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Case Report **Published Date:-2019-12-12 00:00:00**

Embolic Septic Emboli with MRSA: A different source

Septic Iliac vein thrombophlebitis with associated psoas abscess is a rare and severe entity, which diagnosis is challenging when no risk factor is clearly present. We are presenting a case of severe septic cavitary pulmonary emboli complicated with Acute Respiratory Distress Syndrome (ARDS) that evolved rapidly to respiratory distress and multi organ failure.

A 61-year-old Hispanic male, had multiple emergency department visits due to back pain, being most of them intramuscular pain medications and steroids. In the history, he had back pain that worsened accompanied by poor mobility, generalized malaise, fever and chills. Computed tomography (CT) scan showed a paravertebral psoas abscess with L5 - S1 diskitis/spondylitis inflammatory changes, which was then later evidenced by a gallium study. Further imaging studies were done, showed bilateral cavitary lung lesions, consistent with septic emboli. Subsequent blood cultures were positive for Methicillin Resistant Staphylococcus Aureus (MRSA), for which a successful combined therapeutic regimen was used. Transthoracic and transesophageal echocardiogram were not suggestive of endocarditis. Staphylococcus aureus (SA) bacteremia is one of the most common serious bacterial infections with a high risk of metastatic complications, which makes this pathogen a unique one. The combination of factors iliac vein thrombophlebitis, psoas muscle abscess, diskitis/spondylitis with ARDS makes cavitary pulmonary disease a challenging perspective. After a 6-week antimicrobial treatment, full anticoagulation, his clinical condition and image findings improved, and he was recently admitted for physical rehabilitation. Major vessels thrombophlebitis should always be considered, when primary source of septic pulmonary emboli is not clear. This case illustrates the complexity of illness and complications that may arise from a source of infection as the one in this patient. Further therapeutic strategies were tailored accordingly.

Case Report **Published Date:-2019-12-09 00:00:00**

Brainstem Death due to hypertension induced brain hemorrhage

Brain stem death is when a person has permanently lost the potential for consciousness and the capacity to breathe. When this happens, a machine called a ventilator keeps oxygen circulating through the person’s bloodstream - a person confirmed as being dead when their brain stem function is permanently lost [1].

Review Article **Published Date:-2019-08-22 00:00:00**

Management of Ischemic Stroke during cardiac catheterization: A case report and review of literature

Stroke following coronary interventions is a devastating and most dreaded complication with signi?icant morbidity and mortality. Various factors have been ascribed for this complication including the technical errors [1]. A small percentage of strokes are iatrogenic, including those associated with invasive cardiac procedures. According to the literature, it is a rare complication of left heart catheterization [2]. Percutaneous coronary intervention is increasingly used to treat patients with diffuse atherosclerosis, acute coronary syndromes and even high-risk patients such as low ejection fraction [1]. The authors describe a patient who underwent percutaneous coronary intervention in the context of inferior infarction, which was complicated by ischemic stroke during cardic catheterization.

Review Article **Published Date:-2019-07-22 00:00:00**

Update on Phenobarbital for Alcohol Withdrawal Syndrome in Intensive Care

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Alcohol abuse is a global health problem. Alcohol withdrawal syndrome (AWS) ranges from mild to severe symptoms that can lead to fatal delirium tremens requiring ICU admission and incurring high health care cost as high as $20,000 a month. The latest published reports suggest that phenobarbital is a promising therapeutic option for management of AWS as evidenced by less ICU admissions, length of stay in hospital, use of adjunctive agents, health care costs and attention from the nursing staff than that of patients treated with commonly used benzodiazepines such as lorazepam, diazepam, and chlordiazepoxide. Phenobarbital is beneficial for the treatment of AWS, both in the emergency and inpatient settings and both as monotherapy or in conjunction with benzodiazepines. It is safe for patients without severe hepatic impairment, has a better mechanism of action and longer half-life than benzodiazepines, and leads to less delirium and agitation. Powered randomized controlled trials with large populations are required, yet phenobarbital can be used to safely to treat AWS.

