MINERVA

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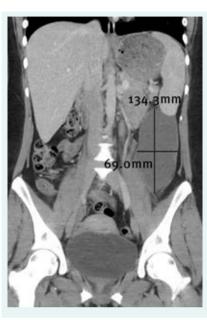
A woman with pain and weakness in both legs Try the picture quiz in ENDGAMES, p 36

After the overload of opinion about statins in the past few weeks, Minerva commands that there should be a cooling-off period until the end of the year. Before that comes into force, she would like to draw attention to an article in Circulation: Cardiovascular Ouality and Outcomes (2014. doi:10.1161/CIRCOUTCOMES.114.000825) with the title "Combining network meta-analysis with multicriteria decision analysis to choose among multiple drugs." The authors look at the six available statins and the known information about their benefits and adverse effects together with the degree of uncertainty. They suggest that this approach needs to be adopted for every drug class when sharing decisions with patients: quite a challenge.

In some clinical situations, however, shared decision making has to give way to urgent lifesaving treatment following a protocol. Acute bacterial meningitis is an example, and guidelines from the Infectious Diseases Society of America summarise current evidence into a straightforward algorithm for its management. Yet when investigators from Yale looked at how well these guidelines were followed in 160 cases of suspected bacterial meningitis admitted to local hospitals, they came up with an adherence rate of 0.6% (American Journal of Medical Quality 2014, doi:10.1177/1062860614545778). "Antibiotic choice is often incorrect, corticosteroids are rarely administered, and there is an overutilization of neuroimaging."

In the 160 Connecticut patients mentioned above, the leading cause of bacterial meningitis was *Streptococcus pneumoniae* and there were no cases of *Neisseria meningitidis* infection. This is not entirely typical, according to a new survey of the epidemiology of bacterial meningitis in the US from 1997 to 2010 (*Lancet Infectious Diseases* 2014, doi:10.1016/S1473-3099(14)70805-9). This confirms that *S pneumoniae* is the commonest pathogen while *N meningitidis* still just holds second place, but both are becoming rarer. Other pathogens such as staphylococci and *Haemophilus influenzae* are close behind.

But that does not mean that *N meningitidis* is necessarily on the way out. Always an enigmatic bacterium, it showed a surge in invasiveness from 0.5 cases per 100 000 in the Netherlands population in 1960 to 4.5/100 000 in 2001, and subsequently decreased to 0.6/100 000 in 2012



(*Lancet Infectious Diseases* 2014, doi:10.1016/ S1473-3099(14)70806-0). Median age at infection increased from 1.8 years in 1960 to 6.1 years in 2012 for all serogroups, among which group B predominated.

In four months it will be winter again and emergency departments will be overflowing. People who present there with chronic headache are often made to feel slightly unwelcome, but of 483 patients who did so at the Tepecik Training and Research Hospital in Izmir, Turkey, in the winter of 2011, 38 had evidence of carbon monoxide poisoning (*Emergency Medicine Journal* 2014, doi:10.1136/ emermed-2012-201712). Simple, non-invasive pulse carbon monoxide oximeters are available, and Minerva wonders if these should be more widely used in emergency and out of hours settings during the cold months of the year.

The malaria parasite likes good rich blood to feed on. So if you achieve optimal iron status in children in areas where malaria is endemic you may increase their risk of malaria. But the nicer side of the coin is that if you interrupt malaria transmission in these areas, you tend to normalise the iron levels of the children, as demonstrated in highland Kenya (*American Journal of Clinical Nutrition* 2014, doi:10.3945/ ajcn.114.087114). Fight the parasite and the iron will look after itself.

A 32 year old woman presented after four days of abdominal pain in the left iliac fossa. Examination identified left iliac fossa tenderness. Computed tomography showed a cyst from the retroperitonealised mesocolon that was closely related to the descending colon. This is in keeping with a mesenteric cyst or intestinal duplication cyst. Both are rare and may arise from any portion of the gut. Clinical presentation can range from a painless abdominal mass or abdominal discomfort to an emergency resulting from bowel obstruction or haemorrhage and peritonism as a result of cyst rupture. The cyst was radiologically drained and the patient is currently symptom free at one year.

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"So how long have I got doc?" is a question most docs would rather not be asked. So Minerva was intrigued by a paper reporting, "A simple technique to estimate best and worst case survival in patients with metastatic colo-rectal cancer treated with chemotherapy" (Annals of Oncology 2014, doi:10.1093/annonc/mdu372). The authors looked at the randomised trials and concluded that simple multiples of the median overall survival give reasonable estimates of the times at which different survival levels are reached in patients with metastatic colorectal cancer. "We would encourage clinicians to think of prognosis as a trajectory, and to consider quoting survival ranges instead of point estimates, in discussions with patients."

Ciguatera fish poisoning can spoil your entire day if you eat the wrong kind of grouper. In fact it can spoil an entire 10 weeks, as two British medical students discovered on a trip to the Cook Islands (*BMJ Case Reports* 2014; doi:10.1136/bcr-2014-204847). Because dinoflagellate toxins are found only in certain groupers, which are hard to tell apart, researchers propose a drastic solution: DNA barcoding for groupers (*PLoS One* 2014;9:e98198, doi:10.1371/journal.pone.0098198). Intrepid British medical students on exotic electives can now analyse the DNA of any large fish they catch in coral reefs and compare their findings with the chart in this paper before lighting their barbecue. Cite this as: *BMJ* 2014;349:g5167