

# This Week in the Journal

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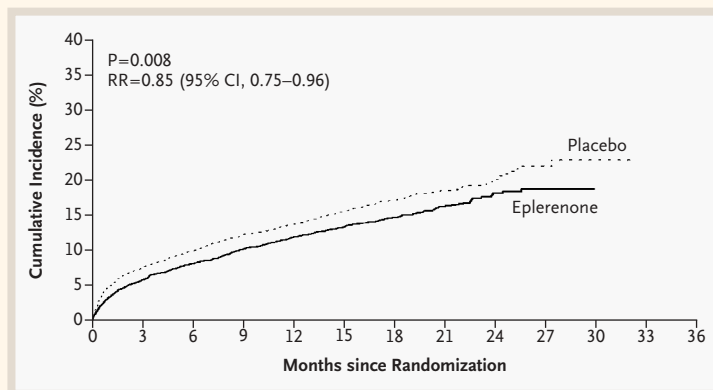
ORIGINAL ARTICLE

## Eplerenone, an Aldosterone Blocker, after Myocardial Infarction

Blockade of aldosterone receptors with spironolactone is beneficial in patients with chronic heart failure. This study evaluated eplerenone, a selective aldosterone blocker, in patients with left ventricular dysfunction and heart failure after myocardial infarction. Eplerenone reduced overall and cardiovascular mortality by about 15 percent.

**Aldosterone blockade is a novel approach to the treatment of heart failure. The new study extends the benefit to the large group of patients with myocardial infarction and ventricular dysfunction, an important therapeutic advance.**

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ORIGINAL ARTICLE

## Vaccination against Influenza and Reductions in Hospitalization

In three large managed-care plans, about 58 percent of the members who were at least 65 years old received the influenza vaccine. During both the 1998–1999 and 1999–2000 influenza seasons, those who were vaccinated had a significantly lower risk of hospitalization for cardiac disease, cerebrovascular disease, and influenza and pneumonia than unvaccinated subjects. Vaccination was also associated with a lower risk of death from any cause.

**In this observational study with data on more than 286,000 people, those receiving the influenza vaccine had on average more coexisting conditions at base line. Vaccination is thus associated with substantial benefits, such as lowering the risk of hospitalization for cardiac and cerebrovascular disease.**

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ORIGINAL ARTICLE

## Memantine in Moderate-to-Severe Alzheimer's Disease

Overstimulation of the N-methyl-D-aspartate (NMDA) receptor by glutamate is implicated in neurodegenerative disorders. This 28-week study compared memantine, an NMDA-receptor antagonist, with placebo in persons with moderate-to-severe Alzheimer's disease. Among the patients who completed the study, memantine appeared to confer benefit in terms of activities of daily living and other measures; analysis of the last observation carried forward for the whole group supported this conclusion.

**Antiglutamatergic therapy may prove helpful in slowing the rate of decline in moderate-to-severe Alzheimer's disease.**

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## THIS WEEK IN THE JOURNAL

## BRIEF REPORT

**Vancomycin-Resistant  
*Staphylococcus aureus***

Vancomycin-resistant *S. aureus* was cultured from the exit site of a temporary dialysis catheter of a patient with diabetes, peripheral vascular disease, and persistent foot ulcers. The organism carried the *vanA* resistance gene, which may have come from the vancomycin-resistant *Enterococcus faecalis* that was also isolated from the patient, who had received vancomycin for several weeks.

Although this patient was infected with vancomycin-resistant *S. aureus*, none of her contacts seem to have acquired the resistant bacterium. This case prompts concern because vancomycin has been a uniformly effective treatment for staphylococcal infections.

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## SPECIAL ARTICLE

**Evacuating Hospitals  
after a Major Earthquake**

After the Northridge, California, earthquake in 1994, eight acute care hospitals evacuated some or all patients. Investigators conducted direct interviews with hospital staff members involved in the emergency to assess the process of evacuation. Six hospitals evacuated patients immediately because of nonstructural damage that included water damage and loss of electric power. Two hospitals evacuated patients later, when major structural damage was identified.

This experience in southern California may have implications for the development of plans for hospitals to respond to any sudden, major disaster.

SEE PAGE 1349; PERSPECTIVE, PAGE 1307

## GENOMIC MEDICINE

**Alzheimer's and Parkinson's Disease**

Although most cases of Alzheimer's and Parkinson's disease are sporadic, some cases are clearly familial. This review, part of the Genomic Medicine series, examines the genetics of these familial forms. Although the inherited forms are rare, the knowledge derived from investigating their pathobiology has improved our understanding of the pathobiology of the more common, sporadic forms of the diseases.

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## MECHANISMS OF DISEASE

**Apoptosis and Caspases  
in Neurodegenerative Diseases**

A form of cell death called apoptosis is a prominent feature in a broad spectrum of neurodegenerative diseases, ranging from stroke to Huntington's disease. Hypoxia, toxic cytokines, damage to mitochondria, and noxious peptides are capable of inducing apoptosis; each of these mechanisms can account for the death of specific types of neurons in neurodegenerative diseases. Pharmacologic interference with the induction or completion of apoptosis holds promise for the treatment of these disorders, and clinical trials with one such agent are already under way.

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## CORRESPONDENCE

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