Letter to Editor **Published Date:-2019-02-19 00:00:00**

Do you really want to improve the results of treatment for acute pneumonia?

The question raised in the title of this letter is a natural consequence of the findings and conclusions that have been growing steadily in recent years regarding the results of treatment for acute pneumonia (??). If you look at the publications of recent years in this field of medicine, it turns out that one of the main obstacles to progress in improving the results of treatment of this disease is the lack of appropriate methods for determining the pathogen. Thus, the lack of timely diagnostic information about the etiology of the disease excludes the possibility of targeted antibiotic therapy. In recent years, such regrets have become more and more relevant, playing the role of the main explanation for treatment failures .Continuing to narrow the unidirectional view of the problem and to pay attention only to the microbial factor as the main cause of the disease, such views are in fact another illusion, which, even in the case of its hypothetical implementation, will not make significant changes in the overall trend. This statement is easy to verify if you rely on well-known facts, and not use as arguments assumptions and guesses.

Research Article **Published Date:-2019-02-07 00:00:00**

Angioarchitectonics of acute pneumonia

The article presents the results of x-ray anatomical studies of 56 whole lung preparations, which were carried out immediately after the autopsy of children who died from ?P. In 47 cases it was carried out the contrast of the vessels and in 9 cases the bronchial tree. The results allowed to clarify some details of the pathogenesis of ?P and were additional arguments in support of the new doctrine of the disease.

Research Article **Published Date:-2019-02-04 00:00:00**

Acute pneumonia: Facts and realities against etiological hypotheses and beliefs

Modern AP concepts are focused exclusively on the infectious nature of the disease and the presence of certain pathogens. This belief determines the principles of treatment, the lack of effectiveness of which remains a concern of health professionals. The article presents a fragment of the study devoted to the etiology of ?P. 994 children aged 4 months to 14 years with various forms of so-called community-acquired pneumonia were examined and treated. Bacteriological examination of the material from the inflammation zone was carried out in 542 patients. Experiments on modeling ?P and its pleural complications were performed on 44 animals. The obtained results and critical analysis of the literature data and scientific facts allow us to consider bacteria only as one of the etiological elements of ?P, which is not mandatory in all cases of the disease. Scientifically based revision of existing ideas about the causes and mechanisms of AP development leads to the need for a radical change in the principles of treatment and is a strategic direction in solving the problem.

Research Article **Published Date:-2019-01-24 00:00:00**

The impact of skin disorders on patients' quality of life in Malaysia

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Background: Skin diseases is a common worldwide problem. It affected every aspect of patients' quality of life (QOL) mainly physically, socially and psychologically.

Objectives: to assess the impact of skin disorders on patients' quality of life and to identify factors associated with it.

Methodology: This cross-sectional study was conducted in outpatient dermatology clinic of a tertiary hospital in Malaysia. A random sample of 145 patients with acne, psoriasis and atopic dermatitis (AD) were interviewed using DLQI questionnaire during their scheduled follow-up appointments at dermatology clinic.

Main outcome measure: Self-reported patients' QOL due to their skin diseases.

Results and discussion: Out of three skin diseases psoriasis patients had the highest prevalence (39.3%) followed by AD (34.5%) and acne (26.2%). Patients' QOL was highly influenced by their skin conditions especially on working/schooling domain. Furthermore, several factors were identified, namely age, working environment, concurrent skin diseases, usage of supplement for skin diseases and type of food as aggravating factors—that may influence patients' QOL. QOL among females and younger adults was found to be more significantly influenced as compared to males and elderly. With respect to working environment, those who had both indoor and outdoor working environment showed the highest impact of their skin conditions on their QOL. Single patients were more influenced by their skin conditions when compared to those who are married, however it was not significant.

Conclusion: Our findings revealed skin disease had negatively impacted individual QOL with different level of aspects. Among the three diseases, AD patients had the worst impact on QOL. Significant predictors of QOL did not relate solely to skin diseases but also other factors such as type of food and working environment.