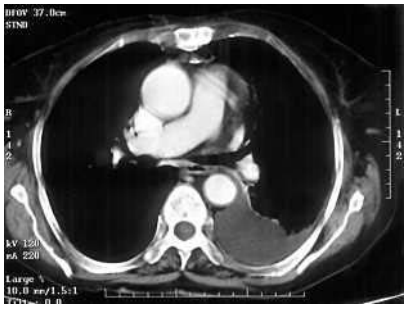


Figure 2 Computed tomogram.

QUESTIONS

(1) Describe the chest radiograph and thoracic computed tomography findings.
(2) What is the most likely diagnosis?
(3) What is the most likely mechanism of the disorder?
(4) What do you recommend for the treatment?

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Vasculitic disease

A peculiar rash and red eye

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Answers on p 370.

A 43 year old Indonesian man with no significant medical history presented with acute onset of pain and redness of his left eye. It was accompanied by sore throat, low grade fever, arthralgias, and myalgias. He had been a lifelong non-smoker, and denied alcohol intake or illicit drug use. He was married with no history of extramarital sexual contact. There was no history of exposure to animals or birds or recent travel abroad.

Examination revealed a temperature of 102.2°F (39°C), congested throat without any exudate, and a few aphthous ulcers on the buccal mucosa. The left eye was red but the pupils were equal and reactive to light and accommodation with intact but painful extraocular movements.

Complete blood count, serum chemistries, liver function tests, throat swab, and blood cultures remained negative. A chest radiograph was also normal. Erythrocyte sedimentation rate was 26 mm/hour.

Twenty four hours later the patient developed a circumscribed maculopapular rash around the insertion site of the intravenous cannula, which gradually progressed to vesicular eruption. He also complained of pain in his oral ulcers and blurring of vision.

QUESTIONS

(1) What is the most likely diagnosis?
(2) What is the rash around the intravenous cannula site and what is the pathophysiology for this phenomenon?

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Trauma

A painful swollen hand

K Selvarajan, R Vadivelu, A L Armstrong

Answers on p 371.

A 30 year old, right handed man presented to the fracture clinic with an painful swollen left hand 24 hours after a fall. He was able to make a fist and straighten his fingers. A radiograph of his hand performed in the accident and emergency department during his initial consultation is shown in fig 1.

Clinical examination revealed a swollen tender left hand, especially over the middle metacarpal bone. His range of movement in the middle metacarpophalangeal joint was slightly diminished.

QUESTIONS

(1) What are the features seen on the radiograph?

(2) What other investigation is required?

(3) What is the likely diagnosis?

(4) What is the line of management?

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Figure 1 Radiograph of hand (anteroposterior view).

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