

# Abstracts de publicaciones nacionales ISI 2016

## DEPARTAMENTO MEDICINA

### SECCIÓN ENDOCRINOLOGÍA Y DIABETES

**REV MED CHIL. 2016 OCT;144(10):1360-1364.**

CETOACIDOSIS DIABÉTICA NORMOGLICÉMICA EN EL EMBARAZO. CASO CLÍNICO

Rivas M M, Durruty A P, Sanhueza M L, López S G.

Normoglycemic diabetic ketoacidosis should be suspected in pregnant women presenting nausea, vomiting, abdominal pain and anorexia. We report a 39 years old woman with a 32 weeks pregnancy who sought emergency care due to hyperemesis. She was hospitalized with the following diagnoses: pregnancy hypertension syndrome, gestational diabetes, morbid obesity and poor prenatal control. The evaluation of the feto-placental unit showed perception of fetal movements, non-reactive non-stress baseline record and a biophysical profile of 6/8. Fetal maturation was initiated. Laboratory tests showed a metabolic acidosis, a low pH, an increased Gap anion, elevated ketonemia and a blood glucose of 172 mg/dl. A diagnosis of normoglycemic diabetic ketoacidosis was formulated and treatment with hydration and regular insulin according to capillary blood glucose levels was started. An emergency caesarean section was performed. The newborn weighed 2.650 kg, had a length of 46 cm, was large for gestational age, had an Apgar score of 2.7, had perinatal asphyxia, convulsive syndrome and a possible congenital cardiopathy. Once the ketoacidosis was resolved during the immediate puerperium, slow acting insulin was initiated.

### SECCIÓN GASTROENTEROLOGÍA

**REV CHILENA INFECTOL. 2016 JUN;33(3):268-74.**

PARASITOSIS Y SÍNDROME DE INTESTINO IRRITABLE

Ibarra C, Herrera V, Pérez de Arce E, Gil LC, Madrid AM, Valenzuela L, Beltrán CJ4

Irritable bowel syndrome (IBS) is a functional disorder of the gastrointestinal tract characterised by multi-factorial aetiology. In IBS physiopathology are involved diverse factors between them biological, psychosocial, and environmental components which affect the immune activation status of gut mucosa. Among these factors is recognized the intestinal parasitosis. Post-infection IBS (PI-IBS) is recognised as a subgroup of functional disorders whose symptoms onset appear after a symptomatic intestinal infection caused by microbial agents. There are few studies regarding of relationship between IBS and intestinal parasitosis in Chile. However, is has been well described a positive association between IBS and Blastocystis hominis infections, one of prevalent parasites in Chile. In other countries, is also described a relationship between IBS and amebiasis and giardiasis. Both, characterized by a common mode of transmission through water as well as contaminated food. Because the high prevalence of parasitosis in our country it is necessary to expand the association studies to clarify the strength of the parasites ethiology in IBS.

## SECCIÓN ONCOLOGÍA

**REV. MÉD. CHIL. 2016 OCT;144(10):1305-18.**

RECOMENDACIONES SOBRE EL MANEJO DEL CÁNCER DE PÁNCREAS TIPO ADENOCARCINOMA EN LATINOAMÉRICA. REUNIÓN DEL CONSENSO DEL SIMPOSIO LATINOAMERICANO DE GASTROENTEROLOGÍA ONCOLÓGICA (SLAGO) Y DE LA ASOCIACIÓN IBERO LATINOAMERICANA DE TERAPIA RADIANTE (ALATRO)

Christian Caglevic, Jorge Gallardo, Marcela de la Torre, Mauricio Mahave, Bettina Müller, Sebastián Solé, Yuri Moscoso, Hernán De La fuente, Olga Barajas et al.

Pancreatic cancer is a malignancy of great impact in developed countries and is having an increasing impact in Latin America. Incidence and mortality rates are similar for this cancer. This is an important reason to offer to the patients the best treatments available. During the Latin American Symposium of Gastroenterology Oncology (SLAGO) held in Viña del Mar, Chile, in April 2015, a multidisciplinary group of specialists in the field met to discuss about this disease. The main conclusions of this meeting, where practitioners from most of Latin American countries participated, are listed in this consensus that seek to serve as a guide for better decision making for patients with pancreatic cancer in Latin America.

## CENTRO DE CONSULTAS Y PROCEDIMIENTOS

**REV MED CHIL. 2016 SEP;144(9):1134-1143.**

PERFIL SOCIODEMOGRÁFICO Y FACTORES ASOCIADOS A CONSULTAS POR ANTICONCEPCIÓN DE EMERGENCIA.

Lavanderos S, Riquelme C, Haase J, Morales A.

