

This Week in the Journal

AUGUST 28, 2003

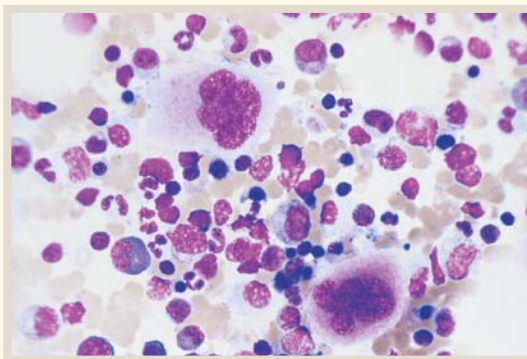
VOL. 349 NO. 9

ORIGINAL ARTICLE

High-Dose Dexamethasone in Immune Thrombocytopenic Purpura

In this study of the efficacy of a four-day course of high-dose dexamethasone for newly diagnosed immune thrombocytopenic purpura, the treatment response was sustained for two to five years in half of the 106 patients who had an initial response.

The effectiveness of high-dose dexamethasone for immune thrombocytopenic purpura has been debated for many years. This trial involving a large number of patients demonstrates its usefulness as initial treatment for the condition.



SEE PAGE 831; EDITORIAL, PAGE 903

ORIGINAL ARTICLE

Structured Interruption of HIV Treatment

In this randomized trial, patients with multidrug-resistant human immunodeficiency virus (HIV) infection were assigned either to a four-month interruption of treatment or to an immediate change in the antiretroviral regimen. After a year of follow-up, disease progression was more common in those assigned to treatment interruption.

Structured interruption of treatment often results in reversion of resistant HIV to wild-type virus, but this strategy leads to more frequent progression of disease, with no immunologic or virologic benefits for the patients.

SEE PAGE 837; PERSPECTIVE, PAGE 827

ORIGINAL ARTICLE

Everolimus in Cardiac Transplantation

This clinical trial compared everolimus, an immunosuppressive and antiproliferative agent, with azathioprine in patients who had undergone cardiac transplantation. Everolimus reduced the incidence of both acute rejection and coronary vasculopathy, a serious disorder that causes deterioration of the graft.

Everolimus is a promising agent for the management of rejection and vasculopathy after heart transplantation.

SEE PAGE 847; PERSPECTIVE, PAGE 829

THIS WEEK IN THE JOURNAL

ORIGINAL ARTICLE

Neoadjuvant Chemotherapy plus Cystectomy versus Cystectomy Alone for Locally Advanced Bladder Cancer

In this study of patients with locally advanced bladder cancer, the result of treatment with chemotherapy (methotrexate, vinblastine, doxorubicin, and cisplatin) followed by radical cystectomy was superior to the outcome with radical cystectomy alone.

The outlook for patients with invasive bladder cancer remains grim. About 60 percent of the patients in this study were dead within eight years. Standard chemotherapy is feasible, but the situation calls for a novel approach.

SEE PAGE 859

SPECIAL ARTICLE

Clinical Research to Clinical Practice — Lost in Translation?

In the past 50 years we have made substantial progress in understanding the biology of disease and in devising new ways to prevent or treat it. However, there has been a substantial lag in applying what we know to actual patient care. In this article, based on his Shattuck Lecture, Claude Lenfant outlines the magnitude of the problem of translating research knowledge into clinical practice and offers suggestions for closing this gap.

SEE PAGE 868

CLINICAL PRACTICE

Bulimia Nervosa

A 20-year-old woman presents with fatigue; laboratory tests reveal a serum potassium level of 2.3 mmol per liter and a serum bicarbonate level of 36 mmol per liter. She is 163 cm (64 in.) tall and weighs 54 kg (119 lb). The findings on physical examination are normal. On questioning, she admits to binge eating and vomiting as frequently as five times per day. How should she be treated?

SEE PAGE 875

MEDICAL PROGRESS

Laryngology and Phonosurgery

A normal voice is a necessity for effectiveness at work, as well as for psychosocial health. Vocal difficulties are generally obvious during normal conversation, and all physicians should be prepared to initiate proper evaluation and treatment for patients with laryngeal dysfunction or disease. This review of laryngology and phonosurgery considers current advances in the detection and management of conditions that affect the voice.

SEE PAGE 882

CORRESPONDENCE

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|-----|---|-----|---|
| 906 | Regression of Microalbuminuria in Type 1 Diabetes | 910 | Breast-Cancer Genomics |
| 908 | Risk Stratification in the Long-QT Syndrome | 912 | Case Records |
| 909 | Mechanisms of Actions of Inhaled Anesthetics | 912 | The New Medical Malpractice Crisis |
| | | 913 | Transmission of Chronic Myeloid Leukemia through Peripheral-Blood Stem-Cell Transplantation |