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17 October 2006 145 8 557-636

ARTICLES

The Effect of a Nonabsorbed Oral Antibiotic (Rifaximin) on the Symptoms of the Irritable Bowel Syndrome. A Randomized Trial 557

M. Pimentel, S. Park, J. Mirocha, S.V. Kane, and Y. Kong
In this double-blind trial, 87 patients with the irritable bowel syndrome were randomly assigned to either rifaximin (400 mg 3 times daily) or placebo for 10 days. Over a 10-week follow-up period, the rifaximin recipients reported global improvements in overall symptoms and less bloating more frequently than the placebo recipients. No major differences in abdominal pain, diarrhea, or constipation were observed between the groups.

Summary for Patients I-24

High Incidence of New Sexually Transmitted Infections in the Year following a Sexually Transmitted Infection: A Case for Rescreening 564

T.A. Peterman, L.H. Tian, C.A. Metcalf, C.L. Satterwhite, C.K. Malotte, N. DeAugustine, S.M. Paul, H. Cross, C.A. Rietmeijer, and J.M. Douglas Jr., for the RESPECT-2 Study Group
Among patients treated for sexually transmitted infections, 25.8% of women and 14.7% of men acquired 1 or more new infections with *Chlamydia trachomatis*, *Neisseria gonorrhoeae*, or *Trichomonas vaginalis* during 1 year of follow-up. Approximately 66% of reinfections were asymptomatic.

Summary for Patients I-44

Is Subclinical Thyroid Dysfunction in the Elderly Associated with Depression or Cognitive Dysfunction? 573

L.M. Roberts, H. Pattison, A. Roalfe, J. Franklyn, S. Wilson, F.D.R. Hobbs, and J.V. Parle
The authors studied 5868 general practice patients 65 years of age or older with a detailed medical history, thyroid tests, and standardized tests of cognition and mood. Two hundred ninety-five patients had subclinical thyroid dysfunction. The authors found no association between subclinical thyroid dysfunction and anxiety, depression, or cognitive impairment.

Summary for Patients I-52

Device-Associated Nosocomial Infections in 55 Intensive Care Units of 8 Developing Countries 582

V.D. Rosenthal, D.G. Maki, R. Salomao, C. Álvarez-Moreno, Y. Mehta, F. Higuera, L.E. Cuellar, Ö.A. Arikan, R. Abouqal, and H. Leblebicioglu, for the International Nosocomial Infection Control Consortium

Prospective surveillance of 21 069 patients hospitalized in 55 intensive care units in 46 hospitals in Central and South America, India, Morocco, and Turkey showed high rates (22.5 infections per 1000 intensive care unit days) of device-associated infections. Infections included ventilator-associated pneumonia (41%), central venous catheter-related bloodstream infections (30%), and catheter-associated urinary tract infections (29%).

IMPROVING PATIENT CARE

Graduate Medical Education and Patient Safety: A Busy—and Occasionally Hazardous—Intersection 592

K.G. Shojania, K.E. Fletcher, and S. Saint
This paper, the last in the Quality Grand Rounds series, discusses a patient who died after admission to a teaching hospital with a mild episode of acute pancreatitis. This case, in which diagnostic delay was compounded by poor communication, highlights the hazards of patient handoffs as well as the importance of clear communication techniques and knowing when to ask for help. The discussion also shows the vicious circle that results when attending physicians fail to provide effective supervision.

REVIEWS

Meta-Analysis: Convalescent Blood Products for Spanish Influenza Pneumonia: A Future H5N1 Treatment? 599

T.C. Luke, E.M. Kilbane, J.L. Jackson, and S.L. Hoffman
This review of 8 controlled studies published in English-language medical literature between 1918 to 1925 found that transfusion with influenza-convalescent human blood products may have reduced risk for death in hospitalized patients with Spanish influenza complicated by pneumonia.

Narrative Review: Reperfusion Strategies for ST-Segment Elevation Myocardial Infarction 610

H.H. Ting, E.H. Yang, and C.S. Rihal
Optimal treatment for ST-segment elevation myocardial infarction depends on early diagnosis and rapid selection of

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the appropriate reperfusion strategy. Primary percutaneous coronary intervention (PCI) is the preferred reperfusion strategy at PCI-capable hospitals, but transferring patients to a hospital that does primary PCI may cause clinically important delays. The authors present a systematic, evidence-based approach to selecting a reperfusion strategy.

UPDATE

Update in Cardiology 618

E. Rapaport

This Update in Cardiology features 13 articles published in 2005, focusing on hypertension, diabetes and cardiovascular disease, acute myocardial infarction, and heart failure.

EDITORIALS

Treatment for Bacterial Overgrowth in the Irritable Bowel Syndrome 626

D.A. Drossman

In this issue, Pimentel and colleagues evaluated the efficacy of a newer broad-spectrum nonabsorbable antibiotic, rifaximin, for the irritable bowel syndrome (IBS), measuring clinical response for up to 10 weeks after treatment. They concluded that rifaximin treatment for 10 days showed greater global improvement than placebo. Demonstrating sustained benefit from a short course of an antibiotic in unselected patients with IBS is certainly novel and important. However, several methodologic concerns stand in the way of drawing firm conclusions from the study.

Quality Grand Rounds: The Case for Patient Safety 629

R.M. Wachter, K.G. Shojania, A.J. Markowitz, M. Smith, and S. Saint

This issue contains the 13th and final article in the Quality Grand Rounds series. We end the series with profound thanks to the many physicians, nurses, pharmacists, administrators, and patients who shared their stories with us

in the hope that doing so might prevent another error. We hope that the cases have not only been useful for their specific content but that they have encouraged institutions and providers to use their own cases to ensure that patients receive safe, high-quality care.

Avian Influenza: Exploring All the Avenues 631

J.J. Treanor

In this issue, Luke and colleagues analyze 8 studies that evaluated the effects of therapy with serum or plasma from convalescent patients on the course of clinically diagnosed influenza pneumonia during the 1918 Spanish influenza pandemic. The quality of these studies was relatively poor by modern standards. However, all 8 supported the hypothesis that passive serotherapy was useful in treating Spanish influenza. Would a similar approach be effective and feasible in the event of a pandemic of H5N1 influenza?

LETTERS

Comments and Responses

Green Tea, Coffee, and Diabetes 633

R. Chen; T.O. Cheng; L. Mascitelli and F. Pezzetta; R.M. van Dam; H. Iso

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Correction: Patients' Global Ratings of Their Health Care Are Not Associated with the Technical Quality of Their Care 635

Cover photograph by Hamayun Nawaz

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