BACKGROUND: Emergency contraception refers to contraceptive methods that can be used after a sexual intercourse Aim: To analyze the evolution of emergency contraception (EC) consultations on the Chilean public health system, at a communal level, in relation to the legal changes that recently took place, aimed to ease the delivery of the benefit. To analyze its association with socioeconomic, demographic and municipal healthcare system characteristics. MATERIAL AND METHODS: We analyzed data bases of the Ministry of Health to study EC consultation rates on Chilean communes, including consultations on emergency departments and by rape, from 2008 to 2013. We evaluated the association with communal characteristics, obtained from the National Municipal Information System. RESULTS: Both the communal consultation rates and percentage of communes with consultations increased progressively during the period, with an explosive increase between 2009 and 2010. We observed a high dispersion in EC consultations both at a communal and regional level. There was an inverse significant association of the number of consultations with the communal poverty rate. CONCLUSIONS: Our results reveal the impact of legal modifications implemented in Chile since 2009 on the communal EC consultation rates. On other hand, our results reveal that although these modifications were oriented to favor the delivery of this benefit, a high dispersion subsists, associated with population's socioeconomic factors, mainly, the communal poverty level.

## DEPARTAMENTO CARDIOVASCULAR

**REV MED CHIL. 2016 JUL;144(7):937-41.**

FÍSTULA CORONARIA GIGANTE. PRESENTACIÓN CLÍNICA, CARACTERIZACIÓN ANGIOGRÁFICA, TRATAMIENTO Y SEGUIMIENTO A LARGO PLAZO. CASO CLÍNICO.

Ugalde H, Ugalde D, Dussailant G.

Coronary artery fistulae are abnormal connections between a coronary artery and any cardiac chamber or other vessels. Most of them have a congenital origin. We report a 60 years old woman referring a history of progressive dyspnea and orthopnea during the last year. A continuous heart murmur was audible in the third and fourth intercostal spaces at the left sternal border. Electrocardiogram was normal and echocardiography showed mild dilation of right cavities and an image suggesting a dilated right coronary artery with flow to right atrium. Coronary angiography was performed, showing a normal left coronary artery and a very large, tortuous right coronary artery with an extensive communication to coronary venous sinus. Surgical treatment was decided and was performed without incidents. The patient is well after five years of follow up.

**REV MED CHIL. 2016 JAN;144(1):39-46.**

**CARACTERÍSTICAS, MANEJO Y EVOLUCIÓN INTRAHOSPITALARIA DE USUARIOS DE DROGAS ILÍCITAS CON INFARTO AGUDO DEL MIOCARDIO**

Bartolucci J, Nazzari N C, Verdugo FJ, Prieto JC, Sepúlveda P, Corbalán R.

**BACKGROUND:** Consumption of illicit drugs (ID) has been associated with an increased risk of acute myocardial infarction (AMI). There is limited national evidence about the impact of substance use over the clinical presentation, management and outcomes of AMI patients. **AIM:** To describe the prevalence of ID consumption in patients within the Chilean Registry of Myocardial Infarction (GEMI), comparing clinical characteristics, management and outcome according to consumption status. **MATERIAL AND METHODS:** We reviewed data from the GEMI registry between 2001 and 2013, identifying 18,048 patients with AMI. The sample was stratified according to presence or absence of previous ID consumption, comparing different demographic and clinical variables between groups. **RESULTS:** Two hundred eighty five patients (1.6%) had history of ID consumption (cocaine in 66%, cannabis in 35% and central nervous system stimulants in 24.0%). Compared with non-users, ID consumers were younger, predominantly male and had a lower prevalence of cardiovascular risk factors, except for tobacco smoking (86.3% and 42.5% respectively,  $p < 0.01$ ). Among consumers, there was a higher percentage of ST segment elevation (85.2% and 67.8% respectively,  $p < 0.01$ ) and anterior wall AMI (59.9 and 49.5% respectively,  $p = 0.01$ ). Additionally, they had a higher rate of primary angioplasty (48.8% and 25.5% respectively,  $p < 0.01$ ). There was no difference in hospital mortality between groups when stratified by age. **CONCLUSIONS:** A low percentage of patients with AMI had a previous history of ID consumption in our national setting. These patients were younger and had a greater frequency of ST segment elevation AMI, which probably determined a more invasive management.

## **DEPARTAMENTO UROLOGÍA**

REV MED CHIL. 2016 JUN;144(6):710-5.

