Clinical significance of heterotopic gastric mucosal patch of the proximal esophagus.
Chong VH.

ABSTRACT
Heterotopic gastric mucosa of the proximal esophagus (HGMPE), also referred to as "inlet patch" or "cervical inlet patch", is a salmon colored patch that is usually located just distal to the upper esophageal sphincter. HGMPE is uncommon with endoscopic studies reporting a prevalence ranging from less than one percent to 18%. Most HGMPE are asymptomatic and are detected incidentally during endoscopy for evaluations of other gastrointestinal complaints. Most consider HGMPE as clinically irrelevant entity. The clinical significance of HGMPE is mainly acid related or neoplastic transformation. The reported prevalence of laryngopharyngeal reflux symptoms varies from less than 20% to as high as 73.1%. However, most of these symptoms are mild. Clinically significant acid related complications such as bleeding, ulcerations, structure and fistulization have been reported. Although rare, dysplastic changes and malignancies in association with HGMPE have also been reported. Associations with Barrett’s esophagus have also been reported but the findings so far have been conflicting. There are still many areas that are unknown or not well understood and these include the natural history of HGMPE, risk factors for complications, role of Helicobacter pylori infection and factors associated with malignant transformations. Follow-up may need to be considered for patients with complications of HGMPE and surveillance if biopsies show intestinal metaplasia or dysplastic changes. Despite the overall low incidence of clinically relevant manifestations reported in the literature, HGMPE is a clinically significant entity but further researches are required to better understand its clinical significance.

Prevalence of gastrointestinal and psychosomatic symptoms among Asian patients undergoing regular hemodialysis.
Chong VH, Tan J.

ABSTRACT
AIM: Gastrointestinal (GI) symptoms are reported to be common among patients with chronic disorders including end-stage renal disease (ESRD). This questionnaire study assessed the prevalence of GI symptoms among patients undergoing hemodialysis (HD) and to correlate with the presence of diabetes mellitus and psychosomatic symptoms in Asian patients with ESRD.

METHODS: A total of 123 patients (male 47.2%) participated in this study. GI symptoms (upper GI: anorexia, nausea, vomiting, odynophagia, dysphagia, early satiety, heartburn, dyspepsia and lower GI: abdominal bloating, non-epigastrium abdominal pain, bowel habit and bleeding per rectum) and psychosomatic symptoms (anxiety, backache, depression, headache and insomnia) in the previous 12 months were enquired and compared with age and gender matched controls (n = 197).

RESULTS: The mean age of patients was 51.8 ± 12.9 years with mean duration of HD of 28 ± 38.2 months. Overall, 70.7% of ESRD patients had experienced any GI symptoms; upper GI, 65% and lower GI, 34.1%, significantly more than controls (P < 0.05). ESRD patients had more anorexia, nausea, vomiting, dyspepsia, irregular bowel habit and
bleeding per rectum (all $P < 0.05$). Overlap of upper and lower GI symptoms was reported by 34.1%, significantly higher than control (14.2%, $P < 0.05$). ESRD patients also experienced significantly more anxiety, depressive symptoms and insomnia (all $P < 0.05$). Among the patients with ESRD, the presence of any psychosomatic symptoms correlated significantly with the presence of any upper or lower GI symptoms and overlapping of GI symptoms. Such correlations were not seen with diabetes mellitus.

**CONCLUSION:** Gastrointestinal and psychosomatic symptoms are common among our Asian patients with ESRD undergoing regular HD. The presence of underlying psychosomatic symptoms but not diabetes mellitus correlated significantly with the presence of GI symptoms.

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**A CT-based classification of prior ACL femoral tunnel location for planning revision ACL surgery.**


**ABSTRACT**

**PURPOSE:** The purposes of this study are to describe an ACL femoral tunnel classification system for use in planning revision ACL reconstruction based on 3-D computed tomography (CT) reconstructions and to evaluate its inter- and intra-rater reliability.

**METHODS:** A femoral tunnel classification system was developed based on the location of the femoral tunnel relative to the lateral intercondylar ridge. The femoral tunnel was classified as Type I if it was located entirely below and posterior to the ridge as viewed from distally, Type II if it was slightly malpositioned (either vertically, anteriorly, or both), and Type III if it was significantly malpositioned. To evaluate the reproducibility of the classification system, CT scans of 27 knees were obtained from patients scheduled for revision ACL reconstruction, and 3-D reconstructions were created. Four views of the 3-D reconstruction of each femur were then obtained, and inter- and intra-observer reliability was determined following classification of the tunnels by eight observers.

