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The digital archive & reference linking platform
of Korean medical journals

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Department of Library and Information Science
Sookmyung Women's University

Agenda

- What is KoreaMed Synapse?
- Synapse demo
- Why and What for?
- Concluding Remarks

What is KoreaMed Synapse?

Introduction

- Provided by the KAMJE
- Began the service in November 2007
- The digital archive and reference linking platform of Korean medical journals
- Integrated with KoreaMed & KoMCI

The open access digital archive

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- Full-text searching
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The reference linking platform

- Seamless access
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from foreign journals

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- Linkout from KoMCI to Synapse
- Reference-linking from Synapse to KoreaMed
- Reference-linking from Synapse to KoMCI

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Abstract

Aspergillosis is a rare cause of spondylitis. Moreover, early diagnosis by MR imaging and adequate treatment can prevent the serious complications of fungal infection. To our knowledge, the MR findings of multilevel aspergillus spondylitis in the cervico-thoraco-lumbar spine have not been previously described. Here, we report the MR findings of aspergillus spondylitis involving the cervical, thoracic, and lumbar spine in a liver transplant recipient.

Keywords: Aspergillosis, Spine, infection, Magnetic resonance (MR).

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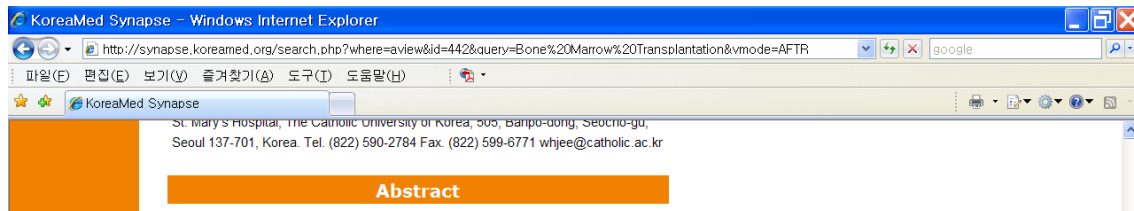
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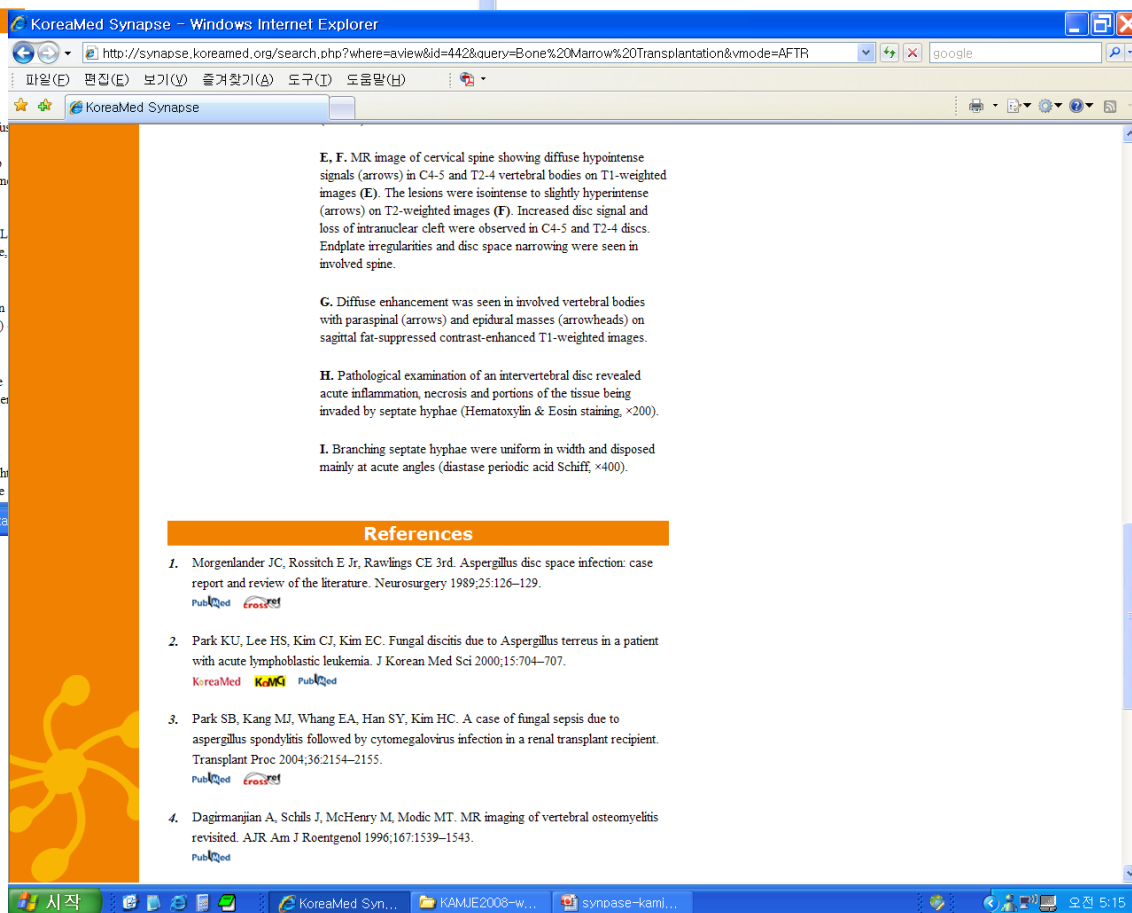
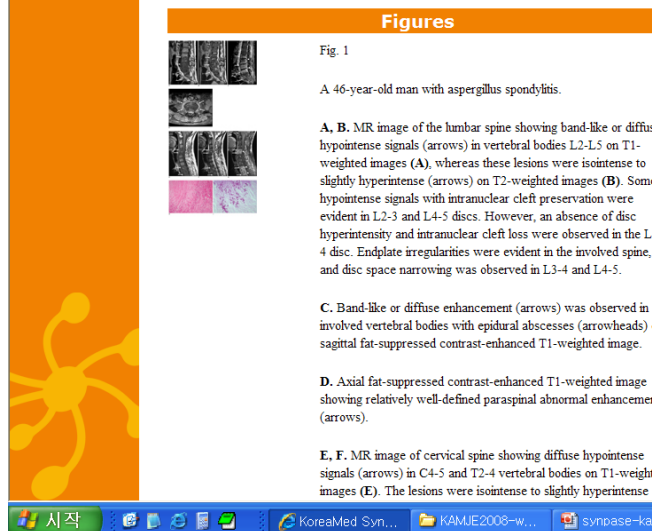
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thoracic spine showed changes in bone marrow and endplates at the C4-5 and T2-4 levels, the latter of which were similar to the previous findings of lumbar involvement (Figs. 1E-G). Increased disc signal and loss of intranuclear cleft were observed in C4-5 and T2-4 discs. Endplate irregularities and disc space narrowing were observed in the involved spine. During surgery on the cervical spine, infected granulation tissue and disc material were found at the C4-5 level with osteolysis at the inferior endplate of C4 and the superior end plate of C5. Debridement and bone grafting were performed, and pathologic reports disclosed acute inflammation with necrosis and osteomyelitis. Histopathological periodic acid-Schiff and Gomori methenamine silver staining findings revealed aspergillus infection (Figs. 1H, I).

