

ATRIAL FIBRILLATION AND CARDIOVERSION

To the Editor:

We appreciate Dr. Rosenheck's [1] editorial which succinctly summarized the emergency department treatment of acute atrial fibrillation; indeed, this procedure has been used commonly in emergency departments in Israel. However, I wish to question his recommendation that patients be cardioverted only after 6 hours of fasting.

It is generally thought that in view of the agents we use for sedation in the emergency department this recommendation is unnecessary. When we used ketamine for cardioversions in the past, we did see vomiting but this was always after the patients woke up, and we rarely saw it in adults. This is borne out by an interesting study from Australia where longer preprocedural fasting times resulted in more vomiting, although admittedly the *P* values were borderline [2]. Today, propofol is increasingly being employed for this purpose, and numerous studies have lauded its antiemetic effect, which has led to it being used occasionally in post-surgical patients to prevent vomiting [3].

It should be pointed out that the American College of Emergency Physicians' official guidelines for sedation do not recommend preprocedural fasting and postulate that the need for fasting before general anesthesia is related to airway manipulation [4]. Most emergency physicians who do sedations have not seen vomiting during the procedures, as documented in the literature. I think we can safely offer our patients cardioversion without the need to wait, provided all the other criteria have been accounted for.

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IVERMECTIN FOR SCABIES AND HEAD LICE: VETERINARY USE ONLY

To the Editor:

In Israel, ivermectin, related to the macrolide antibiotics, is still permitted for veterinary use only; a pity.

Ivermectin was the first orally administered effective scabicide in human medicine. Its introduction is not recent [1]. It is efficacious and relatively free of severe and unwanted side effects [2]. In Israel, as everywhere, *Sarcoptes scabiei* skin infestation is a very frequent cause of distressing itch, especially in geriatric practice.

Permethrin, the most effective of the licensed anti-scabidical ointments, works well, although, as with all effective medications, unwanted reactions do occur. However, the dermal application of permethrin involves a ritual. This comprises whole-body anointing of infected infants. In adults, the behind-ears-neck-down anointing, the shower, the laundering of clothes and bed linen, and again the anointing, are far more nurse labor-intensive than swallowing the one ivermectin tablet, which usually suffices for scabies eradication. Sometimes this needs repeating after two weeks.

Regarding head lice, a stigmatizing plague in children irrespective of the family's economic circumstances, a recent report of the efficacy of 0.5% ivermectin lotion in a single application is encouraging [3]. Here too, it obviates the ritual of shampooing the hair, rinsing, applying conditioner, combing with a special fine comb, constantly inspecting the latter for lice after every stroke, and if successful, rinsing out the conditioner. This ritual takes one hour [4].

The regulations that prohibit human use of ivermectin need revision.

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MEDICINE IN GHETTO LODZ

To the Editor:

I have just read the paper by Weisz and Albury on the Lodz Chronicles [1] and would like to thank them. These are important documents, which reveal the highs and the lows of mankind. As both a psychiatrist and the editor of the *Israel Journal of Psychiatry* I was intrigued by the suicide data. The standards of sanitation, the attempts at treatment and even research leave the reader in a state of humble wonderment.

IMAJ recently published a paper by Dr. Weisz on the Warsaw Ghetto medical school and I see their publication in English and available online as a public service. I recently visited Berlin where the awareness of the Nazi period and its atrocities is very high, making the visit even more complex than anticipated.

I have sent a copy of this article to my children, whether they have medical knowledge or not. I convey my appreciation to the authors and *IMAJ* for publishing this paper.

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