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Editorial Highlights on the Journal of Clinical Case Reports Volume 5 and Issue 5

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Editorial

The volume 5 and 5th issue of Journal of Clinical Case Reports compiles 13 excellent manuscripts including 9 clinical case reports and a research article on various pathological conditions. An interesting research article by Vega-Hernandez et al, described the association between four polymorphisms on the Vitamin D Receptor (VDR) with respect to clinical manifestations of Psoriasis Vulgaris (PsV) in a Mexican patient population. Their results indicate polymorphisms of FokI, ApaI, BsmI and TaqI in the VDR gene are not associated with the risk of presenting PsV in the Mexican population. They found an association between FokI polymorphism of VDR gene and two major clinical variables, suggesting that the genotype [T/T]/ff may be a protective factor for nail involvement and age of onset in Mexican patients with PsV.

A case of pulmonary cement embolism following percutaneous vertebroplasty performed for osteoporotic vertebral compression fracture was reported by Boudissa et al. [1]. They demonstrated that the pulmonary cement embolism either symptomatic or asymptomatic is an under-estimated complication of vertebroplasty and awareness of this complication should allow an earlier diagnosis, which lies on a systematic chest X-ray after the surgery or an angioscan in emergency in case of clinical signs. Another case report by Galateanu et al. [2] indicates that the tyrosine kinase inhibitor-induced thyroid toxicity is presented as both thyrotoxicosis and hypothyroidism. The periodic thyroid evaluation is necessary in cancer patients treated with this drug. Nkosi and Amanze [3] reported a 65 year old man with an atypical presentation of transformed follicular lymphoma and treatment with R-CHOP (Rituximab, Cyclophosphamide, Doxorubicin, Vincristine and Prednisolone) with overall good response.

Gharab et al. [4] presented a case of Keratosis Follicularis Spinulosa Decalvans (KFSD) with in a family of children, a boy of nine years and girl of five years old. Although, there is no specific treatment for KFSD, patients were started on oral dose of acetritin and topical retinoic acid for the scalp and the body was treated with urea and lecithin containing moisturizers. One month later, patient had marked improvement in terms of decreased roughness, increased hair growth and absence of disease progression. Another case report by Kaleem [5] presented a case of plasma cell leukemia and treatment with a combination of Lenalidomide, Bortezumib and Dexamenthasone. At the end of the treatment, patient showed improvement as observed by cell lineages, and bone marrow biopsy. In the same lines, Tamatey et al. [6] presented a case of cutaneous metastasis of bronchogenic carcinoma that survived almost 3 years after the initial appearance of the cutaneous lesions. Another interesting case report by Rasheed et al., presented a case of acute psychosis after immediately starting on Hydrocodone because of back pain in a 35 year old male, with no past psychiatrist history. They report a unique case that showed an association between the short term use of hydrocodone and development of psychiatric symptoms.

In another case report by Ayala-Yanez et al. [7] reported a medical management that successfully eliminated cervical pregnancy without any risk of invasive procedures may pose. A 39 year old woman with a 6.5 week old cervical pregnancy was successfully treated with multiple dose regimen of methotrexate. Myint et al. [8] presented a

case report of a patient with Spontaneous Coronary Artery Dissection (SCAD), a rare life-threatening cause of acute coronary syndrome. A 35 years old woman with SCAD in the left anterior descending artery resulting in Non-ST elevation myocardial infarction and low ejection fraction associated with an acute pulmonary embolism was treated successfully with thrombectomy followed by stent placement. They report that the patient's cardiac functions returned to normal within six months with no recurrence of symptoms. In the last case report of the this issue, Jepsen et al. [9] presented a first case of Epstein Barr Virus positive, NK/T-cell lymphoma involving placenta in a 36 year old G5P4 Mexican female of 24 weeks gestation. They indicate necessary pathologic examination of the placenta in pregnant women with lymphoma for evidence of placental involvement to clarify risk factors for transplacental transmission.

In the clinical images section, Bhinder and Cherniak reported chest radiographs of a 90 year old COPD patient with chronic diaphragmatic impairment with kyphosis. In addition, Gharib et al. [4] in their nice commentary article describes pathological, histological, differential diagnostic and therapeutic evaluation of Keratosis Follicularis Spinulosa Decalvans (KFSD), a X-linked genodermatosis characterized by scarring alopecia and follicular hyperkeratosis. A letter to editor article by Koch discusses a case of a 51-year old women suffering from depression with psychotic symptoms and the importance of medical history with regard to selective serotonin reuptake inhibitor withdrawal phenomena.

In a final note, it is evident from these papers that presentation of clinical issues in the context of a real patient situation with various disease pathologies will help in diagnostic and medical management of symptoms. Thanks to all the editorial staff, authors and reviewers who took part in the success of completing this issue.

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