



30 days in medicine

Opioids no better than other painkillers for osteoarthritis pain

A randomised, controlled 12-month trial involving 240 patients with chronic back pain or hip or knee osteoarthritis pain found that opioid drugs were no better than non-opioids at reducing pain that interfered with activities of daily living. The study, published in *JAMA*, also found that pain intensity was lower in the non-opioid group and drug-related adverse symptoms were more common in the opioid group.

The conclusion is that treatment with opioids was not superior to treatment with non-opioid drugs, and the results do not support starting opioid therapy for moderate to severe chronic back pain or hip or knee osteoarthritis pain.

Krebs EE, Gravelly A, Nugent BA, et al. Effect of opioid vs nonopioid medications on pain-related function in patients with chronic back pain or hip or knee osteoarthritis pain: The SPACE randomized clinical trial. *JAMA* 2018;319(9):872-882. <https://doi.org/10.1001/jama.2018.0899>

Once-off PSA screening does not reduce deaths from prostate cancer

Results from a trial involving >400 000 men who were invited to a single prostate-specific antigen (PSA) screening test for detecting prostate cancer showed that while more cancer was detected, there was no effect on prostate cancer mortality after 10 years of follow-up.

The Cluster Randomized Trial of PSA Testing for Prostate Cancer was conducted at 573 primary care centres in the UK and targeted men aged 50 - 69 years, who were followed up for 10 years. Among practices randomised to a single PSA screening intervention v. standard practice without screening, there was no significant difference in prostate cancer mortality, although the detection of low-risk prostate cancer cases increased. The findings do not support single PSA testing for population-based screening.

Martin RM, Donovan JL, Turner EL, et al. Effect of a low-intensity PSA-based screening intervention on prostate cancer mortality: The CAP randomized clinical trial. *JAMA* 2018;319(9):883-895. <https://doi.org/10.1001/jama.2018.0154>

Cannabis compound may help seizures in drug-resistant epilepsy

A review of pooled data from 17 observational studies shows that seizure frequency in drug-resistant epileptic children fell by at least 50% in just under half of the patients and stopped completely in nearly one in ten (8.5%) in eight of the studies. Half of the patients in 12 studies also reported improved quality of life. The study was published in the *Journal of Neurology, Neurosurgery and Psychiatry*.

Stockings E, Zagic D, Campbell G, et al. Evidence for cannabis and cannabinoids for epilepsy: A systematic review of controlled and observational evidence. *J Neurol Neurosurg Psychiatry* 2018 (epub 6 March 2018). <https://doi.org/10.1136/jnnp-2017-317168>

HRT may have a positive effect on heart structure

A new study published in *PLoS One* suggests that hormone replacement therapy (HRT) may have a positive effect on heart structure. The study was carried out using data from UK Biobank, a database of health questionnaire data and physical measurements, including cardiovascular magnetic resonance imaging. Of 1 604 postmenopausal women without known cardiovascular disease, 513 had used HRT for ≥ 3 years and 1 091 had never used it. Results showed lower left ventricular and higher end-diastolic volume among non-HRT users compared with those who used HRT. There was no significant difference in left ventricular mass between the two groups of women. The study suggests that HRT not only has no adverse effect on heart function but may have some positive effects on heart structure.

Sanghvi M, Aung N, Cooper J, et al. The impact of menopausal hormone therapy on cardiac structure and function: Insights from the UK Biobank imaging enhancement study. *PLoS One* 2018 (epub 8 March 2018). <https://doi.org/10.1371/journal.pone.0194015>

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