DISCUSSION

Invasive aspergillosis is a life threatening fungal infection that is associated with a high mortality rate despite treatment. Symptoms and signs are nonspecific. In previous reports times between symptom onset and a definite diagnosis were of the order of months (⁴⁻⁷), and in our patient, symptoms persisted for more than two months before pathologic diagnosis. Ordinary laboratory findings are of little help in the diagnosis of aspergillosis (⁶).

According to a previous report by Williams et al. (⁸), the absence of disc hyperintensity and intranuclear cleft preservation on T2-weighted images are suggestive of nonpyogenic spondylitis. In our case, decreased disc signal intensity was observed in three of six affected discs and intranuclear clefts were preserved in two of six affected discs. The minimal hyperintensity or isointensity of vertebrae on T2-weighted images observed in our case is consistent with the findings of previous reports (^{8, 9}) on Candida or Aspergillus spondylitis.

Aspergillus spondylitis is often confused with tuberculous spondylitis

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Index terms :
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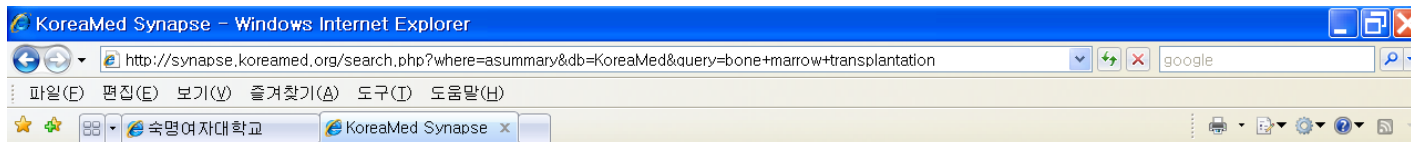
to the best of our knowledge multilevel involvement of cervico-thoraco-lumbar spine has not been previously reported. Here, we report the MR imaging findings of aspergillus spondylitis involving the cervico-thoraco-lumbar spine in a liver transplant recipient.

CASE REPORT

A 46-year-old man underwent liver transplantation due to hepatitis B virus cirrhosis in March 2005, and subsequently was treated using routine immunosuppression therapy. However, his early postoperative course was complicated by pulmonary aspergillosis. About 10 weeks after liver transplantation a left lower lobe wedge resection and pathology showed aspergilloma, and about three weeks after this thoracic surgery the patient complained of back pain. MR imaging of the spine demonstrated no abnormality, and although histopathologically, the patient complained of progressive back pain.

MR imaging of the lumbar spine revealed band-like or diffuse hypointense signals in vertebral bodies L2 to L5 on T1-weighted images (Fig. 1A), which were isointense to slightly hyperintense on T2-weighted images (Fig. 1B). In detail, T1-weighted images showed some hypointense signals with preservation of intranuclear clefts in the L2-3 and L4-5 discs, but disc hyperintensity was absent and intranuclear cleft loss was visualized in the L3-4 disc. In addition, endplate irregularities were apparent in the involved spine. Disc space narrowing was observed at L3-4 and L4-5, and band-like or diffuse enhancement was observed in involved vertebral bodies with an epidural abscess (Fig. 1C). A paraspinal abnormal signal was relatively well-defined (Fig. 1D). The MR based diagnosis was of tuberculous spondylitis rather than pyogenic spondylitis. At surgery, infected granulation tissue and disc material with pus were found at the

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 Departments of Radiology, Kangnam St. Mary's Hospital, The Catholic University of Korea, Seoul 137-701, Korea
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Aspergillosis is a rare cause of spondylitis. Moreover, early diagnosis by MR imaging and adequate treatment can prevent the serious complications of fungal infection. To our knowledge, the MR findings of multilevel aspergillus spondylitis in the cervico-thoraco-lumbar spine have not been previously described. Here, we report the MR findings of aspergillus spondylitis involving the cervical, thoracic, and lumbar spine in a liver transplant recipient.

