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¿DEBERÍAMOS PERSEGUIR EL DIAGNÓSTICO MÁS PRECOZ DEL CÁNCER DE PULMÓN EN PACIENTES SINBTOMÁTICOS?

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DIAGNÓSTICO PRECOZ DE CÁNCER DE PULMÓN: EVALUACIÓN DE UNA INTERVENCIÓN DE MARKETING SOCIAL COMUNITARIO

ANNALS OF INTERNAL MEDICINE

S22586006

A CCMP in patients with severe COPD had not decreased COPD-related hospitalizations when the trial was stopped prematurely. The CCMP was associated with unanticipated excess mortality, results that differ markedly from similar previous trials. A data monitoring committee should be considered in the design of clinical trials involving behavioral interventions.

S22547473

Extremely dense breasts and first-degree relatives with breast cancer were each associated with at least a 2-fold increase in risk for breast cancer in women aged 40 to 49 years. Identification of these risk factors may be useful for personalized mammography screening.

S22586009

Most studies that are cited for the risk for CRC when relatives have adenomas do not address the issue. The 2 studies that do address the issue suggest an increased risk but have important methodological limitations. Properly designed studies are needed to measure the risk and identify the factors that modify it.

S22412038

Compared with LMWH, lower doses of oral factor Xa inhibitors can achieve a small absolute risk reduction in symptomatic deep venous thrombosis without increasing bleeding.

S22547472

Threshold concentrations of 25-(OH)D associated with increased risk for relevant clinical disease events center near 50 nmol/L (20 ng/mL). Season-specific targets for 25-(OH)D concentration may be more appropriate than static targets when evaluating health risk

S22547470

Women aged 40 to 49 years with a 2-fold increased risk have similar harm-benefit ratios for biennial screening mammography as average-risk women aged 50 to 74 years. Threshold RRs required for favorable harm-benefit ratios vary by screening method, interval, and outcome measure.

ACADEMIC MEDICINE

S22450184

The Accreditation Council for Continuing Medical Education mandates that continuing medical education (CME) be developed around professional practice gaps. Accordingly, CME course directors must identify the intended learners, assess learners' needs, identify gaps in knowledge, and evaluate their CME activities. Writing gap statements is challenging for CME course directors because there is not a universally accepted format for writing these statements. The authors describe a practical approach to defining gaps for CME accreditation, which involves four steps indicated by the mnemonic LASO (learner, assessment, standard, outcomes): (1) define the learner population's characteristics, (2) create a learning needs assessment, (3) determine if the standard is met, and (4) state educational outcome for the CME activity. Based on this model, the difference between the practice standard and the current practice represents the gap in practice. The LASO approach has assisted in making CME content learner centered, relevant, and measurable at the authors' institution. The authors anticipate that LASO will be able to provide all CME course directors with a practical approach to defining educational gaps for CME accreditation.

S22450183

The 2002 reformatting of the standards enhanced the clarity of each standard and connected previously existing annotations to their standards. As a result of the reformatting, all documents and communications to schools were directly tied to specific standards. This has allowed the LCME to more easily identify areas of chronic noncompliance and to improve survey team training. The shift in patterns of standards out of compliance in the more recent time period is consistent with the effect of the reformatting. There may be other contributing factors for the increase in severe action decisions, but it is clear that the reformatting of standards has improved the LCME's ability to monitor medical education programs.

ARTHRITIS AND RHEUMATISM

S22135156

The present longitudinal study revealed a high incidence of radiographic knee OA in Japan.

S22139828

Our findings indicate that patients with erosive OA have more functional impairment and significantly more pain compared to patients with controlled inflammatory arthritis affecting the hands. This highlights the significant clinical burden of erosive OA and warrants the search for new treatment strategies.

S22287295

Our findings, in one of the largest studies to systematically assess lumbar disc degeneration on MRI, indicated a significant association between the presence, extent, and global severity of disc degeneration with weight in overweight and obese adults.

[S22139851](#)

Our findings provide the first US national prevalence estimates for HLA-B27. A decline in the prevalence of HLA-B27 with age is suggested by these data but must be confirmed by additional studies.

ARCHIVES OF INTERNAL MEDICINE

[S22493407](#)

Our meta-analysis showed insufficient evidence of a secondary preventive effect of omega-3 fatty acid supplements against overall cardiovascular events among patients with a history of cardiovascular disease.

