An important lesson TB or not TB

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broadcast, together with further questions about members’ interest in medical matters and viewing of other medical dramas and documentaries. General medical knowledge was tested by two multiple choice questions: “What is a crash team?” and “What is a laparotomy?” Responses from the two surveys were linked. At one week, 2792 out of 3115 panel members participated, 1030 (37%) of whom reported watching the episode. At 32 weeks, 1282 of these participants remained in the panel, of whom 475 (37%) had seen the episode.

Non-viewers were more likely not to respond or respond “don’t know” to all questions in both surveys. At one week, significantly more viewers (85%) than non- viewers (45%) correctly identified paracetamol as having hepatotoxic effects. By 32 weeks, this knowledge had declined by 12% in viewers (P < 0.0005) and increased by 5% in non-viewers (P = 0.004). The effects were little changed by using a logistic regression model to adjust for demographic factors and measures of medical interest, knowledge, and viewing habits.

Viewers indicated longer minimal safe delays before seeking help than non-viewers, the differences being small but significant. There was no difference between viewers and non-viewers in lethal doses of paracetamol or the ranking of paracetamol toxicity compared with that of other drugs.

Comment
Rates of deliberate self harm continue to increase: overdose is the most common method, and paracetamol or the ranking of paracetamol toxicity between viewers and non-viewers in lethal doses of paracetamol is attracting audiences of over 10 million. Our study showed that viewers of a Casualty episode registered and retained information about paracetamol toxicity presented in the programme among other distracting story lines. Interestingly, it also revealed that the knowledge obtained was strictly restricted to the presented facts and that incomplete messages might have been misinterpreted. There was also an increase in overdose presentations to general hospitals after the broadcast.

Medical messages broadcast within television programmes are likely to have an impact on the knowledge of the general public: editors should be aware of this and ensure that they are accurate and complete.

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Contributors: All authors participated in the design of the study and preparing the report. SOC and KH designed the questionnaires. SOC and JJ D took major responsibility for analysing the results, interpreting the findings, and preparing the report. AK coordinated data collection, DGA provided statistical advice. CB initiated the study; SOC is guarantor for the study.

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An important lesson
TB or not TB

I arranged for the admission of my younger sister with a deep sense of apprehension. The kind medical registrar I spoke to did his best to allay my anxieties, but he too agreed that urgent admission and assessment were warranted. Over the past two to three months she had developed symptoms of weight loss, recurrent fevers and night sweats, together with bilateral cervical lymphadenopathy. Examination on admission also showed the presence of splenomegaly. A series of investigations was promptly initiated.

When my parents asked what was wrong, I said that she was likely to be suffering from tuberculosis. Consciously I had decided not to raise the possibility of a lymphoma, hoping to protect them from stress and worry, which I sincerely hoped was unnecessary.

To my mind, tuberculosis was a far more welcome possibility than a mother of three young children developing a lymphoma—with B symptoms at the age of 26. My answer failed to have the desired response, for reasons, which at the time, I could not fully understand.

Last week, almost a year on, my father spoke about his younger sister who developed tuberculosis at a similar age. I cannot really remember him speaking about her at any length before. Fighting back the tears he recalled how she had been quarantined, away from her family. On the few occasions that I was taken to visit her she would, I was told, gently kiss my tiny feet on seeing me, hoping to avoid passing on her lethal disease. Cure? There was no cure for tuberculosis in Pakistan at the time.

During the course of my general practice training I was taught the importance of exploring the fears, anxieties, and concerns of patients and their families, thereby attempting to place events, health, and disease in the context of their very personal narratives. Last week, I was reminded of the truth of this teaching.