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## SELECCIÓN DE REFERENCIAS BIBLIOGRÁFICAS DE LO PUBLICADO EN RELACIÓN CON ATENCIÓN PRIMARIA

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*PAUTAS MUNDIALES DE RESPUESTA A BRONCODILADORES: RESULTADOS DEL ESTUDIO CARGA DE ENFERMEDAD PULMONAR OBSTRUCTIVA*

## ACADEMIC MEDICINE

### S22722352

Findings suggest that positive mental health attenuates some adverse consequences of burnout. Medical student wellness programs should aspire to prevent burnout and promote mental health.

## ANNALS OF INTERNAL MEDICINE

### S22910935

Validation of the LLP risk model in 3 independent external data sets demonstrated good discrimination and evidence of predicted benefits for stratifying patients for lung cancer CT screening. Further studies are needed to prospectively evaluate model performance and evaluate the optimal population risk thresholds for initiating lung cancer screening.

### S22868837

The USPSTF recommends exercise or physical therapy and vitamin D supplementation to prevent falls in community-dwelling adults aged 65 years or older who are at increased risk for falls. (Grade B recommendation)The USPSTF does not recommend automatically performing an in-depth multifactorial risk assessment in conjunction with comprehensive management of identified risks to prevent falls in community-dwelling adults aged 65 years or older because the likelihood of benefit is small. In determining whether this service is appropriate in individual cases, patients and clinicians should consider the balance of benefits and harms on the basis of the circumstances of prior falls, comorbid medical conditions, and patient values. (Grade C recommendation).

### S22910933

Colonoscopy-related factors are more important than polyp characteristics for stratification of colorectal cancer risk after colonoscopic polyp detection in the community setting.

### S22868833

Epidemiologic context and the number of cases of FRI that a physician had recently seen were associated with his or her likelihood to prescribe antimicrobials for FRI. Interventions that enhance a physician's contextual awareness may improve antimicrobial use.

## ARCHIVES OF INTERNAL MEDICINE

### S22801930

Walking speed could be a simple measure to identify elderly adults who are most at risk for adverse outcomes related to high BP.

## ARCHIVOS DE BRONCONEUMOLOGIA

### S22537593

Transcurridos 10 años desde la aparición de la primera estrategia GOLD (Global Strategy for the Diagnosis, Management, and Prevention of COPD) sobre la enfermedad pulmonar obstructiva crónica (EPOC), la nueva revisión publicada en la web de GOLD a finales del año 2011 supone un cambio significativo en lo que respecta al abordaje diagnóstico, evaluación clínica y planteamiento terapéutico de la enfermedad. En esta revisión se debaten no solo los aspectos más significativos que permanecen relativamente intactos sino también, y sobre todo, los que se han modificado de forma sustancial respecto a la revisión GOLD de 2006.

### S22341300

La valoración de la discapacidad en los pacientes con enfermedades respiratorias está regulada por el Ministerio de Trabajo y Asuntos Sociales, al igual que las discapacidades de cualquier otro sistema; sin embargo, creemos que su evaluación es especialmente complicada, ya que al tratarse de procesos crónicos, interrelacionan con otros sistemas y además en ocasiones cursan en brotes, por lo que pueden alternar períodos de normalidad con otros de limitación funcional importante.

El presente documento tiene su origen en la voluntad de la SEPAR de actualizar el tema y de dar respuesta a la solicitud de las asociaciones de pacientes con enfermedades respiratorias que así nos lo requirieron. En el mismo efectuamos un análisis de la situación actual, tanto de la legislación vigente en materia de incapacidad laboral, como de la determinación de los grados y porcentaje de discapacidad, así como de los criterios actualmente vigentes para la asignación de discapacidad atribuible a deficiencias del aparato respiratorio. Por último, se proponen unas líneas de trabajo que permitirían mejorar el escenario existente y delimitar esta valoración para patologías concretas.