Keywords : Aspergillosis, Spine, infection, Magnetic resonance (MR)

print



A Case of Optic Neuritis in Acute Sphenoid Sinusitis

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Case summary

A 12-year-old boy with swollen optic disc was diagnosed with optic neuritis on sphenoid sinusitis, through orbit MRI (magnetic resonance imaging) and paranasal sinus CT (computed tomography). We observed the recovery of visual acuity after treatment. In the initial examination, the BCVA of the right eye was 1.0 and the left eye was 1.0. Papilledema was detected by ophthalmoscopy. Orbit MRI and paranasal sinus CT were then performed, which revealed that sphenoid sinusitis had invaded the right optic nerve. Treatment included the use of antibiotics, systemic steroid therapy, and endoscopic sinus surgery. One month after treatment, the BCVA of the right eye was 1.0 and the left eye had a normal ophthalmoscopic finding.

Conclusions

Sphenoid sinusitis can be a cause of optic neuritis. The treatment of optic neuritis caused by paranasal sinusitis must include antibiotics use or endoscopic sinus surgery to remove the sinus inflammation as well as high dose steroid therapy.

Keywords: Endoscopic sinus surgery, Optic neuritis, Sphenoid sinusitis.

Figures



Figure 1

Optic disc on ophthalmoscopy. (A) Swollen optic disc before treatment. (B) Clear optic disc margin after endoscopic sinus surgery.

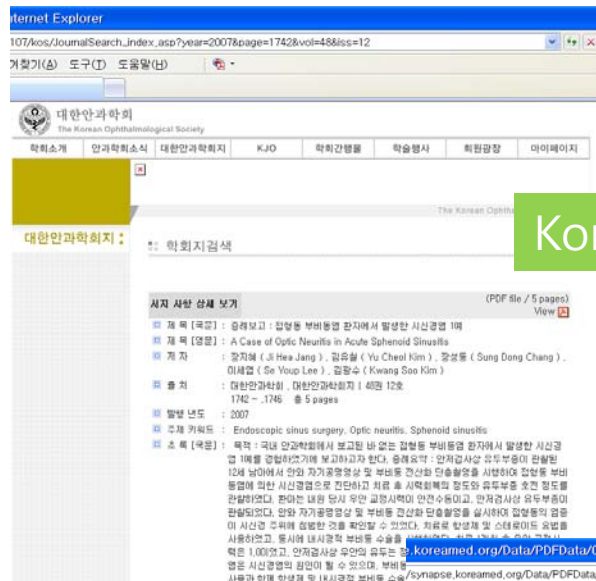


Figure 2

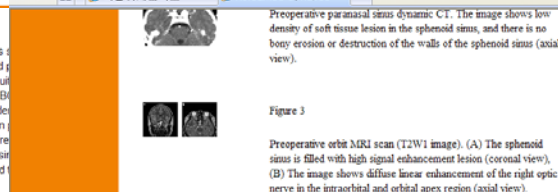
Preoperative paranasal sinus dynamic CT. The image shows low density of soft tissue lesion in the sphenoid sinus, and there is no bony erosion or destruction of the walls of the sphenoid sinus.



Figure 3



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접합동 부비동염 환자에서 발생한 시신경염 1예

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계명대학교 의과대학 안과학교실

목적 : 국내 안과학회에서 보고된 바 없는 접합동 부비동염 환자에서 발생한 시신경염 1예를 경험하였기에 보고하고자 한다.

증례요약 : 안저검사상 유두부종이 관찰된 12세 남아에서 안와 자기공명영상 및 부비동 전산화 단층촬영을 시행하여 접합동 부비동염에 의한 시신경염으로 진단하고 치료 후 시력회복의 정도와 유두부종 호전 정도를 관찰하였다. 환아는 내원 당시 우안 교정시력이 안전수준이고, 안저검사상 유두부종이 관찰되었다. 안와 자기공명영상 및 부비동 전산화 단층촬영을 실시하여 접합동의 염증이 시신경 주위에 침범한 것을 확인할 수 있었다. 치료로 항생제 및 스테로이드 요법을 사용하였고, 동시에 내시경적 부비동 수술을 시행하였다. 치료 1개월 후 우안 교정시력은 1.0이었고, 안저검사상 우안의 유두는 정상 소견을 보였다.

결론 : 접합동 부비동염은 시신경염의 원인이 될 수 있으며, 부비동염에 의한 시신경염 치료는 스테로이드 사용과 함께 항생제 및 내시경적 부비동 수술로 부비동의 염증을 제거해 주는 것이 효과적인 것으로 사료된다.

(한안지 48(12): 1742-1746, 2007)

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Multiple Aneurysms on the Same Bifurcation Site of the Middle

×400). A cord-like cellular arrangement of pleomorphic chondroblasts (arrows) with thin anastomosing strands is shown surrounded by myxoid stroma (asterisks).

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 comprehensive larger study to evaluate the clinicopathologic cases of chondrosarcoma of the head and neck from patients

1970 and 1997, were retrieved from the Otorhinolaryngic-Head and Neck Pathology, No secondary sarcomas (radiation-induced or otherwise) were found. The 4 patients with the most

syndrome or Ulcer disease) were included. Clinical, radiographic patient follow-up obtained. RESULTS: The patients included 6 cases. Patient symptoms (nasal stuffiness or discharge, sinus

tumor location and were present for an average of 7.2 months. The tumors most frequently involved the maxillary sinus (n=8).

(n=2), and neck (n=2), with 1 each of the nasopharynx, orbit from 2.0 to 15.0 cm (mean, 3.1 cm). All tumors were invasive histologically. The tumors were Grade 1 (n=6), Grade 2 (n=4), and

histology. The tumors were Grade 1 (n=9), Grade 2 (n=1), or n=2). All patients were treated by surgery, followed by radiation therapy. The median follow-up time was 14 months (range, 1-24 months). The median survival time was 14 months (range, 1-24 months).

