

THIS WEEK in the JOURNAL

ORIGINAL ARTICLE

Hypertension in the Very Elderly

In this study, patients 80 years of age or older with sustained systolic hypertension were randomly assigned to receive either the diuretic indapamide, with or without the angiotensin-converting-enzyme inhibitor perindopril, or matching placebos, for a target blood pressure of 150/80 mm Hg. Active treatment resulted in a nearly significant reduction of the risks of fatal or non-fatal stroke and death from cardiovascular causes and a significant reduction in the rates of death from stroke and death from any cause, suggesting that antihypertensive treatment in these persons may be beneficial.

SEE P. 1887; EDITORIAL, P. 1958; CME, P. 1982

ORIGINAL ARTICLE

Cause of Childhood-Onset Cardiac Hypertrophy

This study shows that mutations in genes previously implicated in adult-onset cardiomyopathy cause 49% of presumed sporadic cases and 64% of familial cases of childhood-onset cardiac hypertrophy. These findings indicate that genetic analyses and family evaluations are warranted when childhood-onset hypertrophy is diagnosed.

SEE P. 1899

ORIGINAL ARTICLE

Gene Mutations in Cytogenetically Normal AML

Almost half of patients with acute myeloid leukemia (AML) do not have detectable cytogenetic abnormalities. This study of more than 870 such patients determined the frequencies of mutations of the *NPM1*, *FLT3*, *CEBPA*, and *MLL* genes that affect the growth and differentiation of hematopoietic stem cells and showed that these mutations are associated with the treatment outcome. The authors propose that these mutations constitute a new basis for refining the risk classification of AML.

SEE P. 1909; EDITORIAL, P. 1960

ORIGINAL ARTICLE

MicroRNA Expression in Cytogenetically Normal AML

This study outlines the development of a microRNA signature in patients with cytogenetically normal acute myeloid leukemia (AML) with high-risk molecular features. This type of AML constitutes approximately 65% of cases of cytogenetically normal AML and one third of all AML cases involving patients under the age of 60 years. The microRNA signature correlated not only with the clinical outcome but also with the expression of genes encoding proteins of the innate immune system.

SEE P. 1919; EDITORIAL, P. 1960

SPECIAL ARTICLE

A Behavioral Intervention to Improve Obstetrical Care

In this randomized trial of a multifaceted intervention to improve obstetrical care in 19 hospitals in Argentina and Uruguay, the rate of prophylactic use of oxytocin in the third stage of labor increased from 2% at baseline to 84% after intervention at hospitals that underwent intervention and from 3% to 12% at control hospitals. The rate of episiotomy decreased from 41% to 30% at intervention hospitals but remained stable at control hospitals.

SEE P. 1929; CME, P. 1983

CLINICAL PRACTICE

Nonsurgical Management of Obesity in Adults

A 44-year-old woman desires weight reduction. She has a history of hypertension, daytime somnolence, and osteoarthritis. Her weight is 215 lb (98 kg), her waist circumference is 40 in. (102 cm), and her body-mass index is 32.7. Her blood pressure is 140/92 mm Hg. What would you advise?

SEE P. 1941; CME, P. 1981

CLINICAL PROBLEM-SOLVING

Back to Basics

A 41-year-old woman was brought by her husband to the emergency department with a history of 72 hours of epigastric pain, nausea, repeated vomiting, and altered mental status. Her blood calcium was found to be 18.9 mg per deciliter (4.7 mmol per liter).

SEE P. 1952