## ATENCION PRIMARIA

### S22055915

El primer artículo de esta serie sobre seguridad clínica lo dedicamos a la epidemiología y a las políticas preventivas de tipo sistémico. En la presente revisión nos centraremos en los errores médicos con especial énfasis en los errores de tipo diagnóstico. Estos errores derivan de las características a veces elusivas de la propia enfermedad, las circunstancias en que el paciente presenta sus síntomas, y las características del propio profesional. Si consideráramos al clínico como una «máquina de diagnóstico» -paradigma del «médico-robot»-, nos sería más fácil admitir unas limitaciones cognitivas, y poner en marcha estrategias institucionales que humanizarían el trato que en ocasiones recibe. De manera más concreta examinaremos 3 estrategias de mejora del razonamiento clínico: reconocimiento de situaciones peligrosas, metacognición y supervisor interno.

Evolución de la incidencia de la hemorragia digestiva alta en España en relación con el consumo de antiulcerosos  
Se detecta un elevado incremento del consumo de fármacos antiulcerosos sin que tenga relación con la tendencia evolutiva de los ingresos por HDA.

**S22341703**

La revisión sistemática de la medicación mejora la adecuación de uso del tratamiento antiagregante en ancianos polimedcados en alto riesgo vascular, sin afectar negativamente su calidad de vida. No se constatan mejoras en otras variables.

## BRITISH JOURNAL OF PSYCHIATRY

**S22576725**

Adjustment disorder shows a distinct profile as an intermediate category between no mental disorder and affective disorders (depression and anxiety disorders).

**S22859576**

Clinicians may consider simple screening methods such as self-report tools rather than relying on unassisted clinical judgement but the added value of screening over and above clinical diagnosis remains unclear.

## BRITISH MEDICAL JOURNAL

**S22872710**

Published data assessing the risk of venous thromboembolism in women prescribed progestin-only contraception are limited. In this meta-analysis of eight observational studies, the use of progestin-only contraception was not associated with an increased risk of venous thromboembolism compared with non-users of hormonal contraception. The potential association between injectable progestins and thrombosis requires further study

**S22782731**

The lack of a specific association and the discrepancy between findings of the analyses between and within people suggests that the interaction between proton pump inhibitors and clopidogrel is clinically unimportant.

**S22872695**

The LiFE programme provides an alternative to traditional exercise to consider for fall prevention. Functional based exercise should be a focus for interventions to protect older, high risk people from falling and to improve and maintain functional capacity.

**S22807076**

The multifaceted, semi-tailored intervention with counselling, education, and support for patients with mild Alzheimer's disease and their care givers did not have any significant effect beyond that with well structured follow-up support at 12 months after adjustment for multiple comparisons. The small positive effect found in the unadjusted primary outcome addressing depressive symptoms in patients may call for further research focusing on patients with Alzheimer's disease and comorbid depression.

**S22791791**

No single vaccination strategy was most cost effective across countries. With aging populations, pre-existing immunity in particular could be of crucial importance for the cost effectiveness of options to mitigate a future influenza pandemic.

**S22867913**

Physiotherapy has short term benefits in Parkinson's disease. A wide range of physiotherapy techniques are currently used to treat Parkinson's disease, with little difference in treatment effects. Large, well designed, randomised controlled trials with improved methodology and reporting are needed to assess the efficacy and cost effectiveness of physiotherapy for treating Parkinson's disease in the longer term.

**S22786934**

The best evidence available points towards a putative protective role of ACE inhibitors but not ARBs in risk of pneumonia. Patient populations that may benefit most are those with previous stroke and Asian patients. ACE inhibitors were also associated with a decrease in pneumonia related mortality, but the data lacked strength.

**S22782848**

Smoking cessation is associated with a mean increase of 4-5 kg in body weight after 12 months of abstinence, and most weight gain occurs within three months of quitting. Variation in weight change is large, with about 16% of quitters losing weight and 13% gaining more than 10 kg.

## CANADIAN MEDICAL ASSOCIATION JOURNAL

### **S22777991**

Iron supplementation should be considered for women with unexplained fatigue who have ferritin levels below 50 µg/L. We suggest assessing the efficiency using blood markers after six weeks of treatment

### **S22586331**

Patients who presented with acute or persistent low-back pain improved markedly in the first six weeks. After that time improvement slowed. Low to moderate levels of pain and disability were still present at one year, especially in the cohorts with persistent pain.

## **DIABETES CARE**

### **S22723343**

Modest levels of physical activity are associated with a lower risk of incident diabetes, compared with lower levels of activity.

