radiologist.^{3,4} Any dentist who believes that a current AI dental radiology report will protect them from liability of failure to diagnose, is wrong. The dentist has the responsibility to either interpret the radiographs themselves or request a dental radiologist to provide it for them.

D. Benn, Atenas, Costa Rica

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Ethics

A dilemma in food advertising

Sir, the Christmas advert from McDonald's featured a friendly blue monster named 'Imaginary Iggy' who feeds off reindeer treats (McDonald's carrot sticks in disguise). The advert is described by its parent company as a 'touching tale of childhood wonder', which is difficult to argue after viewing.

McDonald's are well known for their unhealthy menus and strong advertising campaigns, often aimed at children, a clearly unacceptable strategy when we are all witness to increasing levels of adult and childhood obesity, even type II diabetes in under-tens.¹ Over one-third of children leaving primary school are obese² and we know that advertising of unhealthy foods leads to increased intake by children.³

In response to the worsening obesity crisis, new laws are to be introduced banning the advertisement of unhealthy foods high in fat, sugar and salt (HFSS) after 9 pm.⁴ Such advertising is already banned on all children's media yet manages to secure prime position between popular family shows such as 'Gogglebox' – hence calls for tighter regulations from the World Health Organisation. The emotive advertising strategies of these companies will surely continue to succeed, winning the hearts of the nation and claiming to advocate healthy eating by showing only their healthiest

menu items, despite intention to promote seasonal menus that consist primarily of HFSS items. With a proportion of the profits generated from downloads of the soundtrack to the new Christmas advertisement being donated to a charity dedicated to supporting vulnerable families at Christmas, this advert becomes increasingly difficult to criticise.

With the evolution of advertising methods overtaking the implementation of regulations against that of junk foods, do we need to adopt a more creative approach to combatting obesity via this method?

E. Morphet, Leeds, UK

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Pharmaceuticals

Bruising

Sir, we would like to remind clinicians to be mindful of drug interactions when prescribing common anti-infective medications. A warfarinised patient in the 65+ age group was prescribed a course of Daktarin (miconazole nitrate 2% topical gel) for oral candidiasis by their general practitioner, subsequently developing spontaneous bruising on the upper and lower limbs, with the INR increased to 10.

The patient was brought into the Acute Medical Unit for vitamin K therapy to bring the INR back into the targeted range of 2–4 and their warfarin was withheld. The interaction was addressed and promptly managed, avoiding any significant complications. However, the patient did require hospitalisation which should not be taken lightly, especially given the risks of COVID-19 transmission.

Miconazole and other -azole antifungal medications (including topical form) greatly potentiate the anti-coagulant effect of warfarin and can have fatal consequences if bleeding occurs. The interaction is graded as severe and clinicians should avoid prescribing unless essential, with close INR monitoring.

We kindly remind all clinicians to double check interactions for drugs when prescribing, even if they are in topical form, and to continue to use the BNF for reference.

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OMFS

Novel use of Coe-Pak

Sir, although Coe-Pak is primarily a periodontal dressing, I wanted to share with your readers a use that I have found for the material in haemostasis. It is useful in patients who suffer from post-extraction bleeding due to contributing factors (eg anticoagulants), bleeding disorders and those who are not responding to local haemostatic measures; eg pressure, packing, suturing, tranexaemic acid, being shown to protect the clot from forces applied during speaking, drinking or chewing.¹

It consists of two pastes: a base and a catalyst, which are mixed in equal portions until a thick and uniform consistency is achieved.² Warm water can also be used to alter the setting time. This can then be easily manipulated and moulded with gloves lubricated with water and petroleum. Pencil-sized rolls are then shaped which can be placed over the bleeding socket, while interlocking this with the interproximal areas to reduce the risk of swallowing. When haemostasis is achieved, this can be easily removed in a few days.

I hope that this may be a useful tip to other oral and maxillofacial colleagues when faced with a similar situation with patients who present in the Emergency Department.

Y. Lin, Plymouth, UK

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