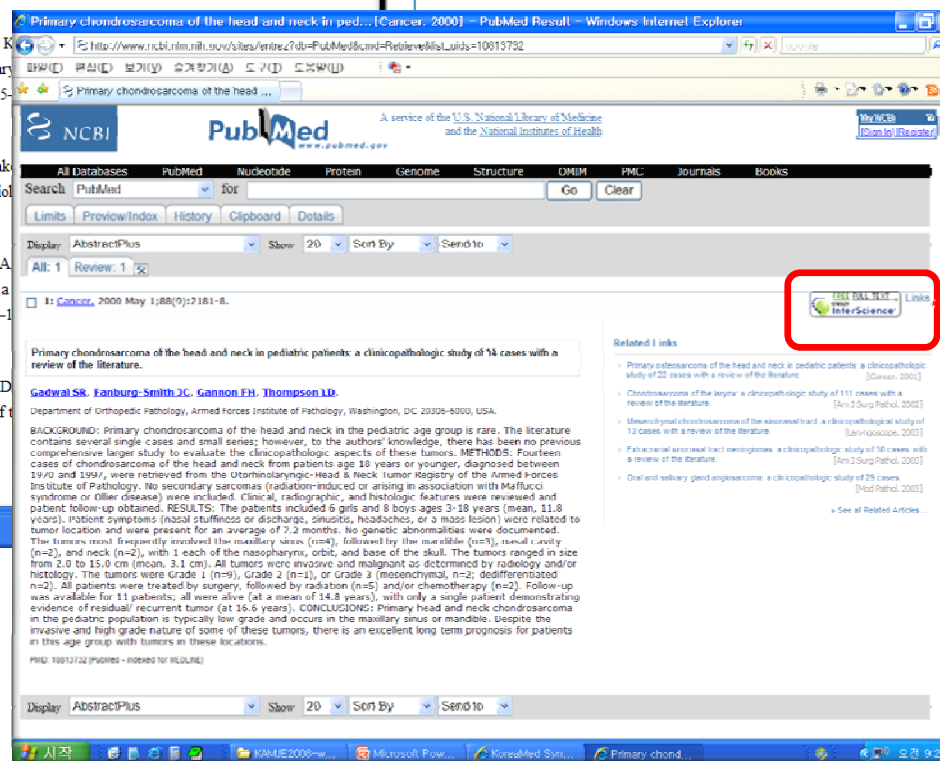
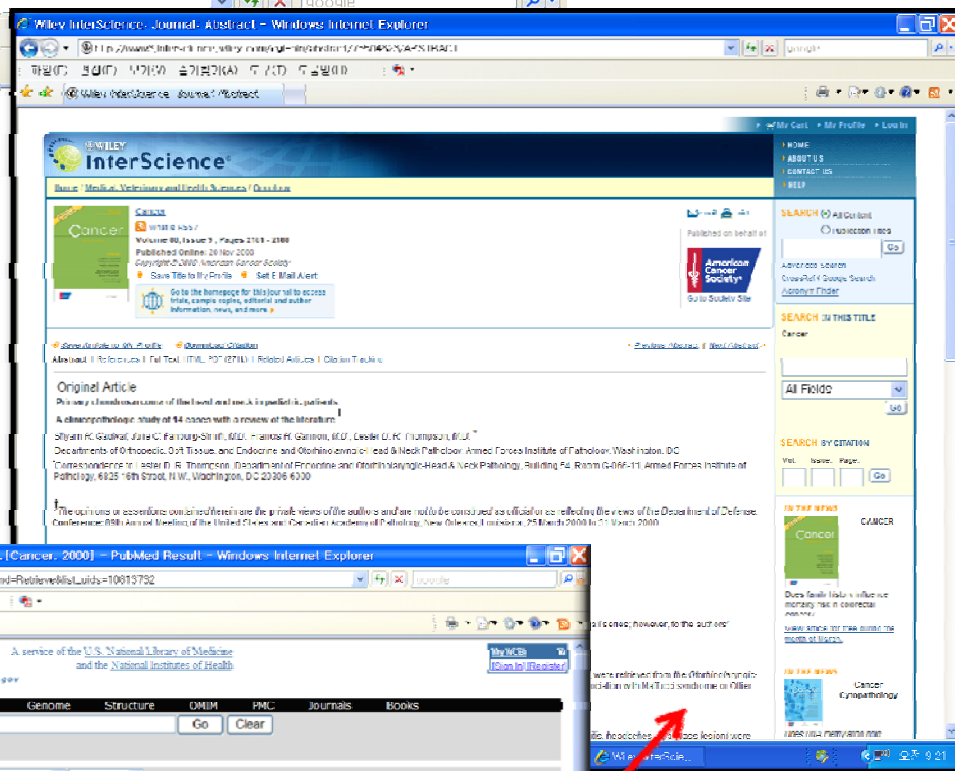
evidence of residual/ recurrent tumor (at 16.6 years). CONCLUSION: In the pediatric population is typically low grade and occurs in

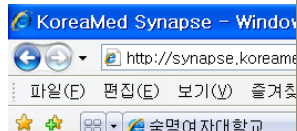
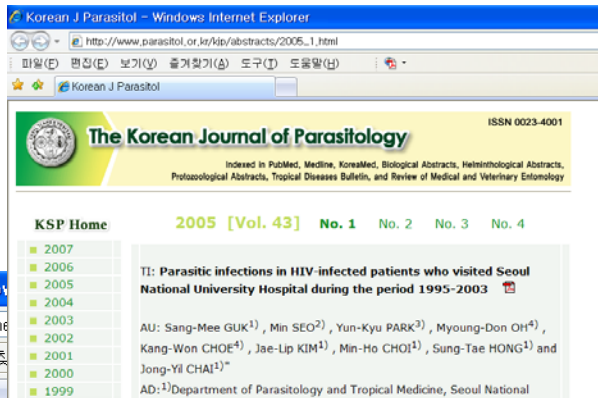
invasive and high grade nature of some of these tumors, there is a need for further study in this age group with tumors in these locations.

