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ARTICLES

Anxiety Disorders in Primary Care: Prevalence, Impairment, Comorbidity, and Detection 317

K. Kroenke, R.L. Spitzer, J.B.W. Williams, P.O. Monahan, and B. Löwe

Anxiety is as common as depression; however, it has received less attention and is often undetected and undertreated. The authors administered a 7-item anxiety scale to 965 primary care patients, who also had a structured interview to detect an anxiety disorder. Of these patients, 19.5% had at least 1 anxiety disorder. Patients with anxiety had worse functional status, more disability days, and more physician visits, but 41% were not being treated for an anxiety disorder. The anxiety scale had high sensitivity and good specificity for detecting 4 common anxiety disorders.

Summary for Patients 1-16

Effect of Recombinant Human Parathyroid Hormone (1-84) on Vertebral Fracture and Bone Mineral Density in Postmenopausal Women with Osteoporosis. A Randomized Trial 326

S.L. Greenspan, H.G. Bone, M.P. Ettinger, D.A. Hanley, R. Lindsay, J.R. Zanchetta, C.M. Blosch, A.L. Mathisen, S.A. Morris, and T.B. Marriott, for the Treatment of Osteoporosis with Parathyroid Hormone Study Group

To determine the safety of parathyroid hormone (PTH) and its effect on the incidence of vertebral fractures in postmenopausal women with osteoporosis, the authors randomly assigned 2532 postmenopausal women with osteoporosis to receive PTH or placebo. Parathyroid hormone decreased new vertebral fractures. However, the amount of reduction in risk is uncertain because one third of participants prematurely withdrew from the trial. Adverse effects included hypercalciuria, hypercalcemia, and nausea.

Summary for Patients 1-20

Meta-analysis: New Tests for the Diagnosis of Latent Tuberculosis Infection: Areas of Uncertainty and Recommendations for Research 340

D. Menzies, M. Pai, and G. Comstock

In this meta-analysis, the authors compared 2 commercially licensed interferon- γ release assays (IGRAs) with the tuberculin skin test. They found 59 relevant studies. No test distinguished active tuberculosis from latent tuberculosis or had high sensitivity for active tuberculosis; IGRAs were more specific than the tuberculin skin test in patients who had been vaccinated with bacille Calmette-Guérin; and the

results of IGRAs and the tuberculin skin test were frequently discordant. The new tests are promising because of their good specificity, but their role is still uncertain.

ACADEMIA AND CLINIC

The Declining Number and Variety of Procedures Done by General Internists: A Resurvey of Members of the American College of Physicians 355

R.S. Wigton and P. Alguire

A survey of general internist members of the American College of Physicians in 1986 found that internists did a large number and variety of procedures in their practices. The authors repeated this survey in 2004. Both the number and variety of procedures have decreased considerably since 1986. As in the earlier survey, general internists who practice in smaller cities and smaller hospitals and those who spend more hours in patient care perform more procedures. These findings raise questions about when to teach procedural skills: during internal medicine residency or later while in active practice.

CLINICAL GUIDELINES

Routine Aspirin or Nonsteroidal Anti-inflammatory Drugs for the Primary Prevention of Colorectal Cancer: U.S. Preventive Services Task Force Recommendation Statement 361

U.S. Preventive Services Task Force

The U.S. Preventive Services Task Force recommends against the routine use of nonsteroidal anti-inflammatory drugs to prevent colorectal cancer in individuals at average risk.

Summary for Patients 1-35

The Use of Aspirin for Primary Prevention of Colorectal Cancer: A Systematic Review Prepared for the U.S. Preventive Services Task Force 365

C. Dubé, A. Rostom, G. Lewin, A. Tsertsvadze, N. Barrowman, C. Code, M. Sampson, and D. Moher

This systematic review provides the background information for the U.S. Preventive Services Task Force statement on the use of aspirin and nonsteroidal anti-inflammatory drugs to prevent colorectal cancer. Two independent reviewers conducted multilevel screening to identify randomized, controlled trials; case-control studies; and cohort studies of aspirin chemoprophylaxis. Although aspirin seems to reduce

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the incidence of colonic adenoma and colorectal cancer, the possible harms of prophylaxis require careful consideration.

Summary for Patients 1-35

Nonsteroidal Anti-inflammatory Drugs and Cyclooxygenase-2 Inhibitors for the Primary Prevention of Colorectal Cancer: A Systematic Review Prepared for the U.S. Preventive Services Task Force 376

A. Rostom, C. Dubé, G. Lewin, A. Tsertsvadze, N. Barrowman, C. Code, M. Sampson, and D. Moher

In this article, Rostom and colleagues examined the benefits and harms of nonaspirin nonsteroidal anti-inflammatory drugs (NSAIDs) and cyclooxygenase (COX)-2 inhibitors for the prevention of colorectal cancer and adenoma. Although COX-2 inhibitors and NSAIDs reduce the incidence of colonic adenomas, they are associated with important cardiovascular and gastrointestinal harms.

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EDITORIALS

Anxiety Disorders: Efficient Screening Is the First Step in Improving Outcomes 390

W. Katon and Roy-Byrne

In this issue, Kroenke and colleagues discuss 4 important findings about anxiety disorders in primary care: 1) the high prevalence of the 4 most common anxiety disorders; 2) the association of these disorders with high levels of comorbid depression, somatic symptom burden, functional impairment, and medical care utilization; 3) 2 brief screening questionnaires can efficiently screen for all 4 disorders; and 4) more than 40% of patients with an anxiety disorder say that they are not receiving mental health treatment.

What Procedures Should Internists Do? 392

F.D. Duffy and E.S. Holmboe

In this issue, Wigton and Alguire ask whether practicing internists perform the bedside procedures they were trained to do. The answer is, they are not: On average, internists perform 50% fewer procedures than they did 18 years ago. Much of the decline has resulted from the advent of specialty laboratories that can offer better quality service to

patients. Internists should know how to do some procedures and do them well. However, in deciding which procedures to do and which to delegate, the patient's right to the best quality care trumps all.

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IN THE CLINIC

Peripheral Arterial Disease ITC3-1

The third issue of In the Clinic provides a clinical overview of peripheral arterial disease, focusing on prevention, screening, diagnosis, treatment, and practice improvement. Readers can complete the accompanying CME quiz for 1.5 credits.

Cover photograph by Peter Graber, MD

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