

CORRESPONDENCE

- 1817 Alcohol and Cognitive Function in Older Women
- 1819 Decline in Mortality with Varicella Vaccination
- 1819 Nucleophosmin in Acute Myelogenous Leukemia
- 1820 Therapy for Colorectal Cancer
- 1822 Insulin Analogues
- 1824 Return of Renal Function after Endovascular Treatment of Aortic Dissection
- 1825 The Cost of Institutional Review Boards in Academic Medical Centers

BOOK REVIEWS

- 1828 Infections of Leisure
- 1828 When Germs Travel: Six Major Epidemics That Have Invaded America since 1900 and the Fears They Have Unleashed
- 1829 Tuberculosis and the Tubercle Bacillus
- 1830 Antibiotic Optimization: Concepts and Strategies in Clinical Practice

CONTINUING MEDICAL EDUCATION

- 1833 Thrombosis of the Cerebral Veins and Sinuses
- 1834 Respiratory Syncytial Virus Infection in Elderly and High-Risk Adults
- 1835 Multidetector-Row Computed Tomography in Suspected Pulmonary Embolism

## Next Week in the Journal

MAY 5, 2005

### The Next Pandemic

Michael Osterholm



# This Week in the Journal

APRIL 28, 2005

ORIGINAL ARTICLE

### Respiratory Syncytial Virus Infections in Adults



During four consecutive winters, prospective surveillance was conducted in cohorts of 608 healthy elderly patients and 540 adults with chronic heart or lung disease, and viral studies were also performed in 1388 adults hospitalized for acute cardiopulmonary conditions. Respiratory syncytial virus (RSV) infections developed annually in 3 to 7 percent

of healthy elderly patients and in 4 to 10 percent of high-risk adults. In the hospitalized cohort, RSV infection accounted for 11 percent of patients with pneumonia, 11 percent of those with chronic lung disease, and 7 percent of those with asthma.

RSV infection in elderly and high-risk adults is associated with a disease burden similar to that of nonpandemic influenza A. Vaccination against RSV could offer substantial benefits in these adults.

SEE P. 1749; EDITORIAL, P. 1810; CME, P. 1834

ORIGINAL ARTICLE

**Multidetector-Row CT in Suspected Pulmonary Embolism**

The role of multidetector-row computed tomography (CT) in the diagnosis of pulmonary embolism remains to be determined. In this study, the combined use of multidetector-row CT and D-dimer assays allowed pulmonary embolism to be excluded without the need for lower-extremity ultrasonography.

SEE P. 1760; EDITORIAL, P. 1812; CME, P. 1835



ORIGINAL ARTICLE

**Hemochromatosis and Iron-Overload Screening According to Race or Ethnicity**

Mutations in the *HFE* gene are associated with hemochromatosis. In this large study of an ethnically and racially diverse population, homozygosity for C282Y mutations in the *HFE* gene was more common in non-Hispanic whites (0.44 percent) than in Native Americans (0.11 percent), Hispanics (0.027 percent), blacks (0.014 percent), Pacific Islanders (0.012 percent), or Asians (0.00039 percent). Most C282Y homozygotes had elevated serum ferritin levels and transferrin saturation.

Rates of *HFE* mutations vary widely across ethnic and racial groups. Patients with mutations have higher iron levels than patients without mutations.

SEE P. 1769; PERSPECTIVE, P. 1741

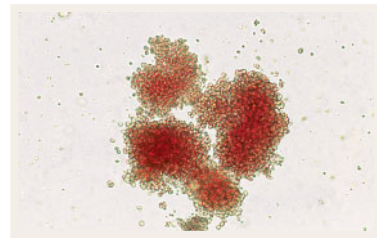
ORIGINAL ARTICLE

**Gain-of-Function *JAK2* Mutation in Myeloproliferative Disorders**

Polycythemia vera, essential thrombocythemia, and myelofibrosis are idiopathic myeloproliferative diseases. These investigators identified a mutation in a gene that encodes *JAK2*, a key signaling protein in hematopoietic progenitor cells. The mutation causes constitutive activation of *JAK2*, which in turn gives cells proliferative and survival advantages over normal cells.

This work shines a revealing spotlight on three enigmatic diseases. It opens new avenues of research, which could lead to improved diagnosis and treatment.

SEE P. 1779; PERSPECTIVE, P. 1744



CURRENT CONCEPTS

**Thrombosis of the Cerebral Veins and Sinuses**

Thrombosis of the cerebral veins and sinuses affects mainly young adults and children. This potentially disabling or fatal condition is usually not diagnosed until a week after the onset of symptoms. This review article describes the clinical presentations of the disorder such as those that occur after a head injury or lumbar puncture. Therapeutic options include anticoagulation, thrombolysis, and measures to control intracranial hypertension.

SEE P. 1791; CME, P. 1833

CASE RECORDS OF THE MASSACHUSETTS GENERAL HOSPITAL

**A Man with Weakness of the Limbs and Multiple Tumors of Spinal Nerves**

A 48-year-old man came to the neurology clinic because of progressive weakness of his arms and legs and pain in the left leg. Enlargement of the sciatic nerve and multiple spinal nerve roots was seen on imaging studies. The patient's 29-year-old nephew had been given a diagnosis of neurofibromatosis; no other family members were known to be affected. A diagnostic procedure was performed.

SEE P. 1800

CLINICAL IMPLICATIONS OF BASIC RESEARCH

**Angiogenesis and Ischemia**

A member of the platelet-derived growth factor family (PDGF-CC) is necessary and sufficient to induce neovascularization in two models of ischemia.

SEE P. 1815