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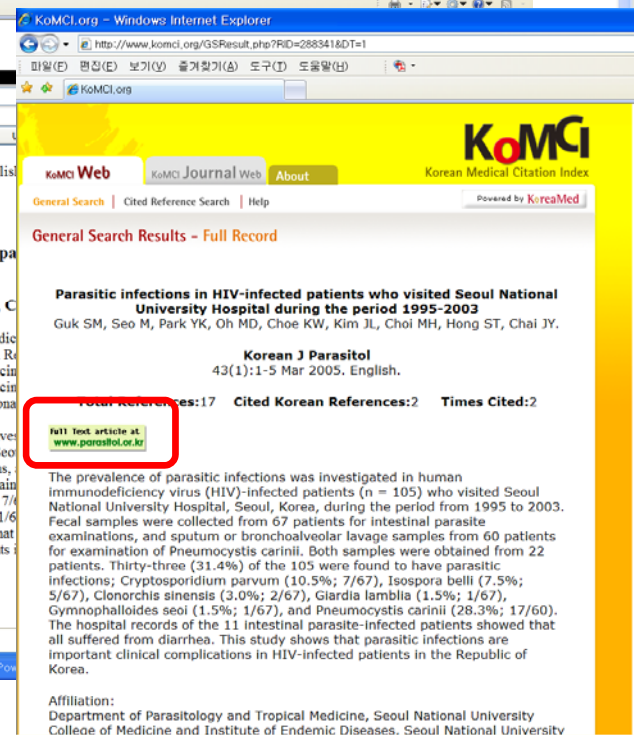
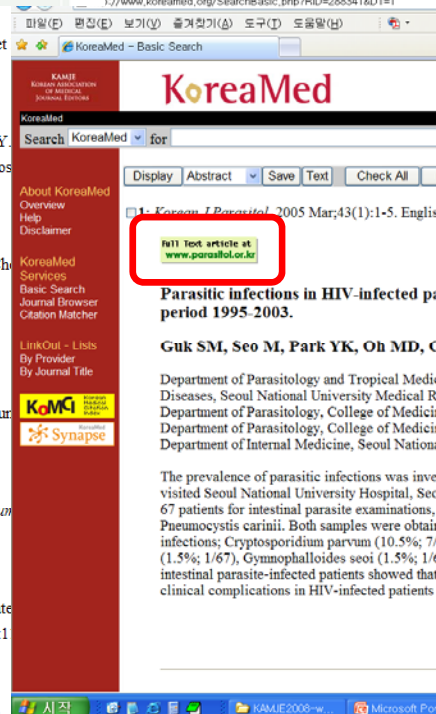
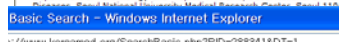
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Abstract: Blood-feeding hookworms are parasitic nematodes of major human health importance. Currently, it is estimated that 740 million people are infected with hookworms, and more than 80 million of them are severely affected clinically by hookworm disease. In spite of the health problems caused and the advances toward the development of vaccines against some hookworms, limited attention has been paid to the need for improved, practical methods of diagnosis. Accurate diagnosis and genetic characterization of hookworms is central to their effective control. While traditional diagnostic methods have considerable limitations, there has been some progress toward the development of molecular-diagnostic tools. The present article provides a brief background on hookworm disease of

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Validity of MAST-CLA for diagnosis of arthropod allergy using receiver operating characteristic (ROC) analysis

Joon-Soo Park¹, Hae-Seon Nam², Yong-Bae Kim³, Young-Jin Cho⁴, Sang-Han Lee⁵,
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Park JS, Nam HS, Kim YB, Choi YJ, Lee SH, Kim SH.

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Many allergists are currently focusing on the development of new diagnostic tools, to improve both the sensitivity and specificity. A multiple allergen simultaneous test assay (MAST-CLA) is one of the most popular diagnostic tools used in the Republic. There remains controversy among allergists with regard to the cut-off point for a positive result. The present study was conducted in order to determine the validity of MAST-CLA as compared with that of the skin prick test, with particular emphasis on arthropod allergens, on the basis of percentage agreement rates and k-values, and also to suggest the optimal positive cutoff points using receiver operating characteristic (ROC) curves. The study was conducted with 97 subjects (54 men, 43 women). Optimal individual cut-off points were calculated as follows: class II for *Dermatophagoides farinae*, class

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Chemistry, Biochemistry

Independent control of grafting density and conformation of single-stranded DNA brushes

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RESULTS

FTIR Results. The features used to interpret the reflectance FTIR data from $d(T_m-A_n)$ oligo films on gold are identified in the reference spectra obtained from $(dT)_{25}$ and $(dA)_{25}$ homo-oligos and thiol-modified $(dT)_{25}$ -SH (top three spectra, Fig. 2). The features at $\approx 1,600$ and $\approx 1,650$ cm^{-1} in the $(dA)_{25}$ spectrum (Fig. 2, dashed lines) are characteristic of dA adsorbed on gold (16). Carbonyl features in the $(dT)_{25}$ spectrum, located between 1,550 and 1,600 cm^{-1} (Fig. 2, short dash green line), are attributed to thymine bases chemisorbed on the gold substrate (16). The dominant carbonyl feature at $\approx 1,700$ cm^{-1} in the $(dT)_{25}$ -SH spectrum is characteristic of thymine bases that do not directly interact with the gold surface (hereafter referred to as the "nonchemisorbed" dT feature) (Fig. 2, dotted green line) (16). The absence of the chemisorbed feature in the $(dT)_{25}$ -SH spectrum indicates that $(dT)_{25}$ -SH oligos anchor on gold via the thiol group and that few d nucleotides directly adsorb on the gold.

