

This Week in the Journal

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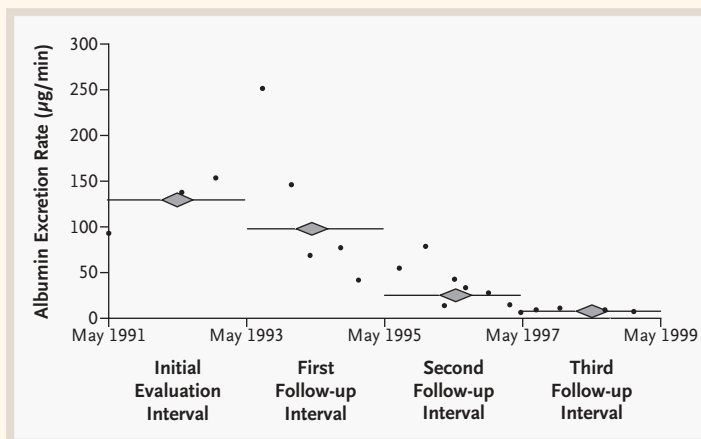
ORIGINAL ARTICLE

Regression of Microalbuminuria in Type 1 Diabetes

Microalbuminuria in type 1 diabetes has been thought to herald an inexorable process leading to overt proteinuria and progressive nephropathy. In this study of patients who had persistent microalbuminuria during an initial two-year evaluation period, 58 percent had regression of their microalbuminuria during the subsequent six years.

Frequent regression of microalbuminuria in type 1 diabetes indicates that elevated urinary albumin excretion does not inevitably lead to progressive nephropathy.

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ORIGINAL ARTICLE

Intensive Therapy and Carotid Intima-Media Thickness in Type 1 Diabetes

Carotid intima-media thickness is considered to be a measure of atherosclerosis. This study examined intima-media thickness in participants in the Diabetes Control and Complications Trial. Six years after the trial ended, the progression of intima-media thickness was significantly less in patients who had received intensive as compared with conventional therapy.

These data suggest that intensive treatment of diabetes reduces vascular complications through effects on blood-vessel walls.

SEE PAGE 2294; EDITORIAL, PAGE 2349

ORIGINAL ARTICLE

Screening Newborns for Inborn Errors of Metabolism by Tandem Mass Spectrometry

Routine screening of newborns by tandem mass spectrometry resulted in the diagnosis of more cases of inborn errors of metabolism than had been diagnosed clinically during earlier periods. In particular, medium-chain acyl-coenzyme A dehydrogenase deficiency (which can be fatal at initial presentation) and other disorders of fatty-acid oxidation were more commonly diagnosed by screening.

Early diagnosis of some inborn errors of metabolism by tandem mass spectrometry may save lives, but it remains unclear which infants whose disorders are diagnosed by screening would eventually become symptomatic and would therefore benefit from the earlier diagnosis.

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THIS WEEK IN THE JOURNAL

ORIGINAL ARTICLE

**Puberty and Genetic Susceptibility
to Breast Cancer in Twins**

This study involved more than 1900 pairs of twins in which one or both women had breast cancer. In monozygotic pairs in which both women had breast cancer, earlier puberty in one twin was a strong risk factor for an earlier diagnosis of breast cancer.

These findings are consistent with the hypothesis that the genetic risk of breast cancer is increased by early exposure to ovarian hormones.

SEE PAGE 2313; EDITORIAL, PAGE 2352

BRIEF REPORT

**Cardiac Transplantation
in an HIV-1–Infected Patient**

The advent of highly active antiretroviral therapy has greatly improved the long-term outcome of patients with human immunodeficiency virus (HIV) infection. This article reports successful cardiac transplantation in a patient infected with HIV type 1 (HIV-1) in whom heart failure had developed after daunorubicin therapy for Kaposi's sarcoma.

Given the limited supply of hearts available for transplantation, the medical community will need to discuss whether it is appropriate to consider HIV-infected patients routinely to be acceptable candidates for cardiac transplantation.

SEE PAGE 2323; PERSPECTIVE, PAGE 2279

CLINICAL PRACTICE

Microscopic Hematuria

An otherwise healthy 48-year-old woman is found to have microscopic hematuria (5 red cells per high-power field) on a urinalysis performed by a life insurance company. No other laboratory abnormalities are identified; the serum creatinine concentration is 0.8 mg per deciliter (70.7 μ mol per liter). The woman reports no symptoms and is a nonsmoker. Her blood pressure is 118/74 mm Hg, and the findings on physical examination are normal. How should she be evaluated?

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GENOMIC MEDICINE

Breast and Ovarian Cancer

Breast and ovarian cancers are among the most common cancers in women. It is known that a woman is at higher risk for breast or ovarian cancer if a family member has had the disease. This article in the Genomic Medicine series provides up-to-date information on the heritable factors associated with these tumors.

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CORRESPONDENCE

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