Antiplatelet Therapy After Drug-Eluting Stent Placement 2510

Dual antiplatelet therapy is currently recommended for at least 12 months after implantation of a drug-eluting stent. In a multicenter randomized trial involving 3119 patients undergoing percutaneous coronary intervention with zotarolimus-eluting stents for stable coronary artery disease or low-risk acute coronary syndrome, Ferres and colleagues found that 3 months of dual antiplatelet therapy (100-200 mg of aspirin daily and 75 mg of clopidogrel daily) was noninferior to 12 months of therapy on a composite outcome of death, myocardial infarction, stroke, or major bleeding, with no increased risk of stent thrombosis.

Periodontal Therapy and Hemoglobin A1c in Type 2 Diabetes 2523

Chronic periodontitis—an inflammatory disorder of the supporting structure of the teeth—is common in persons with diabetes. To assess whether nonsurgical periodontal treatment (scaling, root planning, and chlorhexidine rinse) improves hemoglobin A1c levels in patients with type 2 diabetes, Engebretson and colleagues randomly assigned 514 patients with untreated moderate or advanced periodontitis to receive periodontal treatment or no treatment for 6 months. The authors found that periodontal therapy did not improve glycemic control.

Dopamine or Nesiritide in Heart Failure With Renal Dysfunction 2533

Patients with acute heart failure and renal dysfunction are at risk of inadequate decongestion and worsening renal function. In a multicenter randomized trial that enrolled 360 hospitalized patients with acute heart failure and renal dysfunction, Chen and colleagues tested 2 independent hypotheses that, compared with placebo, the addition of low-dose dopamine or low-dose nesiritide to diuretic therapy would enhance decongestion and preserve renal function. The authors report that neither treatment strategy enhanced decongestion or improved renal function compared with placebo.
Research (continued)

**Calcium-Channel Blocker–Clarithromycin Drug Interaction** 2544
Calcium-channel blockers are metabolized by the cytochrome P450 3A4 (CYP3A4) enzyme. In a population-based retrospective cohort study involving more than 190,000 older adults who were newly prescribed clarithromycin or azithromycin while taking a calcium-channel blocker, Gandhi and colleagues found that concurrent use of clarithromycin (an inhibitor of CYP3A4) but not azithromycin was associated with a small but statistically significant greater short-term risk of hospitalization with acute kidney injury.

- [Author Audio Interview](https://jama.com)

**Medical Communication Companies and Industry Grants** 2554
In an analysis of publicly available data from the grant registries of 13 pharmaceutical companies and 1 medical device company, Rothman and colleagues examined relationships between medical communication companies (MCCs)—key providers of information to physicians and consumers—and the drug and device industry. Among the authors’ findings were that MCCs receive substantial support from drug and device companies; the majority of MCCs are for-profit, conduct continuing medical education (CME) programs, track physicians’ website behavior, and may share personal physician data with unnamed third parties. In an Editorial, Schwartz and Woloshin discuss implications of industry funding of MCCs.

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**Annular Vesiculobullous Eruption in a Healthy Young Man** 2559
A 20-year-old man presented with a mildly pruritic, progressive rash that began on his scalp and spread to his neck, back, chest, and thighs. A trial of oral cephalexin was not helpful. He denied other medication use, travel, or illicit drug use. Examination revealed numerous grouped vesicles and bullae coalescing into annular plaques, on an erythematous base with central clearing and scale. The patient was afebrile and appeared well. What would you do next?

- [Quiz](https://jama.com)

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**Editor’s Audio Summary**
Howard Bauchner, MD, summarizes and comments on this week’s issue.

**Author Interview**
VIDEO Interview with Deepak L. Bhatt, MD, MPH, author of Three vs Twelve Months of Dual Antiplatelet Therapy After Zotarolimus-Eluting Stents: The OPTIMIZE Randomized Trial

**Author Reading**
Victor M. Montori, MD, MSc, reads his Viewpoint, The Optimal Practice of Evidence-Based Medicine: Incorporating Patient Preferences in Practice Guidelines.