



Obesity prevention correction *(NZFP 2004; 31:248–253)*

The article by Anne-Thea McGill on obesity prevention in the August issue is, in general, very helpful, but Table 2 is nonsense.

I am sure that Anne-Thea does not really mean, for instance, that a waist circumference in a male of LESS than 102cm is a trait of the Metabolic Syndrome.

All the < and > signs in the table are wrong and should be reversed.

Perhaps the proof-reading for *NZFP* needs to be upgraded.

AEJ Fitchett

Anne-Thea and I both apologise for the confusion resulting from the misleading table. I am reminded of a patient who had primary Cushing's disease. I must have seen her about six times for various problems until I finally twigged and then it was so obvious that I wondered how I ever could have missed it! A revised version of Table 2 is printed below.

Editor

Table 2. Diagnostic criteria for the Metabolic Syndrome

Three or more traits = Metabolic Syndrome MSX	
Variable	Cut-point
Waist circumference	>102cm in men, >88cm in women
Systolic BP	≥135mm Hg
Diastolic BP	≥85mm Hg
Fasting plasma glucose (FPG)	≥6.1mmol/L (≥110mg/dl)
HDL-C	<1.036 mmol/L (<40mg/dl) in men, <1.295 mmol/L (50mg/dl) in women
Triglycerides	≥1.695 mmol/L (≥150mg/dl)

The Challenges of Cross-Cultural Healthcare – Diversity, Ethics, and the Medical Encounter

'Difficulties in the provider-patient relationship arise from many sources, and pose various challenges to the integrity of the medical encounter. When these issues are especially sensitive or important to the patient's health and well-being, a complete breakdown in the therapeutic relationship may result. The goal of the emerging field of cross-cultural healthcare is to improve providers' ability to understand, communicate with, and care for patients from diverse backgrounds. We should weave the concepts of cross-cultural care into the ethics of caring if we truly hope to have a positive impact on the health status of diverse patient populations.'

Betancourt JR, Green AR, Carrillo JE. Difficult Relationships – Interactions between Family Members and Staff in Long-Term Care. *Bioethics Forum* 2000;16(3): 27–32.