Fig. 2. FTIR spectra obtained from ssDNA adsorbed on gold. The adsorption conditions for the $d(T_m-A_n)$, $d(T_m-A_n)$, and $(dT)_{25}$ -SH oligos were 3 μM ssDNA in 1 M CaCl_2 -TE, pH 7, at 35°C for 2,400 min. Reference spectra are presented for $(dA)_{25}$ and (more ...)

We observe four trends in the FTIR spectra obtained from the $d(T_m-A_n)$ samples. First, absorbances of the dA features (Fig. 2, red dashed lines) for all six samples are very similar to those measured for the reference $(dA)_{25}$ homo-oligo. Second, the chemisorbed dT features are small in each $d(T_m-A_n)$ spectrum. Third, for a series of oligos with fixed d(A) block length [e.g., $d(T_m-A_2)$], the intensity of the

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ABSTRACT

We describe self-assembly of ssDNA brushes that exploits the intrinsic affinity of adenine nucleotides (dA) for gold surfaces. The grafting density and conformation of these brushes is deterministically controlled by the length of the anchoring dA sequences, even in the presence of thymine nucleotides (dT). We produce and characterize brushes of model block-oligonucleotides, $d(T_m-A_n)$, with systematically varied lengths m and n of the thymine and adenine blocks [denoted $d(T_m)$ and $d(A_n)$, respectively]. The hairpin conformation, dominant for self-complementary $d(T_m-A_n)$ oligos in solution, is disrupted by the high preferential affinity of dA for gold surfaces. As a result, the $d(T_m-A_n)$ oligos adsorb as a brush of d(T) strands immobilized via the d(A) blocks. Quantitative analysis by FTIR spectroscopy and x-ray photoelectron spectroscopy (XPS) reveals a unique feature of DNA immobilization via d(A) blocks: The surface density of dA nucleotides is close to saturation and is nearly independent of d(A) block length. Accordingly, the lateral spacing (grafting density) of the d(T) blocks is determined by the length of the d(A) blocks. The d(T) blocks extend away from the surface in a brush-like conformation at a lateral spacing 2-3 times larger (a grafting density 5-10 times lower) than in analogous films immobilized via standard thiol linkers. This combination of brush-like conformation and low

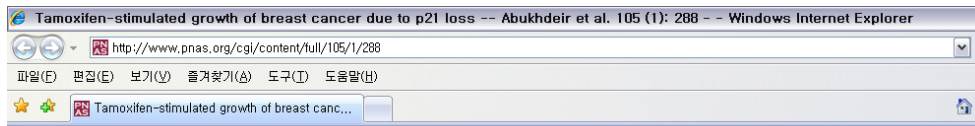
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The authors declare no conflict of interest.

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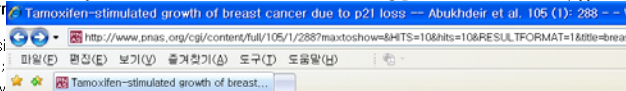
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BIOLOGICAL SCIENCES / MEDICAL SCIENCES

Tamoxifen-stimulated growth of breast cancer due to p21 loss

Abde M. Abukheir*, Michele I. Vitolo[†], Pedram Argani*, Angelo M. De Marzo*, Bedri Karakas*, Hiroyuki Kon John P. Gustin[‡], Josh Laurant*, Joseph P. Garay*, Courtney Pendleton*, Yuko Konishi*, Brian G. Blair*, Keith Brenner*, Elizabeth Garr

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Cell proliferation assays were performed as described by using ERIN and ERIK cells with various ER ligands (16). These results to tamoxifen but also were growth-stimulated by this SERM (Fig. 2A). This proliferative effect was statistically significant by cell phenotype described in our case report. To ensure that ERIN was truly mediating this growth effect, ERIN and ERIK cells were also pure antiestrogen that mediates its effects by down-regulating ER expression (29). As expected, ERIN and ERIK cells no longer ERIK cells cultured in tamoxifen and ICI 162,760 also failed to proliferate, demonstrating the necessity of ER expression for tamoxifen

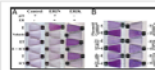


Fig. 2. Loss of p21's CDK inhibitory function leads to growth stimulation by tamoxifen 6 days with 10 nM 17- β -estradiol (E), ethanol (Vehicle), 1 μ M 4-OH-tamoxifen (T), 1 μ M ICI 162,760 (I), and combinations thereof. ERIN and ERIK cells were transfected with a representative of six independent experiments using two independently derived ER cDNAs transiently transfected with parental plasmid DNA (Plasmid Control), wild-type p21 cDNA activity (p21 cdk-), and then grown with 10 nM 17- β -estradiol (E) or 1 μ M 4-OH-tamoxifen (T) to assess growth. Results are representative of three independent experiments.

We previously demonstrated that ERIN cells have physiologic ER signaling by analyzing the expression of genes known to be expression analysis via RT-PCR was performed for ERIN cells with estrogen and tamoxifen. ERIN cells demonstrated increased either estrogen and/or tamoxifen (Fig. 2B). In contrast, ERIK cells increased transcription of these genes only with estrogen, results are consistent with the notion that tamoxifen-stimulated growth of ERIN cells is mediated by known ER signaling pathway.

