

CONTENTS *Annals of Internal Medicine*

7 August 2007 147 3 149-216

ARTICLES

Mortality Trends in Men and Women with Diabetes, 1971 to 2000 149

E.W. Gregg, Q. Gu, Y.J. Cheng, K.M.V. Narayan, and C.C. Cowie

Gregg and colleagues used data from follow-up studies of the 1971 to 2000 National Health and Nutrition Examination Survey cohorts to measure cardiovascular mortality in diabetic and nondiabetic persons. Over 3 decades, mortality rates fell progressively in diabetic and nondiabetic men and in nondiabetic women, but they remained stable in diabetic women. The mortality difference between diabetic and nondiabetic women more than doubled. Diabetic women have not shared in the benefits of improved care for diabetes and cardiovascular disease.

Summary for Patients I-10

Geriatric Conditions and Disability: The Health and Retirement Study 156

C.T. Cigolle, K.M. Langa, M.U. Kabeto, Z. Tian, and C.S. Blaum
Geriatric conditions, such as incontinence and falls, are common in older people and are associated with disability. However, clinicians are much less likely to provide adequate care for these conditions than for common diseases. Using national survey data, the authors found that almost half of older U.S. adults had geriatric conditions. The frequency of these conditions increases with advancing age. Some conditions are as prevalent as common diseases, such as heart disease. Having a geriatric condition is strongly associated with dependency in activities of daily living.

A Red Blood Cell Agglutination D-Dimer Test to Exclude Deep Venous Thrombosis in Pregnancy 165

W.S. Chan, S. Chunilal, A. Lee, M. Crowther, M. Rodger, and J.S. Ginsberg

Because D-dimer levels increase in pregnancy, it was thought that D-dimer testing is less accurate for diagnosing venous thromboembolism in pregnant women than in nonpregnant women. In this observational cohort study of 149 pregnant women, a D-dimer assay identified all 13 women with deep venous thrombosis (DVT) (100% sensitivity). However, the small number of women with DVT means that the D-dimer sensitivity is subject to considerable statistical uncertainty, and the true value could be as low as 70%. Therefore, in pregnant women with a high pretest probability of DVT, a negative D-dimer test result may not rule out DVT.

REVIEW

Narrative Review: Cardiopulmonary Resuscitation and Emergency Cardiovascular Care: Review of the Current Guidelines 171

B. Ali and A.M. Zafari

The authors review the latest American Heart Association guidelines for cardiopulmonary resuscitation and emergency cardiovascular care. The algorithms for basic life support and advanced cardiovascular life support have changed substantially since 2000. For unwitnessed cardiac arrest, the guidelines no longer recommend immediate defibrillation; cardiac arrest victims should no longer receive stacked shocks; and the recommended compression-ventilation ratio has changed. Outcomes of in-hospital and out-of-hospital cardiac arrest have improved with use of automated external defibrillators, and defibrillators that use a biphasic waveform have improved first-shock efficacy over defibrillators that use a monophasic waveform. Amiodarone is effective in shock-refractory ventricular tachycardia and ventricular fibrillation.

UPDATE

Update in Cardiology 180

R.L. Frye

This Update in Cardiology features 11 articles published in 2006. Topics include ischemic heart disease, atrial fibrillation and arrhythmias, and cardiovascular drugs.

CLINICAL GUIDELINES

Counseling about Proper Use of Motor Vehicle Occupant Restraints and Avoidance of Alcohol Use while Driving: U.S. Preventive Services Task Force Recommendation Statement 187

U.S. Preventive Services Task Force

The 1996 U.S. Preventive Services Task Force recommendation addressed primary care interventions to increase the use of motor vehicle occupant restraints. The current recommendation focuses on the independent role of primary care interventions to increase the proper use of child safety seats, booster seats, and lap-and-shoulder belts to prevent motor vehicle occupant injuries. The recommendations also address the effectiveness of primary care counseling to prevent alcohol-related motor vehicle accidents.

Summary for Patients I-32

Continued on page I-6

**Counseling about Proper Use of Motor Vehicle
 Occupant Restraints and Avoidance of Alcohol Use
 while Driving: A Systematic Evidence Review for the
 U.S. Preventive Services Task Force** 194

S.B. Williams, E.P. Whitlock, E.A. Edgerton, P.R. Smith, and
 T.L. Beil

This evidence update supports the U.S. Preventive Services
 Task Force recommendations on the proper use of motor
 vehicle occupant restraints and alcohol use to prevent injury.

Summary for Patients I-32

EDITORIAL

**Heightened Cardiovascular Risk in Diabetic Women:
 Can the Tide Be Turned?** 208

N.K. Wenger

We lack an evidence-based comprehensive strategy for
 improving cardiovascular outcomes in diabetic women. Until
 we have one, a prudent clinical approach involves 2 steps.
 First, we must recognize that diabetic women are at excess
 risk for coronary heart disease (CHD). In addition, we must
 take an aggressive, guideline-based approach to CHD risk
 factor management.

ON BEING A DOCTOR

Memories of Chicago 210

J.M. Clark

For me, it all began one autumn day in 1950, during my
 third year of medical school. We had studied obstetrics for a
 full semester, after which the University of Wisconsin sent us
 to spend a month at a place called "The Chicago Maternity
 Center." Our mission was to deliver babies in the homes of
 the inhabitants of the south side of Chicago.

AD LIBITUM

Nelson, 14–16 March, Med. School Class Reunion 207
 R. Varcoe

Time on the Gulf of Mexico 210
 J. Latzman

LETTERS

Comments and Responses

**Insurance Coverage and Care of Patients with
 Non–ST-Segment Elevation Acute Coronary Syndromes** 212
 J.S. Ross; J.E. Calvin, M.T. Roe, and E.D. Peterson

Complications of Colonoscopy 212
 W.M. McDonnell and F. Loura; T.R. Levin

BiDil for Heart Failure in Black Patients 214
 K. Bibbins-Domingo and A. Fernandez; J.D. Kahn;
 R. Temple and N.L. Stockbridge

IN THE CLINIC

Osteoarthritis ITC8-1

This issue provides a clinical overview of osteoarthritis,
 focusing on prevention, diagnosis, treatment, practice
 improvement, and patient information. Readers can
 complete the accompanying CME quiz for 1.5 credits.

Cover photograph by Jeffrey M. Levine, MD

Authors' Form I-16

Classified Services Begin on I-25

Subscription and Business Information I-40