



Emergency Medicine Snippets from SWEETS18 - #1

1. *Borrelia burgdorferi* strains in Europe are different from those in the USA and cause a different clinical picture to classical American Lyme Disease.

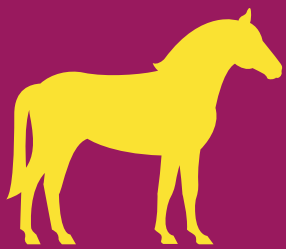
Neuroborrelia is a much more common presentation in Scandinavia (cf arthropathy in USA).

The Åland Islands (between Sweden & Finland) is a hot bed of *Borrelia*.

Patents sometimes present just with baffling severe pain

Tick Borne Encephalitis (TBE) is found in most European countries

2. If you need to calculate the QTc in drug overdose, there's a nomogram on TOXBASE if it's relevant to the particular drug you are looking at!



3. Many horse-related injuries occur on the ground, whilst leading/handling these large and powerful animals.

"Frangible Pins" are fitted to some of the scary, solid fences in the cross-country phase of Eventing to reduce the risk of rotational falls (where the horse somersaults onto the fallen rider)

4. Serotonin syndrome and Neuroleptic malignant syndrome are always next to each other in the textbooks, but they aren't the same.

Serotonin Syndrome comes on within hours of starting/increasing serotonergic meds, is characterised by hyper-reflexion and clonus, and is diagnosed by Hunter's Criteria (Sens 84%, Spec 97%)

NMS has a slower onset (1-3 days), starts with confusion, and has rigidity but NOT clonus.

