EM MYTH BUSTING

I FIND YOUR LACK OF EBM

DISTURBING
NNT = 1
It all depends
Be a skeptic
ED MYTH #1

KETOROLAC

JUDGE ME BY MY SIZE, DO YOU?
Comparison of Intravenous Ketorolac at Three Single-Dose Regimens for Treating Acute Pain in the Emergency Department: A Randomized Controlled Trial
KEY RESULTS AND LIMITATIONS

NO DIFFERENCE
KETOROLAC DOSING

USE 10MG IV KETOROLAC WHEN TREATING MODERATE TO SEVERE PAIN IN THE EMERGENCY DEPARTMENT.

SGEM#175: DANCING ON THE CEILING
ED MYTH #2

MESA THINKS GLUCAGON WORKS

FOR ESOPHAGEAL FOREIGN BODIES

Effectiveness of glucagon in relieving esophageal foreign body impaction: a multicenter study

P - Patient
I - Intervention
C - Comparison
O - Outcome
KEY RESULTS AND LIMITATIONS

NO DIFFERENCE
Glucagon for esophageal FB

Glucagon has a low success rate for EFBI, does not seem to offer much benefit over observation alone and is associated with adverse events like vomiting.

SGEM#169: Stuck in the middle with food
ED MYTH #3

INTRACEREBRAL HEMORRHAGE?

TARGET SBP < 140 mmHg
Intensive Blood-Pressure Lowering in Patients with Acute Cerebral Hemorrhage

Qureshi et al NEJM 2016
KEY RESULTS AND LIMITATIONS

NO DIFFERENCE
SBP TARGET IN ACUTE ICH

INTENSIVE BLOOD PRESSURE REDUCTION DOES NOT PROVIDE BENEFIT OVER STANDARD BLOOD PRESSURE REDUCTION IN PATIENTS WITH ACUTE ICH.

SGEM#172: DON'T BRING MY BP DOWN (INTENSELY)
ED MYTH #4

PEDIATRIC GASTROENTERITIS

I HAVE TO DRINK WHAT?
Original Investigation

Effect of Dilute Apple Juice and Preferred Fluids vs Electrolyte Maintenance Solution on Treatment Failure Among Children With Mild Gastroenteritis
A Randomized Clinical Trial

FREEDMAN ET AL JAMA 2016
KEY RESULTS AND LIMITATIONS

1/2 AJ/PREFERRED FLUIDS SUPERIOR
1/2 STRENGTH APPLE JUICE OR PREFERRED FLUIDS

Offering half-strength apple juice and preferred fluids compared to electrolyte solutions is a better choice.

SGEM#158: TEMPTED BY THE FRUIT OF ANOTHER
ED MYTH #5

CHEST TUBE PLACEMENT

DO OR DO NOT, THERE IS NO TRY
Does chest tube location matter? An analysis of chest tube position and the need for secondary interventions

Matthew V. Benns, MD, Michael E. Egger, MD, Brian G. Harbrecht, MD, Glen A. Franklin, MD, Jason W. Smith, MD, PhD, Keith R. Miller, MD, Nicholas A. Nash, MD, and J. David Richardson, MD, Louisville, Kentucky
KEY RESULTS AND LIMITATIONS

LOCATION DID NOT MATTER

TRIANGLE OF SAFETY
CHEST TUBE PLACEMENT

PUT IT IN THE CORRECT SIDE, IN THE TRIANGLE OF SAFETY AND IN THE PLEURAL SPACE.

SGEM#129: THAT CHEST TUBE...SHE'S A BEAUTY
EM MYTH #6

OBSERVATIONAL STUDY PROVES VITAMIN C CAN CURE SEPSIS

NOOOOOOOOOO
Hydrocortisone, Vitamin C and Thiamine for the Treatment of Severe Sepsis and Septic Shock: A Retrospective Before-After Study

Paul E. Marik, MD, FCCM, FCCP, Vikramjit Khangoora, MD, Racquel Rivera, Pharm D, Michael H. Hooper, M.D., MSc, John Catravas, PhD, FAHA, FCCP
KEY RESULTS AND LIMITATIONS

32% ABSOLUTE DIFFERENCE

NNT 3
VITAMIN C PROTOCOL FOR SEPSIS

VIT C PROTOCOL WAS ASSOCIATED WITH LOWER MORTALITY IN SEVERE SEPTIC AND SEPTIC SHOCK PATIENTS IN THIS ONE SMALL, SINGLE CENTER RETROSPECTIVE STUDY BUT CAUSATION HAS YET TO BE DEMONSTRATED.

SGEM#174: DON'T BELIEVE THE HYPE
ZDOGGMD: DOC VADER
1. KETOROLAC - USE 10MG IV
2. GLUCAGON FB - NOT WORK
3. ICH TARGET SBP - <180MMHG
4. PED GASTRO - 1/2 APPLE JUICE
5. CHEST TUBES - LOCATION
6. VIT C - DON'T BELIEVE THE HYPE