THIS WEEK *in the* JOURNAL

ORIGINAL ARTICLE

A Five-Gene Signature and Survival in Non–Small-Cell Lung Cancer

The authors show that a five-gene signature is closely associated with outcome among patients who have undergone surgical resection of early-stage non–small-cell lung cancer. This investigation represents the final phase of work to devise molecular methods for staging tumors and formulating a prognosis. For the findings to be clinically directive, these kinds of signatures will need to be incorporated into prospective clinical trials of cancer treatment.

SEE P. 11; EDITORIAL, P. 76

ORIGINAL ARTICLE

Multidrug-Resistant *Salmonella enterica* Serotype Typhimurium Associated with Pet Rodents

An estimated 1.4 million salmonella infections occur annually in the United States, typically acquired from tainted food. This report describes a 10-state outbreak of infection with *Salmonella enterica* serotype Typhimurium associated with commercially distributed pet rodents that was identified by the molecular fingerprint of this resistant strain.

SEE P. 21; CME, P. 103

ORIGINAL ARTICLE

Dopamine Agonists and the Risk of Cardiac-Valve Regurgitation

The association between antiparkinsonian drugs and cardiac-valve regurgitation was assessed in a nested case–control study from a large general-practice database in the United Kingdom. The rate of cardiac-valve regurgitation was increased with current use of pergolide (incidence-rate ratio, 7.1) or cabergoline (incidence-rate ratio, 4.9) but not with current use of other dopamine agonists. Clinicians should consider the risk of valvular heart disease when prescribing these agents.

SEE P. 29; PERSPECTIVE, P. 6

ORIGINAL ARTICLE

Valvular Heart Disease during Treatment with Dopamine Agonists

A cohort of patients with Parkinson's disease treated with either ergot-derived or non–ergot-derived dopamine agonists underwent echocardiographic evaluation. As compared with a group of normal control subjects, patients taking pergolide or cabergoline had a higher frequency of clinically important valve regurgitation and more evidence of stiffening and displacement of the mitral leaflet, as measured by the tenting area of the mitral valve.

SEE P. 39; PERSPECTIVE, P. 6

CLINICAL THERAPEUTICS

Primary PCI for Myocardial Infarction with ST-Segment Elevation

A 58-year-old man has chest pain at 9:30 a.m.; 3 hours later, he calls for an ambulance. Paramedics arrive, provide standard treatment, and transport him to the nearest emergency department. On his arrival at a small hospital at 1 p.m., the findings are diagnostic of a myocardial infarction with ST-segment elevation. The emergency department physician recommends immediate transfer to a hospital 1 hour away for primary percutaneous coronary intervention (PCI).

SEE P. 47; CME, P. 102

MEDICAL PROGRESS

Whipple's Disease

In 2000, *Tropheryma whipplei* was finally identified as the cause of Whipple's disease, a chronic condition with protean manifestations that was first described in 1907. This review discusses the epidemiology, pathogenesis, diagnosis, and treatment of this rare and elusive chronic disease.

SEE P. 55; CME, P. 101

CLINICAL PROBLEM-SOLVING

A Stain in Time

A 45-year-old woman from northern Ontario presented to her local hospital with a 2-year history of asymmetric migratory arthralgias involving the left knee, ankles, elbows, and fingers. She also had morning stiffness, increasing fatigue, an erythematous, nonpruritic rash after sun exposure, and a 3-month history of chest pain that was relieved when she was in an upright position.

SEE P. 68

CLINICAL IMPLICATIONS OF BASIC RESEARCH

p53 and Tumor Suppression

A p53-mediated response to tissue damage caused by ionizing radiation does not invoke protection against tumorigenesis in two mouse models.

SEE P. 79

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