

THIS WEEK in the JOURNAL

ORIGINAL ARTICLE

Thrombus Aspiration in Myocardial Infarction

Acute myocardial infarction with ST-segment elevation is treated with the use of percutaneous coronary intervention (PCI), but distal embolization of thrombotic material may limit the clinical efficacy of this procedure. In this study, aspiration of the thrombus during PCI improved reperfusion and clinical outcome. Thrombus aspiration appears to be a substantial advance in the treatment of acute myocardial infarction.

SEE P. 557; EDITORIAL, P. 634

ORIGINAL ARTICLE

HLA-B*5701 Screening for Hypersensitivity to Abacavir

Hypersensitivity reactions to abacavir are tightly associated with HLA-B*5701. In this global, multicenter, prospective, randomized study, 1956 patients with HIV-1 infection who had not previously received abacavir were randomly assigned to undergo HLA-B*5701 screening or to receive the standard of care. Screening eliminated immunologically confirmed hypersensitivity reaction to abacavir in this predominantly white population. In this case, a pharmacogenetic test can prevent the toxic effects of this drug.

SEE P. 568; EDITORIAL, P. 637

ORIGINAL ARTICLE

Multifactorial Intervention and Mortality in Type 2 Diabetes

In this study, 160 patients with type 2 diabetes and persistent microalbuminuria received either intensive therapy or conventional therapy for a mean of 7.8 years, followed by observation for a mean of 5.5 years. Intensive intervention with multiple drug combinations and behavior modification appeared to have a sustained benefit in reducing vascular complications and death from any cause and from cardiovascular causes.

SEE P. 580; CME, P. 659

ORIGINAL ARTICLE

Phenotype and Course of Hutchinson–Gilford Progeria Syndrome

This article describes the detailed phenotype of 15 children, 1 to 17 years of age, with Hutchinson–Gilford

progeria syndrome, a rare, sporadic autosomal dominant premature aging syndrome causing death at approximately 13 years of age. Most cases are caused by an *LMNA* gene mutation that produces an abnormal lamin A, “progerin.” Since progerin accumulates in normal cells with age, understanding this syndrome may offer insight into normal aging.

SEE P. 592; PERSPECTIVE, P. 552

ORIGINAL ARTICLE

Neonatal Diagnosis and Treatment of Menkes Disease

Menkes disease is a fatal neurodegenerative disorder caused by mutations in a copper-transport gene. In this study of 81 newborns at risk for Menkes disease, a screening test indicating low dopamine- β -hydroxylase activity demonstrated high sensitivity and specificity. Twelve newborns who screened positive for Menkes disease and received early copper treatment had better neurologic outcomes than did patients in a historical control group who received diagnosis and treatment later.

SEE P. 605

CLINICAL PRACTICE

Neurogenic Orthostatic Hypotension

A 65-year-old man reports a 6-month history of dizziness, light-headedness, weakness, and fatigue while upright. He takes no medication and has no personal or family history of neurologic disease. On physical examination, his supine blood pressure is 160/100 mm Hg, with a heart rate of 72 beats per minute; on standing, his blood pressure falls to 70/40 mm Hg, with no change in heart rate. The results of the remainder of the examination, including neurologic examination, are normal. How should he be evaluated and treated?

SEE P. 615; CME, P. 657

CLINICAL PROBLEM-SOLVING

What's the Connection?

A 26-year-old man presented with a 1-month history of persistent cough productive of white sputum, which was occasionally tinged with blood. He reported mild pleuritic chest pain but had no dyspnea, fever, chills, night sweats, or weight loss. The patient had had no epistaxis or episodes of sinusitis. One week before presentation, he received an empirical course of azithromycin, with no resolution of his symptoms.

SEE P. 626; CME, P. 658