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Next Week in the Journal

FEBRUARY 3, 2005

Tsunami

Michael VanRooyen
and Jennifer Leaning



This Week in the Journal

JANUARY 27, 2005

ORIGINAL ARTICLE

Probable Person-to-Person Transmission of Avian Influenza (H5N1) Virus



This investigation was conducted in Thailand after a young girl and her mother died from acute viral pneumonia and an aunt with whom the girl had lived also had severe viral pneumonia. Samples from the mother and aunt were positive for avian influenza (H5N1) infection.

In this cluster of avian influenza (H5N1) infection, two of the patients had had no exposure to ill birds, suggesting that person-to-person transmission occurred. On genetic analysis, there was no evidence of mutation of H5N1 to a pandemic strain, but ongoing surveillance is essential.

SEE P. 333; PERSPECTIVE, P. 323; EDITORIAL, P. 405

ORIGINAL ARTICLE

Vascular Risk Factors and Diabetic Neuropathy

Apart from glycemic control, there is no treatment for diabetic neuropathy. Thus, identifying potentially modifiable risk factors is crucial for the development of new therapies.

This prospective study indicates that in addition to glycemic control, the incidence of neuropathy in type 1 diabetes is associated with potentially modifiable cardiovascular risk factors including a raised triglyceride level, body-mass index, smoking, and hypertension.

SEE P. 341; EDITORIAL, P. 408; CME, P. 431

ORIGINAL ARTICLE

Etanercept plus Standard Therapy for Wegener's Granulomatosis

This randomized trial examined the effect of adding etanercept to standard therapy in order to maintain disease remissions in patients with Wegener's granulomatosis. Only 49 percent of patients remained in remission throughout the trial, and etanercept did not result in a higher rate of sustained remission than placebo.

Etanercept is not effective in preventing disease flares in patients with Wegener's granulomatosis.

SEE P. 351; PERSPECTIVE, P. 330

ORIGINAL ARTICLE

Glycogen Storage Diseases and Hypertrophic Cardiomyopathy

Hypertrophic cardiomyopathy is usually caused by mutations in sarcomere proteins, but in some patients such mutations are not found. This study identified mutations in genes encoding enzymes involved in glycogen metabolism as causes of hypertrophic cardiomyopathy. Thus, glycogen storage diseases may sometimes present as hypertrophic cardiomyopathy, owing to accumulation of glycogen-filled vacuoles in myocytes.

SEE P. 362

CLINICAL PRACTICE

Hypercalcemia Associated with Cancer

A 47-year-old woman with a history of breast cancer presents with confusion and dehydration. The serum calcium level is 18.0 mg per deciliter. She has postural hypotension and low central venous pressure. The serum phosphorus level is 5.0 mg per deciliter, the blood urea nitrogen level 80 mg per deciliter, the serum creatinine level 2.0 mg per deciliter, and the albumin level 3.3 g per deciliter. Bone scintigraphy reveals no evidence of skeletal involvement by the tumor. How should she be treated?

SEE P. 373; CME, P. 429

MECHANISMS OF DISEASE

The New β -Lactamases

The β -lactamases are the major bacterial defense of gram-negative bacteria against β -lactam antibiotics. This review details the many types of β -lactamases, explains how they can be detected, and summarizes information on the genetics of this form of resistance. The authors also suggest strategies for clinical management and prevention of this difficult type of antibiotic resistance.

SEE P. 380; CME, P. 430

CASE RECORDS OF THE MASSACHUSETTS GENERAL HOSPITAL

A Boy with Recent Slowing of Growth and Delayed Puberty

A 14-year-old boy was evaluated because of slow growth and delayed puberty. His growth chart showed that about four years earlier his rate of weight gain had slowed from approximately the 50th to the 25th percentile. He was otherwise asymptomatic. Hand radiographs showed a bone age of 12 years 6 months. A diagnostic procedure was performed.

SEE P. 393

