

# This Week in the Journal

JULY 24, 2003

VOL. 349 NO. 4

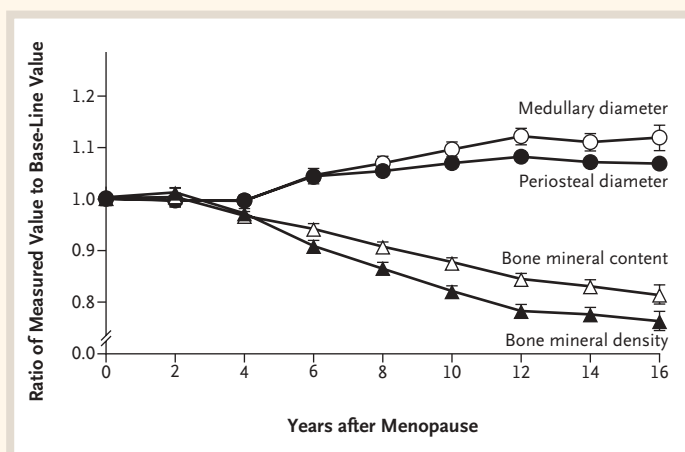
ORIGINAL ARTICLE

## Bone Loss and Bone Size after Menopause

Bone loss increases after menopause, yet bone strength depends on structural characteristics such as bone size. In this study, the bone mass and skeletal structure of the distal radius were evaluated by single-photon absorptiometry in 108 women, all of whom were followed from menopause for a mean of 15 years. During follow-up, the mean bone mineral density decreased and the medullary bone diameter and periosteal diameter increased annually. The bone-strength index decreased.

**Increased bone loss after menopause is associated with increased periosteal apposition, which partially preserves bone strength.**

SEE PAGE 327; PERSPECTIVE, PAGE 320



ORIGINAL ARTICLE

## Screening with the PSA Test

The failure to perform prostate biopsy in all members of a screened population affects the sensitivity and specificity of the measurement of prostate-specific antigen (PSA). Correction for verification bias with the use of a mathematical method revealed that the usual threshold value of 4.1 ng of PSA per milliliter for a recommendation of biopsy misses 82 percent of prostate cancers in men younger than 60 years and 65 percent in older men.

**The authors of this provocative study argue that the threshold for prostate biopsy should be lowered, perhaps to 2.6 ng of PSA per milliliter, especially for men under 60 years of age.**

SEE PAGE 335; EDITORIAL, PAGE 393

ORIGINAL ARTICLE

## Acquired von Willebrand Syndrome in Aortic Stenosis

Some patients with aortic stenosis have a bleeding tendency that may result, as this study shows, from an acquired form of von Willebrand syndrome. High shear forces at the stenotic valve change the shape of the von Willebrand protein, resulting in proteolysis, loss of the largest multimers, and reduction in platelet adhesion to the vascular endothelium.

**Because the clotting function improved after valve replacement, the authors suggest that a bleeding tendency may be an indication for valve replacement in selected patients with aortic stenosis.**

SEE PAGE 343; PERSPECTIVE, PAGE 323

## THIS WEEK IN THE JOURNAL

## ORIGINAL ARTICLE

**Epidermal Growth Factor Enemas to Treat Ulcerative Colitis and Proctitis**

This small, placebo-controlled, randomized trial evaluated the direct application of epidermal growth factor (EGF) and oral 5-aminosalicylic acid (a conventional therapy). After 2 weeks, most patients given EGF enemas were in remission, and they continued to do well at 4 and 12 weeks.

**These data prove the principle that ulcerative colitis and proctitis respond to locally applied EGF.**

SEE PAGE 350; EDITORIAL, PAGE 395

## SPECIAL ARTICLE

**Refusing Food and Drink to Hasten Death**

In Oregon, 102 hospice nurses reported having cared for a patient who decided to stop eating and drinking, usually because the patient was ready to die. Most of these patients died within 15 days, and most died without excess suffering.

**Although physician-assisted suicide is legal in Oregon, refusal of food and fluids may be a more common way by which patients choose to end their lives. Most who died this way did so peacefully.**

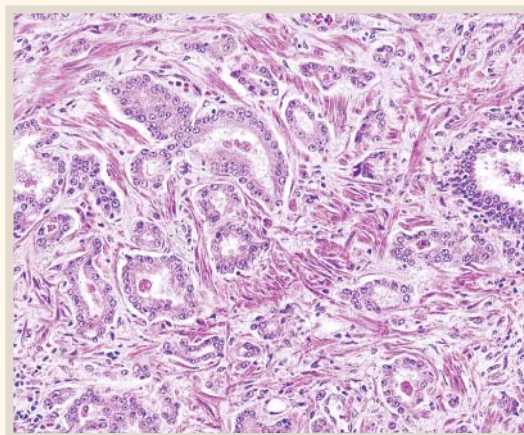
SEE PAGE 359; PERSPECTIVE, PAGE 325

## MECHANISMS OF DISEASE

**Prostate Cancer**

This review article discusses the ways in which the environment, diet, and genes contribute to the development of prostate cancer. Some dietary components increase the risk of prostate cancer, whereas others seem to be protective. Studies of familial prostate cancer are beginning to reveal genes that may have a role in the disease, but population studies have not yet pinpointed a major genetic factor. Prostatitis may have an important role in initiating the pathway to prostate cancer.

SEE PAGE 366



## CORRESPONDENCE

- |   |   |
|---|---|
| <p><b>398</b> Low-Intensity Warfarin Therapy to Prevent Recurrent Venous Thromboembolism</p> <p><b>401</b> An Association between Atherosclerosis and Venous Thrombosis</p> <p><b>402</b> Hemoglobin and Nitric Oxide</p> | <p><b>405</b> Management of Drug and Alcohol Withdrawal</p> <p><b>407</b> CD8+ T Lymphocytes in Bronchiolitis Obliterans, Paraneoplastic Pemphigus, and Castleman's Disease</p> |
|---|---|