

# CLEVELAND CLINIC JOURNAL OF MEDICINE



VOLUME 57 · NUMBER 6 · SEPTEMBER 1990

**HIGHLIGHTS FROM MEDICAL GRAND ROUNDS**

WILLIAM S. WILKE, MD, EDITOR

**Uric acid nephropathy: management pearls** 505

JOSEPH V. NALLY, JR, MD

Patients with uric acid renal calculi are best treated with hydration and urinary alkalinization, not surgery or lithotripsy.

**Differential diagnosis of hypersensitivity vasculitis** 506

LEONARD H. CALABRESE, DO

The usual cause of hypersensitivity vasculitis is exposure to a drug or toxin, but infection, Henoch Schönlein purpura, and connective tissue diseases also are possible.

**BENCH TO BEDSIDE**

BEN H. BROUHARD, MD, EDITOR

**New series: making basic science relevant** 512

BEN H. BROUHARD, MD

An innovative series will address issues in basic science that are relevant to the practice of medicine.

**Intra-arterial chemotherapy for brain tumors** 513

SAMUEL J. HASSENBUSCH, MD, PHD

JAMES H. ANDERSON, PHD

AND DONALD M. WHITING, MD

A program involving rabbit and human protocols demonstrates the successful integration of basic and clinical research with practical applications.

**DERMATOLOGY REVIEW****Evaluation and treatment of generalized pruritus** 521

GARY R. KANTOR, MD

Generalized pruritus that does not respond quickly to symptomatic therapy requires careful evaluation and close follow-up.

**MEMORIAL****Stanley O. Hoerr, MD** 529

ROBERT E. HERMANN, MD

AND NORMAN R. HERTZER, MD

Dr. Stanley Hoerr left his colleagues and friends with a legacy of compassion, leadership, and integrity.

**CLINICAL CONSULTATION****Stasis ulcer treatment with compression dressing** 529

JESS R. YOUNG, MD

AND BARBARA A. TERWOORD, LPN

An easy-to-learn alternative to the Unna boot is effective and well accepted by patients, with minimal risk of complications.

*Continued on next page*

# TABLE OF CONTENTS

## EDITORIAL

- Deprenyl and Parkinson's disease: new use for an old drug** 532

PATRICK J. SWEENEY, MD

Parkinson's patients treated with deprenyl note modest but consistent clinical improvement.

## CARDIOLOGY REVIEWS

- Recombinant tissue-type plasminogen activator and platelet activity** 537

RICHARD C. BECKER, MD

The effects of rt-PA on platelet activity could have a direct impact on thrombolytic efficacy, coronary artery reocclusion, and risk of hemorrhage.

- Assessment of the size of acute myocardial infarction I: biochemical methods** 547

ALBERT V. G. BRUSCHKE, MD

ARNOUD VAN DER LAARSE, PHD

AND ERNST E. VAN DER WALL, MD

For routine purposes, measurement of slowly catabolized enzymes is the most practical way to determine infarct size.

- Assessment of the size of acute myocardial infarction II: electrocardiography and imaging methods** 551

ALBERT V. G. BRUSCHKE, MD

ARNOUD VAN DER LAARSE, PHD

AND ERNST E. VAN DER WALL, MD

The electrocardiogram gives a reasonable estimate of infarct size; among visual methods, magnetic resonance imaging has the greatest potential for accuracy.

- Diagnosis and management of infective endocarditis** 558

THOMAS F. KEYS, MD

Despite therapeutic advances, infective endocarditis still has an overall mortality of 20%; transesophageal echocardiography may improve the management of these patients.

## MANAGING THE DIABETIC SYNDROME

### PART II

BYRON J. HOOGWERE, MD, EDITOR

- Pancreas transplantation: alternatives and limitations** 563

BYRON J. HOOGWERE, MD

Future alternatives to traditional insulin administration include closed-loop delivery systems and islet cell transplantation.

- Pancreas transplantation: state of the art** 564

SHARON GRUNDFEST-BRONIATOWSKI, MD

With improved immunosuppressive therapy, pancreas transplantation may become an option for diabetic patients early in the course of their disease.

## CASE REPORTS

- Monocytic leukemoid reaction, glucocorticoid therapy, and myelodysplastic syndrome** 571

MANOEL MORAES, MD

JOHN WILKES, MD

AND JAMES N. LOWDER, MD

A monocytic leukemoid reaction in a patient with myelodysplastic syndrome was related to the effect of corticosteroids on the underlying marrow disorder.

- Myelodysplastic syndrome and transient acantholytic dermatosis** 575

PAUL F. ROCKLEY, MD

WILMA F. BERGFELD, MD

KENNETH J. TOMECKI, MD

AND JAN K. BRYDON, MD

Darier's type of transient acantholytic dermatosis developed in a patient with myelodysplasia and was treated with steroids and antihistamines.

## DEPARTMENTS

- Information for Authors** 511  
**Continuing Medical Education Calendar** 542  
**Errata** 577  
**Book Reviews** 578