**IMPACTO DE LA PROFILAXIS SECUNDARIA EN EL MANEJO DE PACIENTES CON UROLITIASIS DE ALTO RIESGO DE RECIDIVA.**

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In a previous study, we showed our experience in a group of 54 patients with a high risk of urolithiasis recurrence, who were subjected to a complete metabolic evaluation. **AIM:** To report the evolution of these patients after 5 years of follow-up. **PATIENTS AND METHODS:** All patients underwent a general management of urolithiasis plus specific treatments for underlying metabolic disorders. Each patient had an annual medical assessment including a clinical examination, urinalysis and imaging studies (non-enhanced computed tomography scan, ultrasonography and plain abdominal Rx rays). In every case, the underlying metabolic disorder, treatment adherence, stones on imaging studies and symptomatology were evaluated. Adherence of general and specific measures were evaluated subjectively. Failure of secondary prevention was defined as the recurrence of clinical or imaging urolithiasis (increase of the number of lithiasis) despite a correct treatment of the metabolic disorders. **RESULTS:** Twenty nine patients completed the follow-up. Mean age was 45 years old. Nineteen patients (65%) had only one metabolic disorder, three patients (10%) two disorders, one patient (3%) four disorders, and six patients (21%) a normal metabolic study. The median of follow-up was 54 months (45-60). During that period, twenty-three patients (79%) kept the treatment as it was indicated. In this subgroup, 21 had no clinical or imaging recurrence of urolithiasis during follow-up (91%). Total adherence to treatment and follow-up was 42% (23/54) of the initial group of patients. **CONCLUSIONS:** A complete metabolic study allows to identify patients with a high risk of urolithiasis recurrence, enabling a specific treatment of the metabolic disorder. Our experience shows that 75% (21/29) of patients remain free of recurrence at five years of follow-up.

## **CENTRO IMAGENOLOGÍA**

**REV MED CHIL. 2016 FEB;144(2):202-10**

**DETECCIÓN PRECOZ DE CÁNCER PULMONAR CON TOMOGRAFÍA COMPUTARIZADA DE TÓRAX EN PACIENTES CON ENFERMEDAD PULMONAR OBSTRUCTIVA CRÓNICA TABÁQUICA**

Fernando Saldías P., Juan Carlos Díaz P., Carmen Rain M., Pamela Illanes C., Rodrigo Díaz T., Orlando Díaz P.

Background: Chest computed tomography (CT) scan may improve lung cancer detection at early stages in high risk populations. Aim: To assess the diagnostic performance of chest CT in early lung cancer detection in patients with chronic obstructive pulmonary disease (COPD). Patients and Methods: One hundred sixty one patients aged 50 to 80 years, active or former smokers of 15 or more pack-years and with COPD were enrolled. They underwent annual respiratory functional assessment and chest computed tomography for three years and were followed for five years. Results: Chest CT allowed the detection of lung cancer in nine patients (diagnostic yield: 5.6%). Three cases were detected in the initial CT and six cases in follow-up scans. Most patients were in early stages of the disease (6 stage Ia and 1 stage Ib). Two patients were diagnosed at advanced stages of the disease and died due to complications of cancer. Two thirds of patients had nonspecific pulmonary nodules on the initial chest CT scan (100 patients, 62%). Seventy four percent had less than three nodules and were of less than 5 mm of diameter in 57%. In 92% of cases, these were false positive findings. In the follow-up chest CT, lung nodules were detected in two thirds of patients and 94% of cases corresponded to false positive findings. Conclusions: Chest CT scans may detect lung cancer at earlier stages in COPD patients.

## **DEPARTAMENTO DE NEUROLOGÍA Y NEUROCIRUGÍA**

**REV. MÉD. CHILE 2016 VOL.144, N.4, PP.434-441.**

**TROMBOLISIS INTRAVENOSA EN ACCIDENTE CEREBRO VASCULAR ISQUÉMICO AGUDO EN UN HOSPITAL PÚBLICO DE CHILE: ANÁLISIS PROSPECTIVO DE 54 CASOS**

Carlos Guevara O., Kateryna Bulatovab, Felipe Aravenac, Sheila Caba, Juan Monsalve, Hugo Lara, Elena Nieto, Isabel Navarrete, Marcelo Morales.

Background: Intravenous thrombolysis with recombinant tissue plasminogen activator (rt-PA) reduces disability in patients with ischemic stroke. However, its implementation in Chilean public general hospitals has been slow and faces some difficulties. Aim: To analyze the results of an intravenous thrombolysis protocol implementation in a public general hospital. Material and Methods: During a lapse of 28 months a standardized protocol for intravenous thrombolysis implemented in the emergency room of a public hospital, was prospectively evaluated. Fifty four patients with ischemic stroke were treated and assessed three months later as outpatients. Results: At three months of follow-up, 66.4% of patients subjected to thrombolysis had a favorable evolution, defined as having 0 to 1 points in the modified Rankin scale. Intracerebral hemorrhage rate was 11.1%, including 5.5% of symptomatic intracerebral hemorrhage. Four percent of patients had systemic bleeding complications after thrombolysis. The mortality rate was 14.8%. Conclusions: The success rates, mortality, and complications rate were comparable to the results obtained in international studies, despite of the absence of a stroke unit to manage stroke and its complications.