ARCHIVOS DE BRONCONEUMOLOGIA

[S22364671](#)

En este artículo revisamos primero por pruebas (espirometría, prueba de reversibilidad, flujo espiratorio pico, volúmenes pulmonares, presiones respiratorias máximas, transferencia de monóxido de carbono, gasometría arterial, prueba de marcha de 6min y desaturación con ejercicio y ergoespirometría), y luego por patologías más frecuentes (disnea no aclarada, tos crónica, asma, EPOC, enfermedades neuromusculares, enfermedades intersticiales, enfermedades vasculares pulmonares, valoración preoperatoria y valoración de la discapacidad), la utilidad de las pruebas funcionales respiratorias más habituales desde la perspectiva de la toma de decisiones, de la interpretación clínica o de aspectos que el clínico debe tener en cuenta a la hora de utilizarlas. En consecuencia, no se incide en aspectos de calidad, de la técnica ni de los equipos, salvo referencia a los costos, porque pensamos que es un elemento importante en la toma de decisiones. El documento está ampliamente fundamentado con referencias a la literatura.

ATENCION PRIMARIA

[S22221963](#)

Los resultados de este estudio permiten hacer una crítica constructiva sobre el papel del médico en atención primaria, valorar las ventajas y replantearnos los inconvenientes relacionados con nuestra forma de trabajar con el fin de aprender de otros sistemas organizativos.

[S21955598](#)

Tras la validación lingüística del IPQ-Re y del BIPQ, se obtuvieron versiones conceptual y lingüísticamente equivalentes a los cuestionarios originales.

[S21924796](#)

Creemos que un sistema de vigilancia sindrómica, basado en la historia electrónica de atención primaria, permite acceder en tiempo real a la información, muy útil especialmente en los períodos de elevada incidencia de gripe como los períodos epidémicos o la pasada pandemia.

[S21733598](#)

El accidente se produjo, fundamentalmente, en el hogar, en día laborable y como consecuencia de caídas. Los grupos de edad más afectados fueron los menores de 15 años y = 65 años.

BRITISH JOURNAL OF PSYCHIATRY

[S22550328](#)

Mindfulness-based cognitive therapy (MBCT) was developed as a psychological approach for people at risk for depressive relapse who wish to learn how to stay well in the long-term. In this article we set out the rationale for MBCT, outline the treatment approach, overview the efficacy research to date and look to future challenges

[S22442102](#)

Emails promoting self-help strategies were beneficial. Internet delivery of self-help messages affords a low-cost, easily disseminated and highly automated approach for indicated prevention of depression.

BRITISH MEDICAL JOURNAL

[S22539176](#)

Prevention of non-suicidal self injury in young adolescents should focus on helping bullied children to cope more appropriately with their distress. Programmes should target children who have additional mental health problems, have a family history of attempted/completed suicide, or have been maltreated by an adult.

[S22628003](#)

Several risk prediction models for cardiovascular disease are available and their head to head comparisons would benefit from standardised reporting and formal, consistent statistical comparisons. Outcome selection and optimism biases apparently affect this literature.

[S22563098](#)

This meta-analysis-which included all trials published to date, focused on events occurring during drug exposure, and analysed findings using four summary estimates-found no significant increase in cardiovascular serious adverse events associated with varenicline use. For rare outcomes, summary estimates based on absolute effects are recommended and estimates based on the Peto odds ratio should be avoided.

[S22491789](#)

Antibiotics are both effective and safe as primary treatment for patients with uncomplicated acute appendicitis. Initial antibiotic treatment merits consideration as a primary treatment option for early uncomplicated appendicitis.

[S22551713](#)

This large cohort study found no evidence of an increased risk of fetal death associated with exposure to an adjuvanted pandemic A/H1N1 2009 influenza vaccine during pregnancy.

[S22517917](#)

SPARX is a potential alternative to usual care for adolescents presenting with depressive symptoms in primary care settings and could be used to address some of the unmet demand for treatment.

CANADIANMEDICAL ASSOCIATIONB JOURNAL

[S22470169](#)

People using oral bisphosphonates for the first time may be at a higher risk of scleritis and uveitis compared to people with no bisphosphonate use. Patients taking bisphosphonates must be familiar with the signs and symptoms of these conditions, so that they can immediately seek assessment by an ophthalmologist.

[S22451686](#)

Negative responses to both of the case-finding questions showed acceptable accuracy for ruling out perinatal depression. For positive responses, the use of a third question about the need for help improved specificity and the ability to rule in depression.

CIRCULATION

[S22456473](#)

In a middle-aged community sample, we identified multiple biomarkers that were associated with clinical and subclinical vascular brain injury and could improve risk stratification.

[S22514252](#)

In almost all patients with atrial fibrillation, the risk of ischemic stroke without anticoagulant treatment is higher than the risk of intracranial bleeding with anticoagulant treatment. Analysis of the net benefit indicates that more patients may benefit from anticoagulant treatment.