### **S22566535**

Screening people with type 2 diabetes, who have not yet developed retinopathy, every 2 years, rather than annually, is a safe and cost-effective strategy. Our findings support those of other studies, and we therefore recommend a review of the current National Institute for Health and Clinical Excellence (NICE) guidelines for diabetic retinopathy screening implemented in the U.K.

### **S22688549**

Regular exercise reduces the risk of type 2 diabetes in overweight/obese individuals. Particularly, regular exercise and weight or waist circumference control are critical factors for preventing diabetes in overweight/obese individuals with IFG.

Our results seem to indicate that the A1C test criterion alone or in combination with fasting glucose test criterion does not provide a sensitive and specific diagnosis of abnormal carbohydrate metabolism in women who have had GDM.

## **DRUGS**

### **S22834678**

Atrial fibrillation (AF) is a common cardiac arrhythmia that is associated with severe consequences, including symptoms, haemodynamic instability, increased cardiovascular mortality and stroke. While other arrhythmias such as torsades de pointes and sinus bradycardia are more typically thought of as drug induced, AF may also be precipitated by drug therapy, although ascribing causality to drug-associated AF is more difficult than with other drug-induced arrhythmias. Drug-induced AF is more likely to occur in patients with risk factors and co-morbidities that commonly co-exist with AF, such as advanced age, alcohol consumption, family history of AF, hypertension, thyroid dysfunction, sleep apnoea and heart disease. New-onset AF has been associated with cardiovascular drugs such as adenosine, dobutamine and milrinone. In addition, medications such as corticosteroids, ondansetron and antineoplastic agents such as paclitaxel, mitoxantrone and doxorubicin have been reported to induce AF. Whether bisphosphonate drugs are associated with new-onset AF remains controversial and requires further study. The potential contribution of specific drug therapy should be considered when patients present with new-onset AF.

### **S22867043**

The epidemiology of peptic ulcer disease (PUD) has undergone significant changes since the discovery of *Helicobacter pylori*. Various aetiologies contribute to recurrent PUD. Ulcers related to untreated *H. pylori* infection tend to recur. Use of NSAIDs, low-dose aspirin and dual anti-platelet therapy have become important risk factors for recurrent ulcers and their complications as the proportion of *H. pylori*-related ulcers declines. Recent data have shown that *H. pylori*-negative, NSAID-negative idiopathic peptic ulcers are on the rise and carry a higher risk of recurrent ulcer bleeding and mortality. Effective management of recurrent PUD relies on identification and modification of treatable risk factors. Persistent *H. pylori* infection should be carefully ruled out. Choice of an effective *H. pylori* eradication regimen should be based on local antibacterial resistance patterns. For patients who need long-term NSAID therapy, the initial choice of an NSAID relates to a patient's cardiovascular risk, and the need for therapy to decrease gastrointestinal (GI) complications is determined by the severity and number of GI risk factors. For patients on dual anti-platelet therapy, strategies to prevent recurrent ulcer disease and its complications centre on balancing the bleeding and thrombotic risks of individual patients. Long-term proton pump inhibitor maintenance therapy may be necessary to prevent recurrent ulcer bleeding for patients with ulcer bleeding from *H. pylori*-negative, NSAID-negative ulcers, and for patients who require NSAID or aspirin maintenance therapy.

### **S22867042**

Age-related hormonal decline is gradual and less recognized in men than in women. Symptoms are oftentimes ignored and non-specific. Fatigue, lack of concentration, mood swings, decreased sexual desire, erectile dysfunction, infertility, hair loss, reduced muscle and bone mass, and weight gain are a few of the symptoms of male hypogonadism. This disorder is linked to reduction in quality of life, and poorer health outcomes as it may increase the risk for cardiovascular disease, diabetes mellitus, metabolic syndrome, Alzheimer's disease and premature death. Different modalities of testosterone replacement therapy have evolved over 70 years, and sales continue to grow. Each preparation is differentiated by route of delivery, ease of use, cost and pharmacokinetics. Topical/transdermal testosterone replacement therapy, including patches and gels, are the most modern

formulations on the market. These are more expensive treatments, but yield more physiological concentrations of testosterone. Restoration of testosterone levels to the eugonadal range reverses signs and symptoms of hypogonadism, except for infertility, and may alleviate co-morbidities associated with hypogonadism. Patient understanding of and compliance with both treatment and monitoring are of utmost importance to achieve clinical success with maximum benefit and minimum risk. The aim of our review is to summarize the indications, contraindications, benefits and risks of testosterone replacement therapy as they relate to transdermal administration. Further, we compare the various testosterone preparations, focusing on the newest topical/transdermal routes of administration that are currently available.

