Next Week in the Journal

MARCH 10, 2005

Infant Euthanasia in the Netherlands

Eduard Verhagen and Pieter Sauer

This Week in the Journal

MARCH 3, 2005

ORIGINAL ARTICLE

Intrapleural Streptokinase for Pleural Infection

In this randomized trial involving 454 patients with pleural infections that required antibiotic therapy and chest-tube drainage, there was no benefit from the use of intrapleural streptokinase in terms of survival, the need for surgery, the length of the hospital stay, or the resolution of radiographic abnormalities.

Fibrinolytic agents may be used to improve drainage of pleural infections. The results of this study call into question the presumed therapeutic benefit of the intrapleural administration of streptokinase.

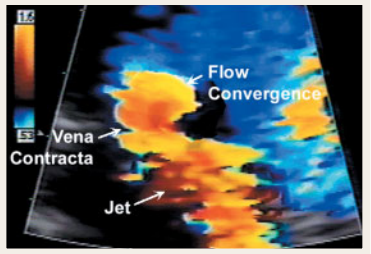
SEE P. 865; EDITORIAL, P. 926; CME, P. 955

ORIGINAL ARTICLE

Asymptomatic Mitral Regurgitation

Most patients with mitral regurgitation are asymptomatic at diagnosis, and the optimal timing of or need for mitral-valve surgery is uncertain. This study shows that the use of Doppler echocardiography to quantify mitral regurgitation accurately predicts the clinical outcome. Patients with an effective regurgitant orifice of 40 mm^2 or more have an increased risk of death and should promptly be considered for surgery even if they have no symptoms. These findings could have a substantial effect on clinical practice.

SEE P. 875; EDITORIAL, P. 928; CME, P. 953



ORIGINAL ARTICLE

Genetic Risk Factors for Alzheimer's Disease

Four genes have been implicated in Alzheimer's disease, yet collectively they are estimated to account for less than half the attributable risk. The results of this study implicate variants in the ubiquilin 1 gene on chromosome 9 as risk factors for late-onset Alzheimer's disease. Additional studies to confirm the association and to determine the magnitude and mechanism of the risk effect are warranted.

SEE P. 884; PERSPECTIVE, P. 862

SPECIAL ARTICLE

Risks and Benefits of Phase 1 Oncology Trials, 1991 through 2002

An analysis of 460 phase 1 oncology trials in adults sponsored by the Cancer Therapy Evaluation Program at the National Cancer Institute between 1991 and 2002, including 11,935 participants, found an overall response rate of 10.6 percent and a toxicity-related death rate of 0.5 percent. Response rates and death rates varied among the different types of trials.

The overall response rate in this analysis exceeds the 4 to 6 percent rate in older trials, with no increase in the risk of death from toxic events. The decision of a patient with advanced, treatment-refractory cancer to participate in a phase 1 trial requires a careful weighing of the risks and benefits.

SEE P. 895; EDITORIAL, P. 930

CLINICAL PROBLEM-SOLVING

On the Threshold

A 48-year-old airline mechanic from Belize presented to the emergency department with fever and altered mental status. Two weeks earlier, fever, myalgias, and dry cough had developed. Maximal daily temperatures reached 41.1°C, and one week later he awakened unable to speak.

SEE P. 919

CLINICAL IMPLICATIONS OF BASIC RESEARCH

Drug Development and Tuberculosis

A new compound counters infection with *Mycobacterium tuberculosis* in a mouse model.

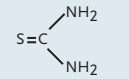
SEE P. 933

DRUG THERAPY

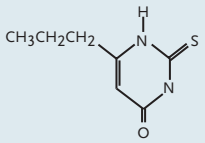
Antithyroid Drugs

Antithyroid drugs, which have been available for more than half a century, are important in the management of hyperthyroidism, particularly in patients with Graves' disease, who have a high response rate. Since the responses of patients vary and these agents have potentially serious side effects, a working knowledge of their complex pharmacology is required. This review article considers recent pharmacologic and clinical data related to the use of these compounds.

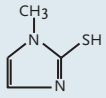
SEE P. 905; CME, P. 954



Thiourea



Propylthiouracil



Methimazole