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EDITOR'S NOTE

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I am pleased to introduce the next issue of the Journal of Current Clinical Care.

Dr. Abdulla and Neelam Charania present *Osteoarthritis—“Twinges in all your hinges”*. Osteoarthritis is most common form of arthritis. It is also very disabling. Fortunately, there is a long list of medical therapies including education, OTC meds, strengthening, braces, prescribed medications, standard and non-standard intraarticular therapies and some new experimental therapies. This article focuses on well known and well proven therapies like cortisone and hyaluronic acid injections into large joints like knees and hips. Large meta-analysis shows improvement in pain, physical function and stiffness in a simple well tolerated procedure with minimal side effects.

In their article, *The CORE Neck TOOL: An Organized Approach to Neck Pain*, **Drs. Julia Alleyne, Pierre Côté and Hamilton Hall**, review neck pain that is a common presentation in primary care with an estimated one-year incidence ranging from 10.4-21.3% and a 25-50% recurrent rate. Guidelines have not included a specific approach to assessment although treatment recommendations have advised non-pharmacological and pharmacological management for optimal results. The CORE Neck Tool was designed as a comprehensive, user-friendly approach to clinical decision making for primary care providers assessing patients with neck pain. The key components of the tool include a high yield history, physical examination and a management matrix providing evidence-based recommendations for acute and chronic neck dominant and arm dominant pain patterns.

Drs. Sharon Chung, Maya Capua, Colin M. Shaprio and Madison O.L. Rays, from Youthdale Child and Adolescent Sleep Centre and Youthdale Treatment Centres in Toronto offers an article on the *Importance of Screening Children with Adenotonsillar Hypertrophy for Obstructive Sleep Apnea*, a disorder in which patients stop breathing repeatedly during sleep, and it is linked to a number of serious medical consequences. However, most patients with OSA remain undiagnosed. The consequences of OSA are particularly severe in children. Physicians should consider snoring, pauses in breathing while asleep, restless sleep, bizarre sleeping positions, paradoxical chest movements, cyanosis, bedwetting, hyperactivity, and disruptive behaviour in school as possible indications of untreated OSA in children.

I hope you enjoy this latest edition. Please consider commenting or submitting an article of your own.