This section of the journal serves to highlight the works and researches done by local doctors or doctors either in Brunei Darussalam or in collaborations with other centres that have been published in regional or international journals. This also includes works published as part of collaboration with centres outside of Brunei Darussalam. These works include review articles, original articles and case reports published between 16th December 2011 to 14th February 2012. (Some publications have been published or indexed at a later date than publication).

Incidental cardiac abnormalities on non-electrocardiogram-gated multi-detector computed tomography imaging of the thorax and abdomen.
Lim KC, Chai F, Teo LS.
Singapore Med J. 2011 Dec;52(12):906-12; quiz 913.

Little attention is usually paid to the heart on non-electrocardiogram (ECG)-gated multi-detector computed tomography (MDCT) imaging of the thorax and abdomen. The current MDCT systems have fast scanning capabilities that render non-ECG-gated images with reduced cardiac motion artefacts due to greater temporal and spatial resolution. This has allowed for better evaluation of the cardiac structures. We present a pictorial review of incidental cardiac abnormalities found on MDCT imaging of the thorax and abdomen performed in our institution. We systematically describe abnormalities involving the pericardium, myocardium, cardiac valves, cardiac chambers, coronary artery and congenital heart disease. Some of these images have echocardiograph and magnetic resonance imaging correlation. The purpose of this pictorial essay is to draw attention to cardiac abnormalities found incidentally on non-ECG-gated MDCT imaging of the thorax and abdomen, which may or may not be related to the patient’s symptoms.

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Public opinion on renal transplantation in Brunei Darussalam.
Teo TT, Hossain MM, Zinna S, Liew YP, Tan J.

Brunei Darussalam is a small Muslim country with a high prevalence and incidence of kidney disease. At present, there is no local transplant program for patients on the renal replacement therapy program. In order to assess feasibility of a local transplant program, we decided to conduct a survey to assess public opinion on renal transplantation. The majority of the 300 respondents (78.7%) were willing to donate their kidneys if needed. Even after learning of the small theoretical risks of kidney failure, 72.33% of all respondents were still willing to proceed with transplantation. Respondents who had relatives on dialysis and who had a higher education level were more willing to donate their kidneys. There was no significant difference between Muslims and non-Muslims. Most respondents (59.7%) preferred to have transplantation done locally. This study shows that most Bruneians are receptive of the idea of living related kidney donations, which augurs well for the sustainability of a new program. More work is needed to overcome other barriers like the availability of surgical expertise and facilities and cost-benefit considerations.

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Gastric hematoma complicating routine biopsies
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A case of breakage of LMA Supreme on its first use
Simon BP.
Indian J Anaesth. 2011; 55;635-6.

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Epidemiology of burns in a major referral hospital in Brunei Darussalam.
Pande KC, Ishak HL

Introduction: Burn injuries are a public health concern across the world, particularly in Southeast Asia, where epidemiological data is lacking. This retrospective study was conducted to assess the epidemiology of patients with burns treated at a major referral hospital in Brunei Darussalam, with particular reference to demographics and aetiology. Methods: All patients were referred to and treated at the Burns Unit, where data was recorded by the on-duty nurse on a pre-designed form at the first attendance. A total of 211 patients (111 male, 100 female), comprising 10 inpatients and 201 outpatients, were treated during the study period. Results: The average age of the patients was 19.6 ± 20.9 (median 10, range < 1-90) years. 67 (32%) patients were under two years of age. Scalding due to hot liquids was the most common cause (78.2%), followed by flame and contact burns. The majority of burns were sustained indoors either at home or at work (87.2%). The total body surface area (TBSA%) for the whole sample was 3.7% ± 7.9% (median 2%; range 1%-90%). Patients with flame burns (n = 19) were older and had larger TBSA% (p < 0.05). Inpatients had significantly higher TBSA% compared to outpatients (28.2% ± 26% versus 2.5% ± 2.1%; p < 0.005). Conclusion: Scald burns sustained indoors are the most common across all age groups. Although the TBSA is small, a large number of children are affected. There is a need for burns prevention education programme in Brunei Darussalam.

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Utility of the electronic information resource UpToDate for clinical decision-making at bedside rounds.
Phua J, See KC, Khalizah HJ, Low SP, Lim TK.

Introduction: Clinical questions often arise at daily hospital bedside rounds. Yet, little information exists on how the search for answers may be facilitated. The aim of this prospective study was, therefore, to evaluate the overall utility, including the feasibility and usefulness of incorporating searches of UpToDate, a popular online information resource, into rounds. Methods: Doctors searched UpToDate for any unresolved clinical questions during rounds for patients in general medicine and respiratory wards, and in the medical intensive care unit of a tertiary teaching hospital. The nature of the questions and the results of the searches were recorded. Searches were deemed feasible if they were completed during the rounds and useful if they provided a satisfactory answer. Results: A total of 157 UpToDate searches were performed during the study period. Questions were raised by all ranks of clinicians from junior doctors to consultants. The searches were feasible and performed immediately during rounds 44% of the time. Each search took a median of three minutes (first quartile: two minutes, third quartile: five minutes). UpToDate provided a useful and satisfactory answer 75% of the time, a partial answer 17% of the time and no answer 9% of the time. It led to a change in investigations, diagnosis or management 37% of the time, confirmed what was originally known or planned 38% of the time and had no effect 25% of the time. Conclusion: Incorporating UpToDate searches into daily bedside rounds was feasible and useful in clinical decision-making.

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