Transcatheter Aortic Valve Replacement: One-Year Outcomes

Holmes and colleagues examined 1-year patient outcomes after transcatheter aortic valve replacement (TAVR) in an analysis of linked Medicare claims and Society of Thoracic Surgeons/American College of Cardiology Transcatheter Valve Therapy (STS/ACC TVT) Registry data. Patients (n=12182) who underwent TAVR between November 2011 and July 2013 were included in the analysis. The authors report that at 1-year follow-up, overall mortality was 23.7%, the stroke rate was 4.1%, and rate of the composite outcome of death and stroke was 26.0%. In the year after TAVR, 24.4% of survivors were rehospitalized once, and 12.5% were rehospitalized twice.

Familial Hypercholesterolemia and Prevalence of Diabetes

Familial hypercholesterolemia is characterized by impaired cellular cholesterol uptake. In light of evidence that statin therapy is associated with an increased risk of type 2 diabetes, Besseling and colleagues hypothesized that perturbations in transmembrane cholesterol transport may be linked to development of type 2 diabetes and they assessed the relationship in a cross-sectional study involving 25137 patients with familial hypercholesterolemia and 38183 unaffected relatives. The authors found a lower prevalence of diabetes among individuals with familial hypercholesterolemia. In an Editorial, Preiss and Sattar discuss a possible link between the low-density lipoprotein receptor and diabetes risk.

Treatment of Displaced Proximal Humeral Fractures

The role of surgery for most displaced proximal humeral fractures is unclear. Rangan and colleagues randomly assigned 250 adult patients with a displaced fracture of the proximal humerus involving the surgical neck to undergo surgical treatment or sling immobilization, with standard rehabilitation provided to both groups. The authors found that patient-reported clinical outcomes assessed in the 2 years after fracture occurrence were not significantly different between the treatment groups.
In This Issue of JAMA

Clinical Review & Education

Food Antioxidants to Prevent Cataract 1048
Oxidative stress from physiological and environmental factors is a risk for cataract development. An article in JAMA Ophthalmology reported that dietary antioxidant intake—primarily from fruits, vegetables, whole grains, and coffee—was inversely associated with the risk of age-related cataract in a prospective cohort of middle-aged and elderly Swedish women. In this From The JAMA Network article, Mares discusses the evidence linking antioxidant foods and supplements with cataract prevention.

Doppler Echocardiography in the Evaluation of a Heart Murmur 1050
This JAMA Diagnostic Test Interpretation article by Foppa and colleagues presents the case of a 91-year-old woman with a history of hypertension who presented for a routine office visit. She denied chest pain, dyspnea on exertion, presyncope, or orthopnea. Her blood pressure was 140/76 mm Hg. Her lungs were clear. Cardiac examination demonstrated a regular rate and rhythm, normal S1, and systolic and diastolic murmurs. A 2-dimensional Doppler transthoracic echocardiogram was performed to assess valvular function, cardiac chamber size, and cardiac wall thickness. How would you interpret the echocardiography findings?

From The Medical Letter: Drugs for Chronic Heart Failure 1052
This Medical Letter on Drugs and Therapeutics article provides a concise summary of recommendations for drug treatment of patients with chronic heart failure with reduced ejection fraction—defined as a left ventricular ejection fraction of 40% or less. Briefly, unless contraindicated, all patients should be prescribed both an angiotensin-converting enzyme inhibitor and a β-blocker. A diuretic should be added if there is volume overload. An aldosterone antagonist can be considered for patients who are symptomatic or have left ventricular dysfunction after myocardial infarction.

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