#### **S22867046**

Subcutaneous exenatide extended-release (ER; Bydureon™; also known as exenatide once weekly), a glucagon-like peptide-1 receptor agonist, provides a convenient, simple, once-weekly regimen that is approved in adult patients with type 2 diabetes as adjunctive monotherapy to diet plus exercise (in the US; not as first-line therapy) and/or as combination therapy with specific oral antihyperglycaemic drugs (OADs) in patients with inadequately controlled type 2 diabetes despite treatment with these OADs (US and Europe). This article reviews the clinical efficacy and tolerability of exenatide ER in the treatment of adult patients with type 2 diabetes and gives a brief overview of its pharmacological properties. In several short-term (24-30 weeks) well designed trials, adjunctive subcutaneously injectable exenatide ER once weekly, as monotherapy or in combination with OADs, significantly improved glycaemic control, bodyweight and some surrogate markers of cardiovascular risk in adult patients with inadequately controlled type 2 diabetes despite diet and exercise and/or treatment with OADs. Furthermore, the beneficial effects of adjunctive exenatide ER therapy were sustained in extension studies of up to 3 years of treatment. Overall, the intensity of glycaemic control with exenatide ER was generally better than that observed with the exenatide immediate-release formulation (twice daily), sitagliptin or insulin glargine. Exenatide ER was shown to be noninferior to metformin in terms of glycaemic efficacy, but did not meet the criteria for noninferiority versus liraglutide. In treatment-naïve patients, exenatide ER treatment did not meet noninferiority criteria versus pioglitazone, whereas in treatment-experienced patients, exenatide ER provided better glycaemic control than pioglitazone. Improvements in glycaemic control with exenatide ER and, in general, with other antihyperglycaemic agents were reflected in significant improvements from baseline in treatment satisfaction and health-related quality-of-life measures. Exenatide ER was generally well tolerated in patients participating in these trials, with most treatment-emergent adverse events being of a gastrointestinal nature, of mild to moderate severity, transient and of a similar nature and incidence to those occurring with the exenatide immediate-release formulation. Thus, exenatide ER is a useful option for the treatment of type 2 diabetes, particularly in patients where bodyweight loss is an essential aspect of the individual patient's management.

### **EUROPEAN HEART JOURNAL**

#### **S22108833**

Whereas safety measures appear to have limited serious cardiovascular consequences of COX-2 inhibitors, the risk of developing atrial fibrillation may have been overlooked and may necessitate consideration and precautions.

### **FAMILY PRACTICE**

#### **S22117083**

AOBP virtually eliminated office-induced hypertension. The decrease in MOBP was attributed to participation in a research study and not to any specific intervention.

#### **S22121012**

Cognitive impairment is probably underdiagnosed in primary care. The combination of the FAQ and the MMS had excellent performance for dementia detection; however, no satisfactory instrument or instrument combination could be found for cognitive impairment.

#### **S22159030**

The evidence for the benefits of POC CRP measurement in LRTI patients in primary care is limited, contradictory and does not support its use to guide treatment decisions yet.

#### **S22247287**

Although the most common cause of jaundice is bile duct stones, cancers are present in over a quarter of patients with jaundice in this study, demonstrating the importance of urgent investigation into the underlying cause.

#### **S22147242**

Depressive symptoms were more common in Russia than in Korea and USA but had less impact on daily functioning. Cultural or environmental factors may account for this finding.

#### **S22223743**

Many Canadian seniors have an elevated risk of adverse events due to taking a high number of prescription medications and not having the potential side effects and drug interactions explained to them. There are interventions that can potentially reduce polypharmacy and adverse events, including routine medication reviews.

### **GUT**

#### **S22110052**

In routine practice, the risk of colorectal cancer after adenoma removal remains high and depends both on initial adenoma features and on colonoscopy surveillance practices. Gastroenterologists should encourage patients to comply with long-term colonoscopic surveillance.

