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ARTICLES

Statin and β -Blocker Therapy and the Initial Presentation of Coronary Heart Disease 229

A.S. Go, C. Iribarren, M. Chandra, P.V. Lathon, S.P. Fortmann, T. Quertermous, and M.A. Hlatky, for the Atherosclerotic Disease, Vascular Function and Genetic Epidemiology (ADVANCE) Study

This case-control study of 1384 adults from a large prepaid group practice evaluated the effect of current use of statins or β -blockers at first presentation of coronary heart disease. Use of these drugs was associated with lower odds of presenting with an acute myocardial infarction and higher odds of presenting with stable angina. Additional studies are needed to prove that these therapies protect against unstable, higher-risk clinical presentations of coronary disease.

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Zoledronic Acid Prevents Bone Loss after Liver Transplantation. A Randomized, Double-Blind, Placebo-Controlled Trial 239

B.A.L. Crawford, C. Kam, J. Pavlovic, K. Byth, D.J. Handelsman, P.W. Angus, and G.W. McCaughan

Clinically important rapid bone loss occurs within 3 to 6 months after liver transplantation and may be associated with osteoporotic fractures. In this clinical trial, bone mineral density decreased during the postoperative period in patients taking placebo but did not change in patients taking zoledronic acid.

Summary for Patients 1-37

Preclinical Carotid Atherosclerosis in Patients with Rheumatoid Arthritis 249

M.J. Roman, E. Moeller, A. Davis, S.A. Paget, M.K. Crow, M.D. Lockshin, L. Sammaritano, R.B. Devereux, J.E. Schwartz, D.M. Levine, and J.E. Salmon

Rheumatoid arthritis is associated with increased morbidity and mortality due to cardiovascular disease. In this matched, cross-sectional study, patients with rheumatoid arthritis had a somewhat more favorable cardiovascular risk profile than the controls. Nonetheless, patients with rheumatoid arthritis had a much higher prevalence of preclinical atherosclerosis of the carotid artery than did the matched controls.

Summary for Patients 1-38

Brief Communication: Better Ways To Question Patients about Adverse Medical Events. 257

A Randomized, Controlled Trial

S. Bent, A. Padula, and A.L. Avins

In an existing clinical trial, 214 men were divided into 3 groups to measure the effect of 3 methods to assess adverse events: an open-ended question; an open-ended, defined question; and a checklist of 53 common side effects. The checklist group was much more likely to report an adverse event (14%, 13%, and 77%, respectively). Researchers should use the same method to assess adverse events in clinical trials.

IMPROVING PATIENT CARE

Volume, Quality of Care, and Outcome in Pneumonia 262

P.K. Lindenauer, R. Behal, C.K. Murray, W. Nsa, P.M. Houck, and D.W. Bratzler

In this study of the annual pneumonia caseload of physicians and hospitals, the number of cases was not a powerful determinant of quality of care or outcome. Higher volume was associated with lower adherence to guideline recommendations. The best targets for quality improvement efforts were the timeliness of antibiotic administration, especially at high-volume institutions, and hospital-based vaccination rates.

REVIEW

Systematic Review: A Century of Inhalational Anthrax Cases from 1900 to 2005 270

J.-E.C. Holty, D.M. Bravata, H. Liu, R.A. Olshen, K.M. McDonald, and D.K. Owens

Despite advances in supportive care, fulminant-phase inhalational anthrax is usually fatal. Initiation of antibiotic or anthrax antiserum therapy during the prodromal phase is associated with markedly improved survival, although other aspects of care, differences in clinical circumstances, or unreported factors may also have some effect. Earlier diagnosis and faster initiation of appropriate antibiotics are critical to decreasing mortality rates.

UPDATE

Update in Nephrology and Hypertension 281

P.L. Kimmel

This Update includes papers that presented a new way of classifying chronic kidney disease, established a new association between chronic kidney disease and the

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metabolic syndrome, and compared the equations that are used to define chronic kidney disease. The Update also discusses noteworthy research on the prevention and treatment of diabetic nephropathy, hyperkalemia, and the prevention of contrast agent-induced nephropathy.

HISTORY OF MEDICINE

John Loesch, Discoverer of Renovascular Hypertension, and Harry Goldblatt: Two Great Pioneers in Circulation Research 286

B. Glodny and D.E. Glodny

In 1934, Harry Goldblatt and colleagues published a landmark article: "The Production of Persistent Elevation of Systolic Blood Pressure by Means of Renal Ischemia." One year earlier, John Loesch had published a similar study in a German-language journal. The central proposition of both papers was the same: Renal ischemia causes persistent hypertension. Although Loesch was the first to produce persistent hypertension by inducing ischemia, his work is essentially unknown. Loesch and Goldblatt deserve equal credit for these important first observations.

EDITORIALS

Can Preventive Therapy Alter the Initial Presentation of Coronary Heart Disease? 296

S.C. Smith Jr.

In this issue, Go and colleagues suggest that the use of statin and β -blocker therapy might favorably alter the initial clinical presentation of coronary heart disease. We need to perform randomized clinical trials to confirm these findings in appropriate patient groups and investigate their mechanisms. If confirmed by such trials, these findings could have a substantial effect on patient care.

Adverse Events: The More You Search, the More You Find 298

J.P.A. Ioannidis, C.D. Mulrow, and S.N. Goodman

Physicians rely on compendia and product inserts to learn about medication-related harms. These materials offer litany of possible adverse events, sometimes accompanied by an estimate of how often those events might occur. From whence are the estimates derived? What do they really mean? How can we better measure and understand how many and what kinds of harms may be caused by medications? In this issue, Bent and colleagues remind us that how we define and look for problems markedly affects the numbers of harms that patients report.

ON BEING A DOCTOR

First Response 301

J.O. Neher

I was driving home late one night when suddenly a dozen red taillights flashed in front of me. I hit my brakes. In my peripheral vision, I caught sight of a pile of clothing lying in the center lane. At first I thought that it was just some garbage that had come off the back of a truck. But as I rolled slowly past, I developed a sickening feeling. The clothing was not arranged randomly. It was held together in some dimly recognizable order.

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That Intern Dream 308

J. Coulehan

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