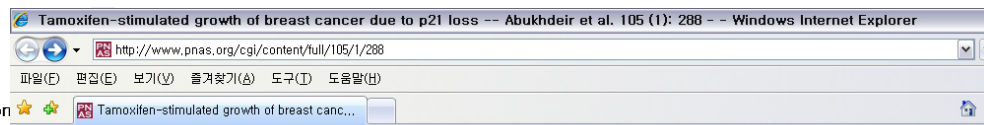
We then demonstrated that this tamoxifen-induced growth phenotype was reversible in ERIK cells by restoration of p21 expression sensitivity to ERIK cells (Fig. 2B). Because transfection efficiencies are not 100%, only partial restoration of tamoxifen. Nevertheless, by cell count analysis, there was a 2-fold less growth, which was highly statistically significant (Fig. 2B, $P < 0.001$). In the CDK-binding domain of the p21 cDNA (p21 cdk-) and transfected this construct into ERIK cells as described properties of p21 (31), and transfection efficiencies were equivalent among wild-type p21, p21 cdk-, and empty vector controls (30). In contrast to wild-type p21, the vector control and mutant p21 cdk- constructs had no effect on tamoxifen resistance (Fig. 2B). These results demonstrate that the CDK inhibitory activity of p21 was responsible for mediating the agonistic versus antagonistic effects of tamoxifen.

Cyclin/CDK complexes are known to phosphorylate ER at critical serine residues (32), and several groups have recently demonstrated that tamoxifen can convert tamoxifen from an antagonist to an agonist *in vitro* (9, 10, 12). We therefore compared the phosphorylation status of ER in ERIN cells. Western blotting using an antibody specific for ER phosphorylated at serine 118 showed that ERIN cells became phosphorylated upon treatment with tamoxifen. In contrast, ERIK cells displayed only a small amount of phosphorylation. Additionally, ER serine 118 phosphorylation was markedly reduced in ERIK cells transfected with p21 cdk- (Fig. 3A). To prove that ER serine 118 is critical for mediating tamoxifen response, a mutation was introduced within an ER cDNA construct and transfected into p21 null ER-negative MCF-10A cells (15). This mutant ER, which retained the ability to stimulate cell proliferation with estrogen, although this response was somewhat muted compared with wild-type ER (Fig. 3B). In addition, gene expression of *PR* did not increase upon tamoxifen exposure, although a slight increase in the *pS2* gene was noted (Fig. 3C). This may reflect an altered response of the mutant ER because some *pS2* gene transcription was noted at baseline in the absence of ER ligand.



Fig. 3. ER Serine 118 hyperphosphorylation is required for tamoxifen-induced growth in p21 null ERIK cells. (A) Cells were cultured in either assay media with vehicle control alone (A), or supplemented with 10 nM 17- β -estradiol (E), 1 μ M 4-OH-tamoxifen (T), or a combination of the two (ET). Total ER, serine 118 phosphorylated ER (ER pS118), and GAPDH protein levels were assayed by Western blotting. Results are representative of three independent experiments.

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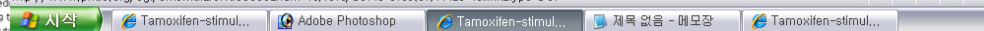


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A case of fungal sepsis due to aspergillus spondylitis followed by cytomegalovirus infection in a renal transplant recipient

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Available online 27 October 2004.

Abstract

Although advances in immunosuppressive therapy have led to increased survival of renal transplant recipients, there are greater risks of developing infectious complications. Because of its rarity and the lack of medical awareness, aspergillus spondylitis is often misdiagnosed as tuberculous spondylitis, especially in its early stages. We report a case of aspergillus spondylitis in a renal transplant followed by cytomegalovirus (CMV) retinitis.

Case

A 59-year-old woman was admitted due to general weakness and abdominal discomfort. She had undergone renal transplantation 3 years previously. One month before admission, she was diagnosed with CMV retinitis and treated with IV ganciclovir. On admission, she suffered from lower abdominal pain. Colonoscopy

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continues to be high, underlying the importance of an early diagnosis. The overall case fatality rate is 58%. Furthermore, invasive aspergillosis, in contrast to tuberculosis, responds poorly to drug therapy. Herein, we described a renal transplant recipient with aspergillus spondylitis precipitated by preceding CMV retinitis. Although tuberculosis osteomyelitis of the spine is common in Korea, this case highlights the fact that spondylitis in immunocompromised hosts should alert one to the possibility of fungal infection.

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KEYWORDS

chondrosarcoma; chondroblastic osteosarcoma; recurrence; survival; facial

ABSTRACT

Background: Osteosarcomas of the jaw frequently have chondroblastic differentiation, causing confusion with chondrosarcomas.

Method: Clinicopathologic features and results of treatment were analyzed for a series of 56 patients (27 males and 29 females from 1.5 to 88 years of age) with chondrosarcoma of jaw and facial bones. Twelve patients (21.4%) were younger than 20 years.

Results: The major symptom was nasal obstruction or a painless mass; the median interval from the first symptom until initial treatment was 1 year. Of the 56 chondrosarcomas, 25 (44.6%) involved the alveolar portion of the maxilla and maxillary sinus; 23 (41.1%) involved the nasal septum, ethmoid, and sphenoid; 6 (10.7%) involved the mandible; and 2 (3.6%) involved the nasal tip. Of the 19 patients with radiographic studies, 15 (78.9%) had an expanding soft tissue mass with varied matrix calcification and destruction of bone and 2 had a purely lytic lesion. The lesion was difficult to assess in the two others. Most tumors had a lobulated growth pattern of hyaline cartilage.