**S21997545**

When assuming a suboptimal efficacy of endoscopy in preventing CRC, the addition of low-dose aspirin may be an effective and cost-effective strategy, mainly because of its high efficacy in preventing proximal CRC.

## **JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION**

**S22910757**

The addition of common CIMT measurements to the Framingham Risk Score was associated with small improvement in 10-year risk prediction of first-time myocardial infarction or stroke, but this improvement is unlikely to be of clinical importance.

**S22910756**

Coronary artery calcium, ankle-brachial index, high-sensitivity CRP, and family history were independent predictors of incident CHD/CVD in intermediate-risk individuals. Coronary artery calcium provided superior discrimination and risk reclassification compared with other risk markers.

**S22893165**

Among women receiving care in primary care clinics, providing a partner violence resource list with or without screening did not result in improved health.

**S22851113**

Compared with guideline-based usual care, exercise training resulted in a modest reduction in depressive symptoms, although the clinical significance of this improvement is unknown.

## **REVISTA ESPAÑOLA DE CARDIOLOGIA**

**S22464104**

En una serie amplia y contemporánea de pacientes de nuestro medio con insuficiencia cardiaca, fracción de eyección del ventrículo izquierdo =35% y ritmo sinusal, un 26% recibían anticoagulación. Ello no se asoció a menor mortalidad ni incidencia de ictus aunque se observó una reducción de una combinación de eventos cardiacos mayores.

**S22739550**

Persiste una elevada proporción de pacientes sintomáticos y con reducción de la calidad de vida. La percepción del paciente sobre la enfermedad es peor que la del médico.

**S22763183**

El tratamiento de la cardiopatía isquémica estable ha evolucionado durante la última década. Los FRCV se controlan mejor, se realiza más revascularización coronaria y han aparecido nuevas medicaciones. A pesar de ello, persiste una elevada proporción de pacientes sintomáticos. La percepción de la enfermedad es diferente entre pacientes y médicos: en general, los médicos perciben la enfermedad menos grave y menos invalidante que la percibida por los propios pacientes. Además, la satisfacción del paciente con el tratamiento antianginoso se mantiene muy similar a la de estudios publicados hace 9 años.

## **THE LANCET**

**S22748821**

The results of this long-term randomised active-controlled trial advance the clinical evidence and comparative effectiveness bases for treatment options available to patients with type 2 diabetes mellitus. The findings could improve decision making for clinical treatment when metformin alone is insufficient.

**S22883507**

In the JUPITER primary prevention trial, the cardiovascular and mortality benefits of statin therapy exceed the diabetes hazard, including in participants at high risk of developing diabetes.

**S22883509**

High blood pressure is reported in over two-thirds of patients with type 2 diabetes, and its development coincides with the development of hyperglycaemia. Many pathophysiological mechanisms underlie this association. Of these mechanisms, insulin resistance in the nitric-oxide pathway; the stimulatory effect of hyperinsulinaemia on sympathetic drive, smooth muscle growth, and sodium-fluid retention; and the excitatory effect of hyperglycaemia on the renin-angiotensin-aldosterone system seem to be plausible. In patients with diabetes, hypertension confers an enhanced risk of cardiovascular disease. A blood pressure of lower than 140/85 mm Hg is a reasonable therapeutic goal in patients with type 2 diabetes according to clinical trial evidence. People with controlled diabetes have a similar cardiovascular risk to patients without diabetes but with hypertension. A renin-angiotensin system blocker combined with a thiazide-type diuretic might be the best initial antihypertensive regimen for most people with diabetes. In general, the positive effects of antihypertensive drugs on cardiovascular outcomes outweigh the negative effects of antihypertensive drugs on glucose metabolism.

**S22691567**



Under the circumstances of the ICTUS trial, citicoline is not efficacious in the treatment of moderate-to-severe acute ischaemic stroke.

**S22748820**

Early administration of intravenous aspirin in patients with acute ischaemic stroke treated with alteplase does not improve outcome at 3 months and increases the risk of SICH. The results of this trial do not support a change of the current guidelines, which advise to start antiplatelet therapy 24 h after alteplase.

