

THIS WEEK in the JOURNAL

ORIGINAL ARTICLE

Zoledronic Acid in Reducing Mortality after Hip Fracture

Mortality is increased in the year after a hip fracture, and strategies that improve the outcome are needed. This randomized, double-blind, placebo-controlled trial compared yearly intravenous zoledronic acid with placebo first administered within 90 days after surgical repair of a hip fracture in patients who were unable or unwilling to take oral bisphosphonates. Zoledronic acid was associated with a reduced relative risk of a new clinical fracture and a reduction in mortality from all causes.

SEE P. 1799; EDITORIAL, P. 1861; CME, P. 1882

ORIGINAL ARTICLE

Adjuvant Chemotherapy for Gastric Cancer with S-1, an Oral Fluoropyrimidine

This trial tested the efficacy of S-1, an oral prodrug that converts to fluorouracil within cells, in the adjuvant treatment of gastric cancer in Japanese patients after gastrectomy and an extended (D2) lymph-node dissection. Treatment with S-1 for 1 year after surgery was associated with longer overall survival than surgery alone. An important feature of this trial is the D2 dissection, which is not commonly performed in Western countries.

SEE P. 1810; EDITORIAL, P. 1863

ORIGINAL ARTICLE

Incidental Findings on Brain MRI in the General Population

In this study of 2000 people 45 years of age or older who underwent brain magnetic resonance imaging (MRI) as part of a prospective, population-based cohort study, asymptomatic brain infarcts were found in 7.2% of subjects, cerebral aneurysms in 1.8%, and benign primary tumors in 1.6%. Incidental brain findings on brain MRI are not uncommon.

SEE P. 1821

BRIEF REPORT

Visualizing Out-of-Body Experience in the Brain

Stimulation of an electrode implanted over the right temporoparietal junction in a patient with intractable tinnitus did not provide relief of his tinnitus but consistently resulted in the patient's perception that he was outside his body (out-of-body experience). Positron-emission tomographic scanning localized the areas of the brain that were active during this experience.

SEE P. 1829

CLINICAL PRACTICE

Assessment of Patients' Competence to Consent to Treatment

A 75-year-old woman has type 2 diabetes mellitus, peripheral vascular disease, and a gangrenous ulcer of her left foot. A below-the-knee amputation is recommended, but she declines, saying that she has lived long enough and wants to die with her body intact. Her internist is concerned about her increasing confusion over the past year and notes that she appears to be depressed. How should her physician determine whether her decision is competent?

SEE P. 1834; CME, P. 1881

MECHANISMS OF DISEASE

Leukotrienes

This review of leukotrienes, which are lipid mediators with a broad array of clinical effects, and leukotriene receptors considers the biochemical and physiological aspects of these molecules, examines their roles in asthma and other diseases, and explains the pharmacologic effects of antileukotriene agents.

SEE P. 1841

CLINICAL PROBLEM-SOLVING

No Respector of Age

A previously healthy 65-year-old woman went to her primary care physician in late August seeking evaluation of a "spot" that had appeared on her right leg 3 weeks earlier. One week later, the skin lesion had resolved, but she returned with reports of malaise and diffuse arthralgias that had progressively worsened, with intense, disabling pain and stiffness in her neck, shoulders, wrists, hands, knees, and ankles.

SEE P. 1856; CME, P. 1883