**RESULTS:** Twenty-five tunnels were classified as Type I (5 tunnels), Type II (9 tunnels), or type III (11 tunnels) by at least 5 of 8 observers, while insufficient agreement was noted to classify two tunnels. The interobserver reliability of tunnel classification as type I, II, or III yielded a $\kappa$ coefficient of 0.57, while intra-observer reliability yielded a $\kappa$ coefficient of 0.67. Subclassification of type II femoral tunnels into the subgroups anterior, vertical, and both was possible in four of the nine type II patients. The interobserver reliability of the complete classification system yielded a $\kappa$ coefficient of 0.50, while the intra-observer reliability yielded a $\kappa$ coefficient of 0.54.

**CONCLUSION:** Classification of the location of ACL femoral tunnels utilizing 3-D reconstructions of CT data yields moderate to substantial inter- and intra-observer reliability.

**LEVEL OF EVIDENCE:** Diagnostic Level III.

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**An investigation into UV light exposure as an experimental model for artificial aging on tensile strength and force delivery of elastomeric chain.**


**ABSTRACT**

This study investigated the effect of ultraviolet type A light (UVA) exposure on the tensile properties of elastomeric chain. UVA light exposure was used as model for artificial aging, simulating prolonged storage of elastomeric chain. Tensile strength ($n = 60$) was measured after exposing Ormco, Forestadent and 3M chains to UVA light for 0, 2, 3, and 4 weeks. Force decay was measured ($n=60$) using chain exposed for 5, 10, and 14 days. The chains were subsequently stretched at a constant distance and the resulting forces measured at 0, 1, 24 hours and 7, 14, 21, and 28 days. This test simulated a clinical scenario of pre-stretching and subsequent...
shortening of elastomeric chain. Tensile strength had statistically significant difference and was directly related to the duration of ultraviolet (UV) light exposure. Forestadent chain, which had the second highest value for the ‘as received’ product, showed the most consistent values over time with the lowest degradation. Ormco showed the lowest values for ‘as received’ as well as after UV exposure; 3M chain had the highest loss of tensile strength. Force decay was also significantly different. UV light exposure of 10 days or more appears to mark a ‘watershed’ between products: 3M had most survivors, Forestadent chain had some survivors, depending on the time the chain was stretched for. None of the Ormco product survived UV light exposure for more than 5 days. UVA light exposure may be used as a model for artificial aging as it reduces force delivery and tensile strength of exposed chains.

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Peripheral markers of alzheimer’s disease: Surveillance of white blood cells.

No abstract available

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Dental workforce development as part of the oral health agenda for Brunei Darussalam.

ABSTRACT
BACKGROUND: Brunei Darussalam is a Sultanate with a Malay Islamic monarchy. There are high levels of dental disease among its 406,200 population. The population’s oral health needs require an integrated blend of primary and specialist care, together with oral health promotion.

PROCESS AND OUTCOMES: This paper describes the planning and measures taken to address these needs. In accordance with an oral health agenda published and launched in 2008, focusing on access, health promotion and prevention, and the education and training of the dental workforce, the Brunei Darussalam Ministry of Health is seeking to improve oral health status and reduce the burden of oral disease. It also seeks to transform the country’s oral health services into a preventatively orientated, high-quality, seamless service underpinned by the concept of ‘teeth for life’. In the process of effecting this transition, the Brunei Darussalam Ministry of Health is developing a dental workforce fit for future purpose, with an emphasis on a modern approach to skill mix. An important element of this programme has been the development of a highly successful Brunei Darussalam Diploma in Dental Therapy and Dental Hygiene.

CONCLUSION: It is concluded that the Brunei Darussalam oral health agenda and, in particular, the forward-looking programme of dental workforce development is a model for other countries facing similar oral health challenges.

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BOOK CHAPTER
The ACL-Deficient Knee
Editors: Vincente Sanchis-Alfonso and Jaon Carles Monliau

Chapter 13. Indications for Ancillary Surgery in the ACL-Deficient Knee
Biju Benjamin M.D., Robert A. Magnussen M.D., Philippe Neyret M.D.
ABSTRACT

Modern ACL reconstruction frequently provides a stable knee and allows a majority of athletes to return to sport. However, the incidences of failed surgery and progression of degenerative disease remain unacceptably high. Ancillary procedures including lateral extra-articular reconstruction, valgus-producing HTO, tibial deflexion osteotomy, and procedures related to meniscal preservation and restoration may provide routes for improving results. These procedures augment ACL reconstruction by decreasing stress on the intra-articular graft, improving stability by decreasing anterior tibial translation and/or the pivot shift, and decreasing stress on the articular cartilage by altering load transmission and/or decreasing shear stress due to abnormal joint kinematics. Further work, including development of new techniques and well-designed prospective studies evaluating results, is necessary to improve and verify the utility of these procedures.

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