in the press bombard us into believing that scars mean a life in the shadows. Cosmetic surgery is ruthlessly marketed as the passport to happiness. Media stories speculate that new medical magic remedies of face transplantation and scarless wound healing are just round the corner.

Changing Faces aims to challenge society to deal with disfigurement in a modern way, celebrating people's different faces and not marginalising those whose looks are unusual or fail to match today's unreal appearance norms. The charity is about empowerment and justice today and supports research for better treatments tomorrow.

We are reminded daily of the challenges: in South Africa 4000 people are killed every year in fires, and thousands of children and adults are injured and are

likely, if they survive, to disappear into the shadows never having access to the "shock reducing" surgery I had, let alone the empowerment that has been made possible in Britain.

A wise old Indian once said to me back in 1973: "you have far to go and much to learn." He was so right, but I had no idea just how far or how much.

The author thanks Nichola Rumsey (professor of appearance and health psychology at the Centre for Appearance Research, School of Psychology, University of the West of England, Bristol), Suzanne Millstone (head of client services at Changing Faces), and Peter Lapsley (chief executive of the Skin Care Campaign) for their support in the writing of this article. The cartoon is reproduced with kind permission of Private Eye/Nick Newman.

Competing interests: JP is chief executive of Changing Faces.

Interactive case report

70 year old man with scrotal swelling, abdominal aortic aneurysm, and renal lesions: case progression

Saroj Kumar Das, Devdatta Sarwate, J K Mordani, K J Ng, Mark Nel

Last week (15 April, *BMJ* 2006;332:899), we presented the case of Mr Mahon, who presented with scrotal swelling. He had had ultrasonography that showed an abdominal aortic aneurysm and renal lesions. Computed tomography showed a renal tumour and an abdominal aortic aneurysm. As there was no tumour extension into the left renal vein or evidence of obstruction to the gonadal vein, the varicocele was probably coincidental. The cost effectiveness of routine ultrasonography in investigating varicoceles is controversial. However, in this case it provided important information. Mr Mahon's aneurysm probably would not have been detected without it.

Mr Mahon then had further investigation to assess fitness and plan for surgery. The results of a full blood count, coagulation screen, liver function tests, renal function tests (urea 7.3 mmol/l, creatinine 101 µmol/l), and electrolyte measurements were all within normal limits. Thyroid function tests showed a subclinical hypothyroid state (raised thyroid stimulating hormone and low free thyroxine concentrations). He tested negative for methicillin resistant *Staphylococcus aureus*. Spirometry showed that he had moderate obstructive disease with an forced expiratory volume in one second of 1.69 litres and a forced vital capacity of 2.69 litres. Electrocardiography showed evidence of previous inferior infarction. Echocardiography identified a slightly dilated left ventricle with reasonable systolic function.

This is the second of a three part case report where we invite readers to take part in considering the diagnosis and management of a real patient using the rapid response feature on bmj.com. In three weeks' time we will report the outcome and summarise the responses

Questions

- 1 What is the best line of management for Mr Mahon and why?
- 2 What alternative treatments are available?
- 3 What are the risks and benefits of treatment that need to be discussed with Mr Mahon?

Please respond through bmj.com, remembering that Mr Mahon is a real patient and that he and his carers will read your response

Hillingdon Hospital, Uxbridge, Middlesex UB8 3NN

Saroj Kumar Das
consultant vascular surgeon

Devdatta Sarwate
senior house officer

J K Mordani
consultant radiologist

K J Ng
consultant urologist

Mark Nel
consultant anaesthetist

Correspondence to:
S K Das saroj.das@imperial.ac.uk

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A mercaptoacetylglycine (MAG3) renogram taken to assess differential renal function showed satisfactory perfusion of the kidneys; the left kidney had 59% of overall function compared with 41% in the right kidney (fig 1).

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Mr Mahon's renogram showing a peak excretion time of 2.8 min on left and 4.5 min on right