**S22819660**

Epidemics of HIV in men who have sex with men (MSM) continue to expand in most countries. We sought to understand the epidemiological drivers of the global epidemic in MSM and why it continues unabated. We did a comprehensive review of available data for HIV prevalence, incidence, risk factors, and the molecular epidemiology of HIV in MSM from 2007 to 2011, and modelled the dynamics of HIV transmission with an agent-based simulation. Our findings show that the high probability of transmission per act through receptive anal intercourse has a central role in explaining the disproportionate disease burden in MSM. HIV can be transmitted through large MSM networks at great speed. Molecular epidemiological data show substantial clustering of HIV infections in MSM networks, and higher rates of dual-variant and multiple-variant HIV infection in MSM than in heterosexual people in the same populations. Prevention strategies that lower biological transmission and acquisition risks, such as approaches based on antiretrovirals, offer promise for controlling the expanding epidemic in MSM, but their potential effectiveness is limited by structural factors that contribute to low health-seeking behaviours in populations of MSM in many parts of the world.

**S22920739**

Although the public prominence of coeliac disease has increased, people who are unaware of their sensitivity to gluten can suffer for years from poorly defined but debilitating symptoms. In a recent study in the American Journal of Gastroenterology by James Everhart and colleagues, results from a nationally representative survey of about 7800 people indicated that the prevalence of coeliac disease in the USA is as high as 0.71% (one in 141)—a burden that seems to fall largely among white non-Hispanic people.

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So far, the only treatment for coeliac disease is a strict and lifelong gluten-free diet, which involves avoiding foods containing wheat, rye, and barley. Patients' compliance is important, but challenging, given the ubiquity of gluten in processed foods. Despite the practical complications, an estimated 1.6 million USA citizens choose to abstain from gluten. Most of these do not have coeliac disease, but make this lifestyle choice for other perceived health benefits. The irony of many coeliac patients not knowing their diagnosis, while millions of non-sufferers banish gluten from their lives, is a public health farce. The American Journal of Gastroenterology paper highlights the need for greater public awareness of the symptoms of coeliac disease. More research is also needed into the systemic effects of gluten abstinence in healthy people, and for the development of non-dietary treatments for coeliac disease.

**S22607822**

In individuals with 5-year risk of major vascular events lower than 10%, each 1 mmol/L reduction in LDL cholesterol produced an absolute reduction in major vascular events of about 11 per 1000 over 5 years. This benefit greatly exceeds any known hazards of statin therapy. Under present guidelines, such individuals would not typically be regarded as suitable for LDL-lowering statin therapy. The present report suggests, therefore, that these guidelines might need to be reconsidered.

**S22901888**

The first wave of GATS showed high rates of smoking in men, early initiation of smoking in women, and low quit ratios, reinforcing the view that efforts to prevent initiation and promote cessation of tobacco use are needed to reduce associated morbidity and mortality.

## THE NEW ENGLAND JOURNAL OF MEDICINE

**S22784036**

We found that autosomal dominant Alzheimer's disease was associated with a series of pathophysiological changes over decades in CSF biochemical markers of Alzheimer's disease, brain amyloid deposition, and brain metabolism as well as progressive cognitive impairment. Our results require confirmation with the use of longitudinal data and may not apply to patients with sporadic Alzheimer's disease.

**S22784037**

Oral TDF and TDF-FTC both protect against HIV-1 infection in heterosexual men and women.

**S22931315**

Among patients with recent lacunar strokes, the addition of clopidogrel to aspirin did not significantly reduce the risk of recurrent stroke and did significantly increase the risk of bleeding and death.

**S22894572**

The benefit of PSA screening was diminished by loss of QALYs owing to postdiagnosis long-term effects. Longer follow-up data from both the ERSPC and quality-of-life analyses are essential before universal recommendations regarding screening can be made. (Funded by the Netherlands Organization for Health Research and Development and others.).

## THORAX

### **S22628120**

A 2-week course of amoxicillin clavulanate will achieve cough resolution in a significant number of children with chronic wet cough. BAL data support the diagnosis of PBB in the majority of these children

### **S22544896**

The results provide reference values for bronchodilator responses worldwide that confirm guideline estimates for a clinically significant level of BDR in bronchodilator testing.