

CONTENTS **Annals of Internal Medicine**

19 November 2002 137 10 783-858

ARTICLES

Regular Mammography Use Is Associated with Elimination of Age-Related Disparities in Size and Stage of Breast Cancer at Diagnosis 783

W.M. Randolph, J.S. Goodwin, J.D. Mahnken, and J.L. Freeman

There is little evidence or consensus about mammography for women age 75 years and older. Compared with women 69 to 74 years of age, they have mammography less frequently and have larger tumors and more advanced stage at diagnosis. This study found that breast cancers in older women who had mammography were similar in size and stage to breast cancers in women 69 to 74 years of age.

Health Care–Associated Bloodstream Infections in Adults: A Reason To Change the Accepted Definition of Community-Acquired Infections 791

N.D. Friedman, K.S. Kaye, J.E. Stout, S.A. McGarry, S.L. Trivette, J.P. Briggs, W. Lamm, C. Clark, J. MacFarquhar, A.L. Walton, L.B. Reller, and D.J. Sexton

The authors define health care–associated bloodstream infections as those that are associated with intensive, out-of-hospital care of serious illness. These bloodstream infections are similar to nosocomial infections, but different from community-acquired infections, in the frequency of comorbid conditions, source of infection, pathogens and their susceptibility patterns, and mortality rate. This new category has important implications for the choice of empirical therapy and infection control surveillance.

Use of Postmenopausal Hormones, Alcohol, and Risk for Invasive Breast Cancer 798

W.Y. Chen, G.A. Colditz, B. Rosner, S.E. Hankinson, D.J. Hunter, J.E. Manson, M.J. Stampfer, W.C. Willett, and F.E. Speizer

Both alcohol consumption and postmenopausal hormone use were associated with an increased incidence of breast cancer. Physicians should counsel women who are currently taking postmenopausal hormone therapy to consider the added risks of regular alcohol consumption.

ACADEMIA AND CLINIC

Complementary and Alternative Medicine for Menopausal Symptoms: A Review of Randomized, Controlled Trials 805

F. Kronenberg and A. Fugh-Berman

Black cohosh and foods that contain phytoestrogens show promise for the treatment of menopausal symptoms.

Clinical trials do not support the use of other herbs or complementary and alternative medical therapies. Long-term safety data on individual isoflavones or isoflavone concentrates are not available.

UPDATE

Update in Hospital Medicine 814

B.E. Flansbaum and J.M. Huddleston

This Update summarizes articles that are important to primary inpatient physicians. The selected articles cover quality improvement, invasive procedures, pulmonary diseases, infectious diseases, cardiology, endocrinology, and critical care.

PERSPECTIVE

Prevention of Plaque Rupture: A New Paradigm of Therapy 823

J.S. Forrester

The author describes the steps in plaque destabilization and links them to a set of clinical strategies that may substantially decrease the incidence of acute coronary syndromes.

CLINICAL GUIDELINES

Postmenopausal Hormone Replacement Therapy for Primary Prevention of Chronic Conditions: Recommendations and Rationale 834

U.S. Preventive Services Task Force

The U.S. Preventive Services Task Force recommends against the routine use of estrogen and progestin for the prevention of chronic conditions in postmenopausal women. It concludes that the evidence is insufficient to recommend for or against the use of unopposed estrogen for the prevention of chronic conditions in postmenopausal women who have had a hysterectomy.

Pharmacologic Management of Acute Attacks of Migraine and Prevention of Migraine Headache 840

V. Snow, K. Weiss, E.M. Wall, and C. Mottur-Pilson, for the American Academy of Family Physicians and the American College of Physicians–American Society of Internal Medicine

This guideline, developed by the American Academy of Family Physicians and the American College of Physicians–American Society of Internal Medicine, with assistance from the American Headache Society, applies to patients with acute migraine attacks, with or without aura, and patients with migraine who are candidates for preventive drug therapy.

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EDITORIAL

**Health Care–Associated Bloodstream Infections:
 A Change in Thinking** 850

R. Gaynes

The study by Friedman and colleagues in this issue presents an important clinical message—that clinicians should reconsider therapy for patients with community-acquired bloodstream infections if they have recently received intensive, out-of-hospital care for serious illness.

ON BEING A PATIENT

Şanti 852

J.K. Rao and V.R. Koppaka

“You should just be his children and not doctors,” we were advised early on. The patients were managed according to protocols while the surgeons operated. “Surgical attendings just don’t have time to talk to families,” the nurses explained, apologetically. This was a system that worked, usually.

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The Knowledge 822

R. Bronson

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A.G. Pinto, O.W. Cummings, and N. Chalasani

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