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DECEMBER 16, 2004

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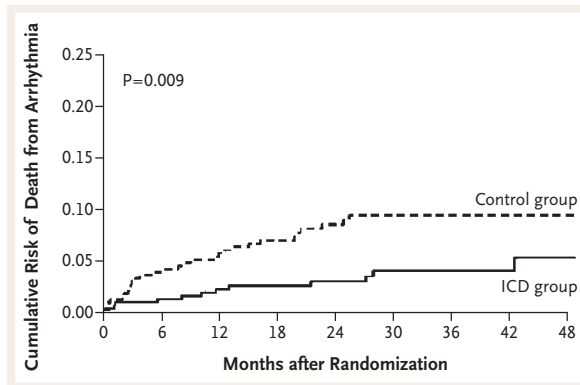


This Week in the Journal

DECEMBER 9, 2004

ORIGINAL ARTICLE

Implantable Cardioverter-Defibrillators as Prophylaxis after Myocardial Infarction



In patients at high risk for ventricular arrhythmias after a recent myocardial infarction, does prophylactic use of an implantable cardioverter-defibrillator (ICD) improve survival? This randomized trial found that it does not. Patients in the

ICD group did have a lower rate of death due to cardiac arrhythmia, but it was offset by an increased rate of death from nonarrhythmic causes.

These results are important because they indicate that ICDs should not routinely be placed in patients shortly after myocardial infarction — even those who are at high risk for cardiac arrhythmias.

SEE P. 2481; EDITORIALS, P. 2540 AND P. 2542

ORIGINAL ARTICLE

Secondary Surgical Cytoreduction for Advanced Ovarian Carcinoma

In women with advanced ovarian cancer who have undergone aggressive primary surgery, the role of secondary debulking surgery after potent chemotherapy with paclitaxel plus cisplatin is unclear. This randomized trial found that the addition of secondary surgery to chemotherapy after maximal primary debulking surgery afforded no survival benefit.

The results of this study indicate that after aggressive primary surgery for advanced ovarian cancer, a second laparotomy adds no benefit to chemotherapy with paclitaxel plus cisplatin.

SEE P. 2489; EDITORIAL, P. 2544; CME, P. 2567

ORIGINAL ARTICLE

Levodopa and the Progression of Parkinson's Disease

This randomized trial examined the effect of levodopa on the progression of Parkinson's disease. After 40 weeks of treatment followed by another 2 weeks for washout, the clinical severity of Parkinson's disease was greater in patients receiving placebo than in those treated with levodopa. However, neuroimaging data suggested a greater loss of dopamine nerve terminals in the patients treated with levodopa.

Although the clinical data indicate that levodopa reduces symptoms without accelerating the clinical progression of Parkinson's disease, the neuroimaging data are not concordant.

SEE P. 2498; CME, P. 2566

ORIGINAL ARTICLE

Rivastigmine for Dementia Associated with Parkinson's Disease

In this 24-week randomized study of patients with dementia associated with Parkinson's disease, outcomes were better among patients treated with rivastigmine than among those who received placebo. Clinicians observed clinical improvement in 19.8 percent of patients in the rivastigmine group and 14.5 percent of patients in the placebo group and clinical worsening in 13.0 percent and 23.1 percent, respectively.

The benefit of rivastigmine for dementia associated with Parkinson's disease is moderate and similar in magnitude to the benefits reported in trials of rivastigmine for Alzheimer's disease.

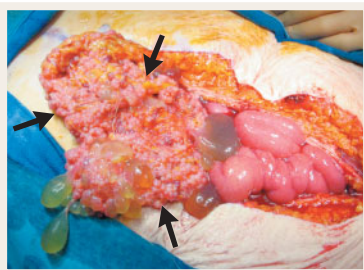
SEE P. 2509; EDITORIAL, P. 2547

MEDICAL PROGRESS

Ovarian Cancer

Patients with ovarian cancer usually present with advanced disease, and the disease is generally managed with surgical resection followed by platinum-based chemotherapy. Recent chemotherapeutic advances have led to improved survival, and a better understanding of genetic risk factors has permitted a tailored approach to preventive strategies, such as bilateral salpingo-oophorectomy in selected women. This review describes the clinical features of ovarian cancer and recent advances in postoperative management.

SEE P. 2519; CME, P. 2565

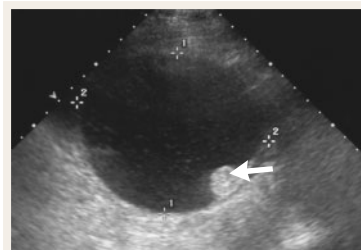


CASE RECORDS OF THE MASSACHUSETTS GENERAL HOSPITAL

A Woman with Postmenopausal Bleeding and a Cystic Ovarian Mass

A 52-year-old woman with postmenopausal bleeding was found to have a 12-cm cystic ovarian mass on imaging studies. The cyst was resected and contained a papillary serous cystadenocarcinoma, grade 2 to 3 of 3, arising as a polypoid intracystic mass in a serous tumor containing benign and borderline areas. The discussants review the diagnosis, grading, and treatment of early-stage ovarian cancer.

SEE P. 2531



CLINICAL IMPLICATIONS OF BASIC RESEARCH

Dissecting a Pandemic Influenzavirus

A recent study suggests that the hemagglutinin protein of the 1918–1919 influenza (Spanish influenza) pandemic led to the hemorrhagic pneumonia and hence a high level of mortality associated with Spanish influenza. This finding, together with the epidemiology of Spanish flu, has implications for response to future pandemics.

SEE P. 2550