

Student corner

In the meetings of the Hong Kong Society of Palliative Medicine palliative care/oncology units present case reports, local studies, review important topics and search the literature. We encourage you to attend, but for those that could not attend previous meetings, our short reviews in the newsletter may be of help.

Here are some questions from the articles in this issue. Test yourself.

Chemical pleurodesis for malignant pleural effusion:

- A. Can be performed as an out patient. (T/F)
- B. The use of small-bore catheter has a markedly higher rate of recurrence of effusion. (T/F)
- C. The outcome depends on the sclerosing agent used. (T/F)

In head and neck cancers:

- A. The majority present with advanced cancer. (T/F)
- B. There is a lower risk of developing a second primary tumour compared to most other cancers. (T/F)
- C. Deafness found in head and neck cancers is usually due to direct invasion by the cancer. (T/F)

Use of fentanyl in advanced cancer:

- A. A shift to subcutaneous fentanyl may be considered for patients on transdermal fentanyl when the pain is severe and not easily controlled. (T/F)
- B. Subcutaneous fentanyl should be avoided in renal impairment because of accumulation of several active metabolites. (T/F)
- C. When shifting from transdermal to subcutaneous fentanyl the conversion rate is one to one. (T/F)