Reference

1. Sugarman ID, Adam I, Bunker TD. Radiation dosage during AO locking femoral nailing. *Injury* 1988; **19**: 336–8.

Infacol to reduce the bubble effect at endoscopic ultrasonography

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Endoscopic ultrasonography is frequently used in the clinical setting. In order for the ultrasound to be as effective as possible, a good interface between the structure wall and the probe is required. If bubbles are present, they will produce artefact and decrease sensitivity. Yiengpruksawan *et al.*¹ have described the use of simethicone to reduce the bubble effect. We have found that the infant colic remedy Infacol® provides an efficient and user-friendly method of dispensing simethicone. One dropper (0.5 ml equal to 20 mg) of Infacol is mixed with 50 ml of water and squirted down the endoscope to great effect.

Reference

1. Yiengpruksawan A, Lightdale CJ, Gerdes H, Botet JF. Mucolytic-antifoam solution for reduction of artefacts during endoscopic ultrasonography: a randomized controlled trial. *Gastrointest Endosc* 1991; **37**: 543–6.

Figure 1 Infacol® is readily available.

The efficacy of paracetamol is reduced by centrally acting anti-emetics

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The analgesic effect of acetaminophen (paracetamol) in humans is linked to the serotonergic system,¹ which is inhibited by centrally acting anti-emetics like granisetron, tropisetron, *etc.* Paracetamol is routinely prescribed as an analgesic for postoperative patients due to its safety and minimal drug interactions. Along with paracetamol, morphine derivatives such as 5-acetyl morphine (codeine) are also often used, which may cause sickness. To counteract this sickness, non-centrally acting anti-emetics should be used, as they do not interfere with action of paracetamol. Enteral paracetamol has limited analgesic activity due to its delayed absorption and subtherapeutic plasma concentration; therefore, intravenous paracetamol should be preferred as it reduces requirement of morphine derivatives.

Reference

1. Pickering G, Lorient MA, Libert F, Eschalier A, Beaune P, Dubray C. Analgesic effect of acetaminophen in humans: first evidence of a central serotonergic mechanism. *Clin Pharmacol Ther* 2006; **79**: 371–8.