

THIS WEEK in the JOURNAL

ORIGINAL ARTICLE

Comparison of Entecavir and Lamivudine for HBeAg-Positive Chronic Hepatitis B

In this randomized trial involving patients with HBeAg-positive chronic hepatitis B, entecavir was associated with better histologic, biochemical, and virologic responses than was lamivudine. Adverse events were similar between the groups, and viral resistance to entecavir did not develop in this 48-week study. Longer studies are needed to evaluate adverse effects and viral resistance to entecavir.

SEE P. 1001; EDITORIAL, P. 1074; CME, P. 1106

ORIGINAL ARTICLE

Comparison of Entecavir and Lamivudine for HBeAg-Negative Chronic Hepatitis B

This randomized trial involving patients with HBeAg-negative chronic hepatitis B had the same design and findings as the companion trial involving patients with HBeAg-positive chronic hepatitis B. Histologic, biochemical, and virologic responses were better with entecavir than with lamivudine.

SEE P. 1011; EDITORIAL, P. 1074

ORIGINAL ARTICLE

Thalidomide and Hematopoietic-Cell Transplantation for Multiple Myeloma

In this randomized trial of the treatment of multiple myeloma with intensive chemotherapy plus autologous hematopoietic stem-cell support, the addition of thalidomide improved the rates of complete response and event-free survival, but not overall survival.

SEE P. 1021; EDITORIAL, P. 1076

SPECIAL ARTICLE

Birth and Abortion Rates in Texas after Enforcement of a Parental Notification Law

The authors assessed changes in abortion and birth rates in Texas after enforcement of a law requiring parental notification for pregnancy termination in minors. Compared with changes over time among teens who were 18 years old at the time of conception, the law was associated with a decline in abortion rates in teens between the ages of 15 and 17 and increased birth rates and rates of second-trimester abortion among teens between the ages of 17.50 and 17.74 years at the time of conception.

SEE P. 1031

CLINICAL PRACTICE

Supraventricular Tachycardia

A 28-year-old woman suddenly has rapid palpitations with dizziness while playing her cello. She is brought to an emergency department. She has a faint regular pulse of 190 beats per minute. Her blood pressure is 82/54 mm Hg. Cardiovascular examination reveals no signs of heart failure. An electrocardiogram shows a regular tachycardia with a narrow QRS complex and no apparent P waves. How should her case be managed?

SEE P. 1039; CME, P. 1105

MEDICAL PROGRESS

Management of Crush-Related Injuries after Disasters

Acute renal failure after massive disasters such as earthquakes is one of the few life-threatening complications of crush injuries that can be reversed. This article considers lifesaving aspects of medical care that can be related to both global and local coordination of the treatment of such complications and that are based on the experiences of the authors during disasters such as the earthquakes in Marmara, Turkey, and Bam, Iran.

SEE P. 1052; CME, P. 1107

CASE RECORDS OF THE MASSACHUSETTS GENERAL HOSPITAL

A Man with Altered Mental Status and Acute Renal Failure

A 47-year-old man was transferred to the emergency department because of altered mental status and acute renal failure. Approximately 13 hours earlier, lethargy had developed that progressed to unresponsiveness. The airway had been intubated and acidosis and an elevated creatinine level noted. A generalized tonic-clonic seizure occurred; the results of toxicologic screening of the serum and urine were negative, and a urine specimen contained numerous needle-shaped crystals.

SEE P. 1065

LEGAL ISSUES IN MEDICINE

Congress, Controlled Substances, and Physician-Assisted Suicide — Elephants in Mouseholes

In January 2006, the Supreme Court ruled that the U.S. attorney general does not have the authority to prohibit Oregon physicians from prescribing medications to assist terminally ill patients who wish to end their lives. In this article, George Annas reviews the Court's decision and discusses its implications.

SEE P. 1079