

THIS WEEK in the JOURNAL

ORIGINAL ARTICLE

Eprodisate for AA Amyloidosis

Amyloid A (AA) amyloidosis, a complication of chronic inflammatory conditions, develops when proteolytic fragments of serum amyloid A protein are deposited in tissues as amyloid fibrils. This placebo-controlled trial investigated the effect of eprodisate, a small molecule that inhibits amyloid fibril polymerization and tissue deposition in patients with renal AA amyloidosis. As compared with placebo, the drug slowed a decline in renal function. Eprodisate is a member of a new class of compounds that interfere with interactions between amyloidogenic proteins and glycosaminoglycans.

SEE P. 2349; EDITORIAL, P. 2413

ORIGINAL ARTICLE

Outcome in Patients with Systemic AA Amyloidosis

This study evaluated clinical features, organ function, and survival in a group of 374 patients with amyloid A amyloidosis. Median survival after diagnosis was 133 months; renal dysfunction was the predominant disease manifestation. Mortality, amyloid burden, and renal prognosis all significantly correlated with the serum amyloid A concentration during follow-up.

SEE P. 2361; CME, P. 2442

ORIGINAL ARTICLE

Adjuvant Mitotane for Adrenocortical Carcinoma

This retrospective analysis assessed the efficacy of adjuvant mitotane treatment in prolonging recurrence-free survival in adrenocortical cancer, which carries a high risk of recurrence. Survival was significantly prolonged in patients receiving mitotane, as compared with those who did not. Adjuvant mitotane may prolong recurrence-free survival in patients with radically resected adrenocortical carcinoma.

SEE P. 2372; EDITORIAL, P. 2415

BRIEF REPORT

Bacteremia, Fever, and Splenomegaly Caused by a Newly Recognized Bartonella Species

A 43-year-old woman returned from a trip to Peru and had fever, rash, and splenomegaly. A new bartonella species has been identified as the causative agent.

SEE P. 2381; PERSPECTIVE, P. 2346

SPECIAL ARTICLE

Explaining the Decrease in U.S. Deaths from Coronary Disease, 1980–2000

Mortality due to coronary heart disease has declined substantially in the United States in recent decades. A previously validated model was used to estimate the roles of specific cardiac treatments and changes in risk factors in this decline. Approximately 47% of the decrease in mortality was attributed to therapeutic interventions and 44% to changes in risk factors.

SEE P. 2388; CME, P. 2443

CURRENT CONCEPTS

Local Therapy and Survival in Breast Cancer

Some investigators have viewed breast cancer as a local disease that then spreads; others have seen it as a systemic disease from the start. This review argues for another view, since the failure to achieve initial local control allows some tumors to disseminate later, reducing a patient's chance of long-term survival. Recent evidence supports a larger role for aggressive, local therapy for breast cancer.

SEE P. 2399; CME, P. 2441

CLINICAL PROBLEM-SOLVING

A Hand-Carried Diagnosis

A 34-year-old black woman presented to a walk-in clinic with a 3-day history of malaise. Her colleagues had noticed yellowing of her eyes over the past few days.

SEE P. 2407

CLINICAL IMPLICATIONS OF BASIC RESEARCH

Mediating Inflammation in Rheumatoid Arthritis

The integrity of the synovium depends on the adhesion molecule cadherin-11. Mice that are deficient in this molecule are resistant to induced inflammatory arthritis.

SEE P. 2419