

Questions

Were you paying attention? Test your retentive capacities on issues raised in this edition of *Africa Health*. You can quietly test yourself, or – and we're particularly keen on this – you could make it a part of the foundation of a Journal Club in your department or health institution. Life-long learning is a collaborative exercise and the whole health team can be positively stimulated by being involved in such discussion.

Q1. Malaria

For what reason is a parasitological test seen as of primary importance in the management of malaria?

Q2. Diabetes

Uncontrolled hyperthyroidism in diabetes may trigger what?

Q3. ECG

Name and briefly describe the two commonest forms of ventricular tachycardia (VT).

Q4. Clinical Review

Name the important HIV-related opportunistic infection that accounts for nearly 25% of AIDS-related deaths.

Q5.

Name what ocular manifestations you might see in diabetic patients of over 40 years of age? In general among the ageing, what other condition should primary care providers be looking for?

Q6. Medicine Digest

i. South Africa has introduced the 7-valent pneumococcal conjugate vaccine into its routine infant immunisation programme. With what result?

ii. What alternative therapy against impetigo has shown itself to be equally efficacious as intramuscular benzathine benzylpenicillin, with less side effects?

Answers

Q1. size is continually increasing then decreasing.

Q4. Cryptococcal meningitis.

Q5.

Visual impairment, blindness, cataracts and diabetic retinopathy. And be on the lookout for presbyopia (loss of accommodation of the crystalline lens with increasing age) leading to headache when doing near work.

Q6.

i. With 81% uptake, cases of invasive pneumococcal disease in children aged younger than 2 years declined from 54.8 to 17 cases per 100 000.

ii. Oral co-trimoxazole.

Q1.

One reason in the article: severe malaria's ability to mimic many other diseases; and secondly, unnecessary use of treatments, will hasten the compromising of their efficacy.

Q2.

Hyperglycaemic emergencies.

Q3.

The more common form: Monomorphic VT. Defined as non-sustained (lasting less than 30 seconds), or sustained (lasting more than 30 seconds), terminating either spontaneously or after treatment. And less commonly: Polymorphic VT. The most notable form is *torsade de pointes* which has a very distinctive pattern. The QRS complexes run one into the other, and their