

**Evidence Based
Emergency Medicine
at the ‘Coal Face’**

or

“Applied EBM”

Sicily Statement

- EBP requires that decisions about health care are based on the **best available, current, valid and relevant** evidence.

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CASE Hx

- A 21 year-old man presents to an emergency department and is seen by a Senior House Officer (SHO). The SHO assesses the patient and requests a senior opinion.

The Specialist reviews the patient

- He finds clinical and ECG findings consistent with uncomplicated idiopathic pericarditis without associated sinister factors. The patient goes for an echocardiogram, which is normal.

The patient also has a history of brittle asthma

- Exacerbated by Non Steroidal Anti-Inflammatory Drugs (NSAIDS) and this has been worsening recently despite bronchodilator and steroid inhalers

In Pain

- Paracetamol and Codeine are not adequately controlling the pain but the patient is keen to go home using “some extra” medication.

Dilemma

- The SHO is keen to treat the pericarditis with an NSAID but cannot do so because of the history of brittle asthma.

Dilemma

- The Cardiology registrar cannot suggest anything apart from admission for pain relief.

How about colchicine?

- There is no mention of using Colchicine in the (then) current edition (14th) of *Harrison's Principles of Internal Medicine*.
- They decide to do a rapid literature search to determine whether this may be a safe and effective treatment.

Search

- A very simple search in Medline is performed cross-referencing the hits for the Medical Subject Headings (MeSH) for Colchicine with those for pericarditis.

Results

- Of the 8 papers found, 6 indicate that colchicine is being used as a second line therapy particularly for recurrent pericarditis.
- The adverse effects appear to be similar to those for use in gout.

Results

- The abstracts read also reveal oral steroids as a useful second line therapy.

Discussion with patient

- They prescribe colchicine for his pericarditis, and prednisolone for his asthma and pericarditis.
- The patient is followed up closely and does well.

Of interest

- The current edition (16th) of *Harrison's* now includes details of colchicine as a second line therapy but this case actually took place in the year 2001 when there was no such reference.