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ARTICLES

Accuracy of Screening for Fecal Occult Blood on a Single Stool Sample Obtained by Digital Rectal Examination: A Comparison with Recommended Sampling Practice 81

J.F. Collins, D.A. Lieberman, T.E. Durbin, D.G. Weiss, and the Veterans Affairs Cooperative Study #380 Group

A fecal occult blood test (FOBT) on a single sample of stool obtained by digital rectal examination is a poor method for screening for colorectal neoplasia. The test detects only 4.9% of patients with advanced colonic neoplasia, and its negative likelihood ratio is 0.98. Physicians should recommend FOBT on 6 samples obtained at home or another type of screening test.

Summary for Patients 1-23

A National Survey of Primary Care Physicians' Methods for Screening for Fecal Occult Blood 86

M.R. Nadel, J.A. Shapiro, C.N. Klabunde, L.C. Seeff, R. Uhler, R.A. Smith, and D.F. Ransohoff

This survey shows that many physicians use screening and follow-up practices that are contrary to practice guidelines. About 33% of physicians exclusively use a single sample obtained in the office for a fecal occult blood test (FOBT). After a positive FOBT result, many physicians perform either a follow-up FOBT or sigmoidoscopy rather going directly to colonoscopy, as recommended.

Summary for Patients 1-26

A Randomized Trial of a Strategy for Increasing High-Density Lipoprotein Cholesterol Levels: Effects on Progression of Coronary Heart Disease and Clinical Events 95

E.J. Whitney, R.A. Krasuski, B.E. Personius, J.E. Michalek, A.M. Maranian, M.W. Kolasa, E. Monick, B.G. Brown, and A.M. Gotto Jr.

The authors compared a combination drug regimen designed to increase high-density lipoprotein cholesterol levels (gemfibrozil, niacin, and cholestyramine) plus counseling about diet and exercise to counseling alone. The drug regimen improved cholesterol profiles; slowed angiographic progression of coronary stenosis; reduced cardiovascular events; and led to more skin rashes, flushing, and abdominal symptoms.

Summary for Patients 1-46

Antiviral Therapy for Cirrhotic Hepatitis C: Association with Reduced Hepatocellular Carcinoma Development and Improved Survival 105

Y. Shiratori, Y. Ito, O. Yokosuka, F. Imazeki, R. Nakata, N. Tanaka, Y. Arakawa, E. Hashimoto, K. Hirota, H. Yoshida, Y. Ohashi, and M. Omata, for the Tokyo-Chiba Hepatitis Research Group

Cirrhotic patients with chronic hepatitis C, including those whose infection had been cured, are at risk for developing hepatocellular carcinoma. In this nonrandomized study, patients who received interferon therapy had a lower incidence of hepatocellular carcinoma and improved survival compared with patients who declined to receive interferon.

Summary for Patients 1-51

IMPROVING PATIENT CARE

The Cognitive Psychology of Missed Diagnoses 115

D.A. Redelmeier

This paper, part of the Quality Grand Rounds series, discusses a patient whose ultimate diagnosis of osteomyelitis was missed through a series of cognitive errors. These errors include judging the likelihood of a disease by how easily examples of it spring to mind, sticking with initial impressions, and making different decisions depending on how information is presented.

My Right Knee 121

D.M. Berwick

My right knee will probably need to be replaced soon. This has given me the opportunity to define, in very personal terms, 5 specific dimensions of "total quality" that I will require from the medical institution that does my surgery and that all patients have the right to require of their encounters with the health care system. Don't kill me (no needless deaths). Do help me, and don't hurt me (no needless pain). Don't make me feel helpless. Don't keep me waiting. And don't waste resources, mine or anyone else's.

UPDATE

Update in Endocrinology 126

J.A. Schlechte

This year's Update in Endocrinology incorporates articles on diabetes, thyroid disorders, osteoporosis, adrenal incidentalomas, and women's health.

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REVIEW

Narrative Review: Pharmacotherapy for Chronic Heart Failure: Evidence from Recent Clinical Trials 132

A.T. Yan, R.T. Yan, and P.P. Liu

Clinical trials over the past 2 decades have revolutionized the care of patients with systolic heart failure. Substantial evidence supports the use of angiotensin-converting enzyme inhibitors, β -blockers, angiotensin-receptor blockers, and aldosterone blockers for managing this serious condition. This article reviews the evidence on the pharmacologic treatment of heart failure, with emphasis on recent clinical trials.

Summary for Patients 1-53

EDITORIALS

Office-Based Testing for Fecal Occult Blood: Do Only in Case of Emergency 146

H.C. Sox

Despite the recent emergence of several proven screening tests, the colorectal cancer death rate has been declining at the same rate since 1970. Two articles in this issue identify a potential explanation: Clinicians are using a poor test to detect fecal occult blood instead of the tests that the evidence supports. Nadel and colleagues show that many physicians use a screening method that the article by Collins and colleagues entirely discredits.

Mainstream and Alternative Medicine: Converging Paths Require Common Standards 149

S. Bondurant and H.C. Sox

Ignoring complementary and alternative medicine (CAM) is not an option. The widespread use of CAM by patients is a mandate to the scientific community to improve our relatively weak scientific understanding of CAM practices. Moreover, health professionals have a duty to their patients to bring these two worlds of contemporary medical practice

closer together. The path to this outcome begins with adopting the same standards of evidence.

ON BEING A DOCTOR

A Home Visit 151

T. Bishop

I know that chart. It's the thick one that screams of too many years and problems at the clinic. It has numerous papers falling out because the holes are torn from use. I already know the name that is written on the front cover in large block letters; Mrs. Aranja is back, and my afternoon will be spent fighting over her symptoms and medications.

LETTERS

Comments and Responses

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M.E. Nassar; K.L. Cohen; C.K. Francis

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M.A. Patmas; E.A. Kerr and C.M. Mangione

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I. Hwang and R.K.H. Wong; P.J. Pickhardt

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