The NEW ENGLAND JOURNAL of MEDICINE

This Week in the Journal

JULY 31, 2003
VOL. 349 NO. 5

ORIGINAL ARTICLE

Bevacizumab, an Anti–Vascular Endothelial Growth Factor Antibody, for Metastatic Renal Cancer

In this randomized trial, an antibody against vascular endothelial growth factor, bevacizumab, prolonged the time to progression of disease in patients with metastatic renal-cell cancer. There was no effect on survival.

Renal-cell cancers overproduce vascular endothelial growth factor, and the results of this trial suggest that the factor has importance in the progression of the disease.

SEE PAGE 427; PERSPECTIVE, PAGE 419

ORIGINAL ARTICLE

Cochlear Implants and the Risk of Meningitis

In this study, bacterial meningitis was identified in 26 children with cochlear implants, at an incidence far higher than that among other children. The risk was greatest with implants that included a Silastic wedge, which the manufacturers recalled in July 2002. The risk was also increased among children with inner-ear malformations or cerebrospinal fluid leaks.

The increased risk of meningitis has to be balanced against the great benefits that cochlear implants offer for many children with severe deafness. Appropriate vaccination is essential before implantation of these devices.

SEE PAGE 435; PERSPECTIVE, PAGE 421

ORIGINAL ARTICLE

Survival of Patients Undergoing Hemodialysis with Paricalcitol or Calcitriol Therapy

Elevated calcium and phosphorus levels associated with secondary hyperparathyroidism may accelerate vascular disease in patients undergoing long-term hemodialysis. This prospective but nonrandomized historical cohort study compared calcitriol, the standard injectable therapy, with paricalcitol, a new vitamin D analogue that causes less elevation of calcium. Paricalcitol was associated with a lower mortality rate than calcitriol (0.180 vs. 0.223 death per person-year).

The finding that paricalcitol confers a survival advantage in patients undergoing hemodialysis should be confirmed by prospective, randomized studies.

SEE PAGE 446; EDITORIAL, PAGE 496

THIS WEEK IN THE JOURNAL

BRIEF REPORT

Bisphosphonate-Induced Osteopetrosis

Bisphosphonates are increasingly used in conditions such as osteogenesis imperfecta and juvenile osteoporosis. Their potential adverse effects in growing children have been a concern, however, since bisphosphonates inhibit skeletal resorption by suppressing the activity and function of osteoclasts. The authors describe a case of drug-induced osteopetrosis in a 12-year-old boy who had received high doses of pamidronate for nearly three years.

In growing patients, excessive doses of bisphosphonates may compromise skeletal quality despite concomitant increases in bone density.

SEE PAGE 457; PERSPECTIVE, PAGE 423

CLINICAL PRACTICE

Selecting Asymptomatic Patients for Noninvasive Cardiac Testing

A healthy 40-year-old man exercises regularly, uses no tobacco, and has no cardiac symptoms. His blood pressure is 120/80 mm Hg, his total cholesterol concentration is 180 mg per deciliter, his high-density lipoprotein cholesterol concentration is 50 mg per deciliter, his body-mass index is 24, his fasting blood glucose concentration is 95 mg per deciliter, and he has no family history of coronary disease. Should he be advised to undergo coronary computed tomography or electrocardiographic exercise testing so that the assessment of his coronary risk may be refined?

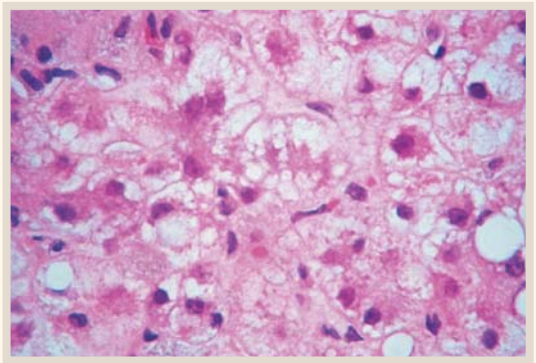
SEE PAGE 465

MEDICAL PROGRESS

Drug-Induced Hepatotoxicity

Drug-induced hepatic injury accounts for more than 50 percent of cases of acute liver failure in the United States. More than 75 percent of idiosyncratic drug reactions result in liver transplantation or death. This review discusses the pathogenesis of drug-induced liver injury, common adverse drug reactions involving the liver, and the drug-approval process. Monitoring for and recognition of drug-induced hepatotoxicity may prevent some cases of acute hepatic failure.

SEE PAGE 474



CORRESPONDENCE