

THIS WEEK in the JOURNAL

ORIGINAL ARTICLE

Once-Yearly Zoledronic Acid for Postmenopausal Osteoporosis

In this double-blind, placebo-controlled trial, women with postmenopausal osteoporosis received an infusion of either zoledronic acid (5 mg) or placebo at baseline and at 1 and 2 years and were followed for 3 years. Zoledronic acid significantly reduced the risk of vertebral, hip, and other fractures. Adverse events were similar in the two study groups, except for serious atrial fibrillation, which was more frequent in the zoledronic acid group. This drug may provide a promising approach to reducing fracture risk.

SEE P. 1809; EDITORIAL, P. 1878; CME, P. 1902

ORIGINAL ARTICLE

Streptokinase Immediately after Primary Percutaneous Coronary Intervention

In this pilot trial, patients undergoing primary percutaneous coronary intervention were randomly assigned to receive a low dose of intracoronary streptokinase after reperfusion or no additional therapy. At 2 days, microvascular function was significantly improved in the streptokinase group. There was no significant difference in left ventricular size or function at 6 months, although the findings suggest that a larger trial might show such a benefit.

SEE P. 1823; EDITORIAL, P. 1880; CME, P. 1903

ORIGINAL ARTICLE

Age at Surgery for Undescended Testis and Risk of Testicular Cancer

In a study of almost 17,000 men who were surgically treated for undescended testis, with data culled from Swedish national registries, the risk of testicular cancer among men who underwent orchiopexy at 13 years of age or older was twice that among men who had surgery before the age of 13. Surgical treatment for undescended testis at an early age can prevent testicular cancer.

SEE P. 1835

ORIGINAL ARTICLE

Long-Term Effect of Diabetes and Its Treatment on Cognitive Function

Improved glycemic control reduces complications in type 1 diabetes, but tight control of glucose is associated with more hypoglycemic episodes. The long-term effect of recurrent hypoglycemic events on cognitive function is not known. In this 18-year follow-up of patients enrolled in the Diabetes Control and Complications Trial, relatively high rates of severe hypoglycemic events were not associated with worse cognitive outcomes.

SEE P. 1842

SPECIAL ARTICLE

Use of Physicians' Services under Medicare's Resource-Based Payments

In 1992, Medicare introduced the resource-based relative-value scale, which sets physicians' payments on the basis of relative costs and assigns a number of relative-value units (RVUs) to each service. The use of physicians' services (RVUs per Medicare beneficiary) grew by 45% between 1992 and 2002. Growth varied according to the type of service and specialty, with high rates of growth in cardiology and gastroenterology.

SEE P. 1853; EDITORIAL, P. 1883

CLINICAL PRACTICE

Superior Vena Cava Syndrome with Malignant Causes

A 58-year-old man presents with a 2-week history of progressive dyspnea on exertion, neck swelling, decreased appetite, and fatigue. There is no history of syncope or dysphagia. He smoked cigarettes until 5 years ago. The physical examination reveals a heart rate of 105 beats per minute, a respiratory rate of 20 breaths per minute, and superficial vascular distention over the neck, chest, and upper abdomen. Stridor is not present. How should his case be evaluated and managed?

SEE P. 1862; CME, P. 1901

CLINICAL PROBLEM-SOLVING

The Drenched Doctor

A 55-year-old male physician was seen in August because of a 1-week history of fever and night sweats. The sweats required at least one nightly change of his pajamas and pillowcase. The patient also noted a worsening cough, which had previously been ascribed to esophageal reflux. There was no sputum production, photophobia, rash, arthralgia, dysuria, or change in bowel function.

SEE P. 1871