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## ARTICLES

### **Sudden Death in Young Adults: A 25-Year Review of Autopsies in Military Recruits** 829

R.E. Eckart, S.L. Scoville, C.L. Campbell, E.A. Shry, K.C. Stajduhar, R.N. Potter, L.A. Pearse, and R. Virmani

Anomalous origin of the left coronary artery and myocarditis are the leading identifiable causes of sudden death among military recruits. More than one third of sudden deaths remain unexplained after detailed medical investigation and autopsy.

Summary for Patients 1-26

### **Management of Implantable Cardioverter Defibrillators in End-of-Life Care** 835

N.E. Goldstein, R. Lampert, E. Bradley, J. Lynn, and H.M. Krumholz

Implantable cardioverter defibrillators (ICDs) may discharge as an inevitable death draws near and make the act of dying more distressing. In this study, deceased patients' next of kin reported that clinicians seldom discussed deactivating ICDs. Individuals with an ICD should have the opportunity to turn it off as death approaches.

Summary for Patients 1-38

### **Negative D-Dimer Result To Exclude Recurrent Deep Venous Thrombosis: A Management Trial** 839

S.W. Rathbun, T.L. Whitsett, and G.E. Raskob

A negative D-dimer test result can obviate the need for further testing or anticoagulation in many patients with a suspected first episode of deep venous thrombosis. This management trial extends this concept to patients with suspected recurrent venous thrombosis by showing a very low rate of deep venous thrombosis after a negative D-dimer test result in up to two thirds of such patients.

Summary for Patients 1-46

### **Brief Communication: Sleep Curtailment in Healthy Young Men Is Associated with Decreased Leptin Levels, Elevated Ghrelin Levels, and Increased Hunger and Appetite** 846

K. Spiegel, E. Tasali, P. Penev, and E. Van Cauter

Sleep-deprived healthy persons experience increased hunger. They also have increased blood levels of leptin and decreased levels of ghrelin (hormones that regulate satiety

and hunger). These hormonal effects could be the cause of their increased hunger.

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## IMPROVING PATIENT CARE

### **Systematic Review: Effects of Resident Work Hours on Patient Safety** 851

K.E. Fletcher, S.Q. Davis, W. Underwood, R.S. Mangrulkar, L.F. McMahon Jr., and S. Saint

Studies of interventions to decrease housestaff work hours, fatigue, and sleep deprivation are few; taken together, they make a relatively weak body of evidence. As educators struggle to improve working conditions for housestaff, they cannot rely on past research.

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K.A. Bybee, T. Kara, A. Prasad, A. Lerman, G.W. Barsness, R.S. Wright, and C.S. Rihal

Some people who do not have coronary artery obstruction experience transient wall-motion abnormalities involving the left ventricular apex and mid-ventricle. They have transient left ventricular apical ballooning syndrome. The authors review case series of patients with this syndrome.

### **Meta-Analysis: Outcomes in Patients with Suspected Pulmonary Embolism Managed with Computed Tomographic Pulmonary Angiography** 866

L.K. Moores, W.L. Jackson Jr., A.F. Shorr, and J.L. Jackson

Patients with suspected pulmonary embolism seldom have subsequent venous thromboembolism after negative results on computed tomographic pulmonary angiography (CTPA). Withholding anticoagulation after negative CTPA results seems to be safe.

## UPDATE

### **Update in Infectious Diseases** 875

B. Lorber

This year's Update in Infectious Diseases incorporates articles on common infections, HIV medicine, therapeutics, bioterrorism, and emerging infections.

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EDITORIALS

**Sudden Cardiac Death in Young Military Recruits: Guarding the Heart of a Soldier** 882

G.J. Balady

In this issue, Eckart and colleagues show that cardiovascular conditions account for most sudden deaths in basic military training. These conditions are very difficult to detect with noninvasive tests in a low-risk population. A history of chest pain, syncope, or unusual dyspnea before or during basic training should alert physicians to military recruits at relatively high risk.

**A Good Night's Sleep: Future Antidote to the Obesity Epidemic?** 885

J.S. Flier and J.K. Elmquist

In this issue, Spiegel and colleagues raise much food for thought (so to speak). If their findings on changes in leptin and ghrelin during sleep deprivation are reproducible and generalizable, and if these hormonal changes cause changes in food intake over time, we may add inadequate sleep to the environmental factors that contribute to weight gain and obesity.

ON BEING A DOCTOR

**A Rose for Dr. Martin** 887

M.J. Schott

One day after my lecture during morning report, Dr. Martin approached me. She said, "I'm going to teach you how to read an EKG." I was shocked that she would take time out of her busy day to teach me. It seemed almost sacrilegious to me, like a master magician sharing her art with a member of the audience.

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