Hypercellularity, nuclear pleomorphism, and binucleation were common features. Forty-three tumors were grade 1, 13 were grade 2, and none were grade 3. Modalities of treatment were known for 51 of the 56 patients. Forty-six patients (90.2%) had surgical treatment, 2 (3.9%) had combination radiation therapy and chemotherapy, 1 (2%) had radiation therapy alone, and 2 (3.9%) had biopsy only. Follow-up adequate for analysis was obtained for 42 patients. Of these, 14 (33.3%) had local recurrence, uncontrolled recurrence developed in 9 (21.4%) patients. No distant metastases were documented. Overall actuarial survival at 5, 10, and 15 years was 80.7%, 65.3%, and 56%, respectively.

Survival was analyzed for location, size, and histologic grade of tumor. No statistically significant differences were found.

Conclusions: Chondrosarcomas of the jaw and facial bones are extremely rare, locally aggressive tumors. *Cancer* 1995; 76: 1550-8.

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Autologous serum in the management of recalcitrant dry eye syndrome

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ABSTRACT

Purpose: To evaluate the efficacy and safety of long-term application of autologous serum eye drops treating recalcitrant dry eye syndrome.

Method: A retrospective chart review was conducted of patients who

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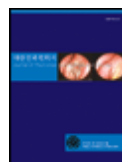
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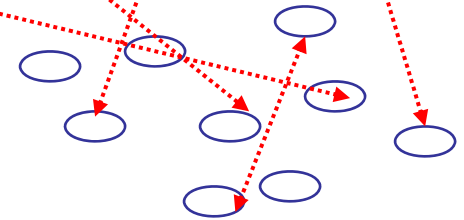
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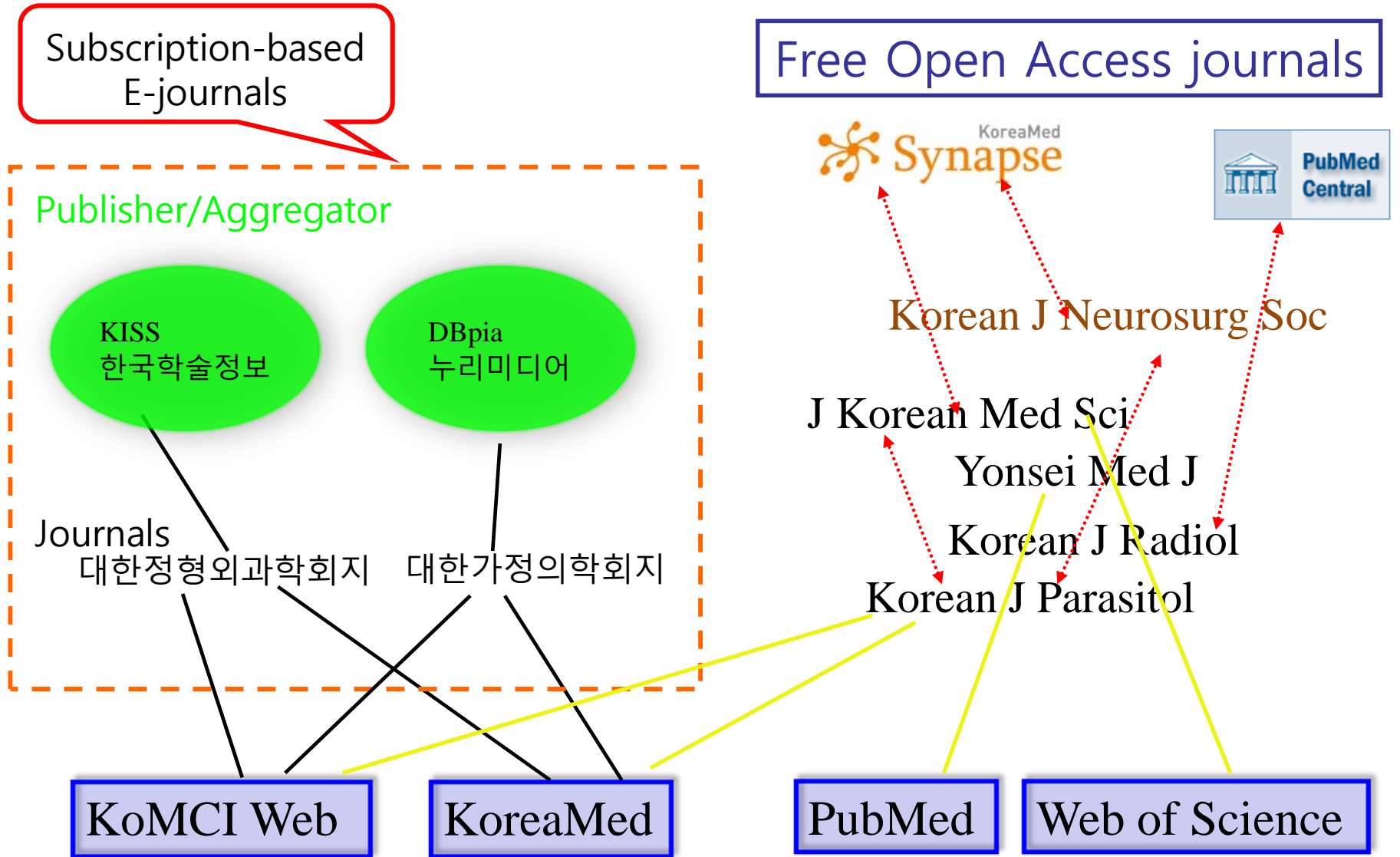
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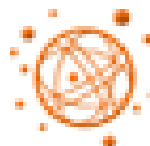


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