Iron Supplementation, *Plasmodium* Infection in Kenyan Women

Anemia affects a majority of pregnant women in Africa and is predominantly due to iron deficiency. Evidence from a trial involving children found that iron supplementation increased the rate of malaria. In a randomized placebo-controlled trial involving 470 pregnant women in a malaria-endemic region in Kenya, Mwangi and colleagues assessed the effect of daily antenatal iron supplementation on maternal risk of *Plasmodium* infection and neonatal outcomes at childbirth. The authors found no difference in overall risk of *Plasmodium* infection among women who received iron supplementation vs placebo. In an Editorial, Christian and Black discuss the safety of antenatal iron supplementation in regions with endemic malaria.

**Editorial** 1003  Related Article 1065


In an analysis of data from the National Health and Nutrition Examination Surveys conducted between 1988-1994 and 1999-2012, Menke and colleagues examined diabetes prevalence and trends in total, diagnosed, and undiagnosed diabetes. Among the findings was an estimated diabetes prevalence of 12% to 14% for the 2011-2012 population. Between the 1988-1994 and the 2011-2012 surveys, the prevalence of diabetes had increased in the overall population and in all subgroups evaluated. In an Editorial, Herman and Rothberg discuss efforts to promote prevention and early diagnosis of diabetes in the United States.

**Editorial** 1005  Related Article 1052  Author Video Interview jama.com

Predicting Stroke, Thromboembolism, Death in Patients With HF

In an analysis of Danish registry data from nearly 43,000 patients with incident heart failure (HF) with or without atrial fibrillation, Melgaard and colleagues assessed the utility of the CHA₂DS₂-VASc score—which includes congestive heart failure, hypertension, age, diabetes, stroke or thromboembolism, vascular disease, and sex as model variables—for predicting patients' future risk of ischemic stroke, thromboembolism, and death. The authors found the predictive accuracy of the CHA₂DS₂-VASc score was modest and conclude that its clinical utility for patients with HF remains to be determined.

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NEXT WEEK
Trends in Care and Outcomes of Extremely Preterm Neonates 1039
Stoll and colleagues analyzed registry data from 34,636 extremely preterm infants born between 1993 and 2012 to assess trends in care practices, morbidity, and mortality. Among the findings were an increase in bronchopulmonary dysplasia and modest reductions in several morbidities, including recent decreases in rates of late-onset sepsis. Survival rates improved, most markedly among infants born at 23 and 24 weeks. In an Editorial, Soll discusses progress in the care of extremely preterm infants.

Advances in Diagnosis and Treatment of Diabetes 1052
Diabetes incidence has reached epidemic proportions. Nathan reviews recent advances in diagnosis, prevention, and treatment of type 1 and type 2 diabetes and finds that improved glycemic control and better management of other risk factors for diabetic complications and treatment of complications when they arise has resulted in a more optimistic outlook for patients.

Risk Prediction Model Discrimination: The C Statistic 1063
Clinical risk prediction models—statistical models that use variables measured at or before a time point of interest—provide an estimate of the probability of an outcome occurring within a given time. In this JAMA Guide to Statistics and Methods, Pencina and D'Agostino discuss use and interpretation of the c statistic, which is used to evaluate model discrimination—a measure of the ability to distinguish individuals who will develop events from those who will not.

Rapid Diagnostic Tests for Malaria in Endemic Areas 1065
This JAMA Clinical Evidence Synopsis by Takwoingi and colleagues summarizes a 2014 Cochrane review (47 study cohorts; 22,862 patients) and an additional 4 studies (2824 patients) that assessed the accuracy of rapid diagnostic tests for detecting Plasmodium vivax and nonfalciparum malaria in endemic countries. Vivax-specific rapid diagnostic tests were highly sensitive and specific compared with microscopy—the gold standard—for detecting P vivax malaria. Rapid diagnostic tests that can only distinguish Plasmodium falciparum from nonfalciparum malaria were less sensitive.

The JAMA Forum
Insightful commentary on the political aspects of health care from leading health economists, health policy experts, and legal scholars

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