

High rates of respiratory symptoms and airway disease in mental health inpatients

People with severe mental illness (SMI) have a lower life expectancy due in part to a higher prevalence of cardiac and metabolic disease. Less is known of the prevalence of respiratory disease in this group.

This report is of a study designed to throw some light on this issue. Eighty-two inpatients with SMI had a structured interview and a questionnaire designed to detect respiratory disease and sleep disordered breathing. The patients recorded high rates of respiratory symptoms—wheezing 38%, dyspnoea 44% and productive cough 37%. The mean age of the subjects was 38 years and 51% were males. Fifty-two percent were tobacco smokers whereas the smoking prevalence in Australia generally is 19–21%.

The authors conclude that people with SMI have high rates of respiratory symptoms and a high incidence of chronic obstructive pulmonary disease on spirometry. Half of these had not been previously diagnosed. This study was undertaken in a tertiary centre in Queensland but it could be surmised that the findings might well apply to SMI patients everywhere.

Internal Medicine Journal 2018; 48:433–438

Siponimod versus placebo in secondary progressive multiple sclerosis

No treatment has consistently shown efficacy in slowing disability progression in patients with secondary progressive multiple sclerosis (SPMS). This report is of a randomised trial gauging the effect siponimod, a selective sphingosine phosphate receptor modulator, has on the progression of multiple sclerosis compared with a placebo.

Siponimod reduced the three-month risk of confirmed disability progression by 21%. The incidence of serious adverse effects was similar in both groups.

The researchers concluded that siponimod treatment reduced the risk of disability progression with a safety profile similar to other sphingosine modulators and is likely to be a useful treatment for SPMS.

Lancet 2018; 391:1263–73

Change in overweight from childhood to early adulthood and risk of type 2 diabetes

Childhood overweight is associated with an increased risk of type 2 diabetes in adulthood. In this study the researchers investigated whether remission of overweight before early adulthood reduces the risk.

The study involved over 60,000 Danish men whose weights and heights had been measured at 7 and 13 years of age and in early adulthood (17–26 years of age). Overweight at each of these three ages was found to be positively associated with the development of type 2 diabetes. However, men who had had a remission of overweight before the age of 13 years had a risk of having type 2 diabetes that was similar to men who had never been overweight.

It was concluded that childhood overweight at seven years of age was associated with increased risks of adult type 2 diabetes only if it continued until puberty or later ages.

N Engl J Med 2018; 378:1302–12

URL:

<http://www.nzma.org.nz/journal/read-the-journal/all-issues/2010-2019/2018/vol-131-no-1475-18-may-2018/7577>
