

atters

■ A BLOOD test that could rule out a heart attack in under 20 minutes should be used routinely say UK researchers.

A team from King's College London claim it could be rolled out in five years and would save the NHS millions of pounds each year by freeing up

beds and sending well patients home. About two-thirds of patients with chest pain will not have had a heart attack.



■ Maddi is doing her best to remain positive despite her diagnosis.

"We're under Great Ormond Street and they look after Maddi's symptoms, but there's nothing they can give us to help stop the progress of the disease.

"So we do feel a little bit alone at times.

"Because she's losing muscle tone, her mobility's compromised. She walks with a cane and she's struggling.

"She can't get about like she did, she just can't do the things she used to do.

"She can't walk very far, just down the road a little bit and she'll have to have a sit down as it's just too painful for her.

"But she's a trooper and in every photograph she's got the biggest smile. People say how amazing she is to do that.

"Maddi's just trying to get

by, really. She's quite a strong girl so she's not falling apart at the moment.

"She's trying to deal with it as best she can and remain positive — we all are."

■ The Maddi Foundation is a charity that aims to fund gene therapy research at Sheffield University.

For more information visit www.saveourmaddi.co.uk

against drug-resistant fungus

Dr Colin Brown of the national infection service says most UK cases had been detected by screening rather than investigations for patients with symptoms.

"Our enhanced surveillance shows a low risk to patients in healthcare settings," he says.

"Most cases detected have not shown symptoms or developed an infection as a result of the fungus."

Candida auris belongs to a family of fungi or yeasts that live on the skin and inside the human body.

A more common "cousin" is *Candida albicans*, causing the yeast infection thrush.

Patients in hospital who catch it may become sick, although infections are still usually minor.

Experts think it is spread by contact on people's hands,

clothing or medical equipment, but this can be limited by frequent hand-washing and using alcohol gel.

If a patient is found to be infected, visitors may be asked to wear a gown, plastic aprons and gloves.

A biosafety unit at the government's military research base is testing disinfectants and antiseptics to see if they can kill it.

Paris Syndrome is not a joke for the Japanese tourists hit with panic

ABOUT 20 Japanese tourists every year have to be repatriated from the French capital, writes Alan Shaw.

They have fallen prey to an affliction that only affects the Japanese — Paris Syndrome.

This is what some of the super-polite Japanese tourists suffer when they discover that — shock, horror — Parisians can be a bit rude or that the city doesn't quite meet their idealistic expectations.

It's basically extreme culture shock magnified by travel fatigue and the experience can become so stressful for some that they actually suffer a psychiatric breakdown.

Around six million Japanese travel to France every year and many of them come with deeply romantic visions of Paris, all cobbled streets, beautiful mademoiselles, high culture and museums packed with classic art.

Japanese magazines have been blamed for creating the syndrome, depicting Paris as a place where most people on the street are stick-thin models clad in Louis Vuitton.

But the reality can come as a shock.

All it can take is an encounter with a rude taxi driver, or one of those stereotypical Parisian waiters who shouts at customers who can't speak fluent French.

It ain't the tranquil city of the cinema, it's noisy and there is also a school of thought that the hygiene-obsessed Japanese simply can't cope with the somewhat grubby, shabby-chic look of Paris, and the trademark piles of dog poo.

That might be met with an ironically Gallic shrug by most



THIS WEEK — J

Europeans, but for those from the Land Of The Rising Sun — used to a more polite and helpful society in which voices are rarely raised in anger — the experience of their dream city turning into a nightmare can be too much to bear.

As a result, the Japanese embassy in Paris regularly has to repatriate people accompanied by a doctor or nurse to help them get over the shock.

Symptoms can include acute delusional states, hallucinations, feelings of persecution, anxiety, dizziness, tachycardia, sweating and vomiting.

It was a Japanese psychiatrist working in France, Professor Hiroaki Ota, who first identified the syndrome in the mid-1980s.

It affects mainly women in their 30s with high expectations of what may very well be their first trip abroad.

The embassy has a 24-hour hotline for those suffering from Paris Syndrome and can help find hospital treatment for anyone in need.

But the only permanent cure is to jet back to Japan and never return to Paris again.



■ Paris is popular, but has proven to be a culture shock to some.