A Piece of My Mind

"My reluctance to return to the office generally is precipitated by the fear of what I will find in my mailbox." From "Dumbing Down."

SEE PAGE 1349

Medical News & Perspectives

The use of tissue-type plasminogen activator is at the center of a debate between proponents who say it's underused and emergency physicians faced with treatment decisions in real-world settings.

SEE PAGE 1363

Incidence of Lobular Breast Carcinoma

The incidence of all breast cancers with a lobular component increased from 19.8 per 100 000 in 1987 to 33.4 per 100 000 in 1999, a period during which use of combined estrogen and progestin hormone replacement therapy increased steadily, whereas the incidence of ductal carcinoma remained essentially constant.

SEE PAGE 1421

Infanticide by Parents

Epidemiological characteristics of cases of newborns killed or left to die by a parent in North Carolina, 1985-2000.

SEE PAGE 1425

CLINICIAN'S CORNER

Contempo Updates

Evaluation and management of headache.

SEE PAGE 1430

Fifth Congress on Peer Review

Call for Research

JAMA and the *BMJ* Publishing Group announce the Fifth International Congress on Peer Review and Biomedical Publication to be held in September 2005. Deadline for submission of abstracts is January 15, 2005.

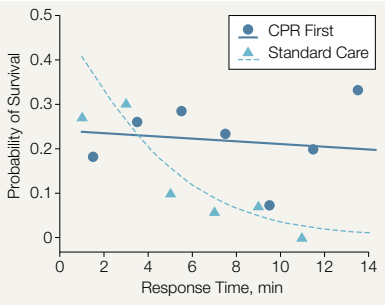
SEE PAGE 1438 AND
WWW.JAMA-PEER.ORG

JAMA Patient Page

For your patients: Information about headaches.

SEE PAGE 1462

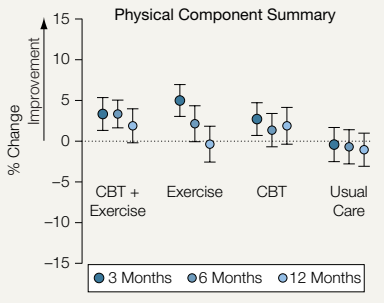
CPR First vs Immediate Defibrillation for Cardiac Arrest



Wik and colleagues conducted a randomized trial among patients with out-of-hospital ventricular fibrillation to compare immediate defibrillation (standard care) with 3 minutes of basic cardiopulmonary resuscitation (CPR) prior to defibrillation. Survival to hospital discharge, rates of return of spontaneous circulation (ROSC), 1-year survival, and neurological outcomes were not significantly different in the 2 treatment groups overall or among patients with ambulance response times of 5 minutes or less. Among patients with ambulance response times longer than 5 minutes, however, rates of survival to hospital discharge and at 1 year and of ROSC were higher in the CPR first group. In an editorial, Valenzuela describes elements of research design to include in future trials of CPR first.

SEE PAGE 1389 AND EDITORIAL ON PAGE 1434

Therapies for Gulf War Veterans' Illnesses



Gulf war veterans' illnesses (GWVI) are multisymptom illnesses characterized by persistent pain, fatigue, and cognitive symptoms. Donta and colleagues conducted a randomized trial to compare the effectiveness of a 12-week program of cognitive behavioral therapy (CBT), exercise, and a combination of both for improving physical functioning and reducing symptoms of Gulf War veterans with GWVI. At 12 months, the proportion of veterans with improvement in physical functioning was greater among those who received CBT with or without exercise than among those who received exercise alone or usual care. Compared with usual care, fatigue, cognitive symptoms, distress, and mental health functioning were improved in the exercise groups, and cognitive symptoms and mental health functioning were improved in the CBT alone group. In an editorial, Hotopf discusses the need to develop a model for the cognitive and behavioral factors underlying the chronic symptoms of GWVI that would guide the CBT intervention.

SEE PAGE 1396 AND EDITORIAL ON PAGE 1436

Alcohol Use and Risk of Dementia in Older Adults

To study the relationship between alcohol consumption and risk of dementia in older adults, Mukamal and colleagues conducted a nested case-control study of alcohol consumption and risk of incident dementia in the Cardiovascular Health Study, a prospective, population-based cohort study of adults aged 65 years and older. Weekly alcohol consumption was categorized as none, less than 1 drink, 1 to less than 7 drinks, 7 to less than 14 drinks, and 14 or more drinks. The risk of incident dementia was lowest among older adults who consumed 1 to less than 7 drinks per week.

SEE PAGE 1405

Prevalence of Prostate and Colorectal Cancer Screening

Colorectal cancer screening has been shown in randomized trials to reduce colorectal cancer mortality, but the benefit of prostate-specific antigen (PSA) screening for prostate cancer has not yet been demonstrated in randomized trials and its use is controversial. Nevertheless, in this analysis of data from the 2001 Behavioral Risk Factor Surveillance System, Sirovich and colleagues found that men aged 50 years or older were significantly more likely to report undergoing PSA screening than colorectal cancer screening.

SEE PAGE 1414

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