[S22539783](#)

In a population at 2% average coronary event risk per year, cholesterol, apolipoprotein, and particle measures of LDL were strongly correlated and had similar predictive values for incident major occlusive vascular events. It is unclear whether the associations between HDL particle numbers and other cardiac events represent a causal or reverse-causal effect.

[S22514251](#)

A link between oral health and cardiovascular disease has been proposed for more than a century. Recently, concern about possible links between periodontal disease (PD) and atherosclerotic vascular disease (ASVD) has intensified and is driving an active field of investigation into possible association and causality. The 2 disorders share several common risk factors, including cigarette smoking, age, and diabetes mellitus. Patients and providers are increasingly presented with claims that PD treatment strategies offer ASVD protection; these claims are often endorsed by professional and industrial stakeholders. The focus of this review is to assess whether available data support an independent association between ASVD and PD and whether PD treatment might modify ASVD risks or outcomes. It also presents mechanistic details of both PD and ASVD relevant to this topic. The correlation of PD with ASVD outcomes and surrogate markers is discussed, as well as the correlation of response to PD therapy with ASVD event rates. Methodological issues that complicate studies of this association are outlined, with an emphasis on the terms and metrics that would be applicable in future studies. Observational studies to date support an association between PD and ASVD independent of known confounders. They do not, however, support a causative relationship. Although periodontal interventions result in a reduction in systemic inflammation and endothelial dysfunction in short-term studies, there is no evidence that they prevent ASVD or modify its outcomes.

DIABETES CARE

[S22410812](#)

DM and higher levels of HbA(1c) were associated with lower prevalence of GI symptoms but higher prevalence of endoscopic abnormalities.

[S22517938](#)

Our results indicate a bidirectional association between depression and MetS. These results support early detection and management of depression among patients with MetS and vice versa.

[S22374636](#)

Interrupting sitting time with short bouts of light- or moderate-intensity walking lowers postprandial glucose and insulin levels in overweight/obese adults. This may improve glucose metabolism and potentially be an important public health and clinical intervention strategy for reducing cardiovascular risk.

[S22432105](#)

With intensification of traditional therapies, glycemic control deteriorated very little over 5 years in a large cohort of type 2 diabetes. However, the requirement for insulin therapy doubled, at the expense of significant weight gain and risk of hypoglycemia.

[S22456865](#)

HbA(1c) trajectory increased sharply after gradual long-term increases in diabetic individuals.

[S22446177](#)

This study demonstrates that the combination of diabetes and impaired HRF is associated with substantially higher CVD mortality. This suggests that, among those with diabetes, impaired HRF is likely to be important in the identification of individuals at increased risk of CVD mortality.

[S22399700](#)

A short 30-min session of moderate-intensity endurance-type exercise substantially reduces the prevalence of hyperglycemia throughout the subsequent day in type 2 diabetic patients. When total work is being matched, daily exercise does not further improve daily glycemia compared with exercise performed every other day.

[S22399697](#)

Optimal 25(OH)D levels substantially lowered all-cause and cardiovascular disease mortality in subjects with the metabolic syndrome. These observations call for interventional studies that test whether vitamin D supplementation provides a useful adjunct in reducing mortality in these subjects.

DRUGS

[S22564130](#)

Despite well known complications, oral nonsteroidal anti-inflammatory drugs (NSAIDs) remain the most commonly prescribed medications in the US for musculoskeletal disorders such as osteoarthritis. Although there has been a recent focus on the cardiovascular and renal complications associated with these agents, NSAID gastropathy continues to be a particular concern in many patients, especially those at increased risk for serious adverse events, including the elderly. Complicating the diagnosis of NSAID gastropathy is its silent course, which, up to half of the time, is asymptomatic. Several strategies are currently employed by physicians to mitigate the risk of serious gastrointestinal events. These include either addition of a proton pump inhibitor to current nonselective NSAID therapy or the use of a cyclo-oxygenase-2-selective NSAID. Although these agents are effective at mitigating the overall risk of gastrointestinal adverse events, they fail to address NSAID-related cardiovascular and renal risks. Due to their reduced systemic absorption, topical NSAIDs may present a viable option for patients at increased risk for serious NSAID-related adverse events, including gastropathy.

[S22564131](#)

Paediatric obsessive-compulsive disorder (OCD) is a common, yet under-recognized, neuropsychiatric illness in both clinical and community settings. Symptoms tend to be hidden or misunderstood by affected youth, and parents may inadvertently accommodate OCD, thus worsening its severity. These symptoms may include compulsive reassurance seeking, confessing and 'just right' rituals, in addition to more classic OCD behaviours. Fortunately, numerous psychometric measures are available to assist in clinical assessment of this disorder and its sequelae. Once properly diagnosed, paediatric OCD is highly treatable with empirically proven approaches including cognitive-behaviour therapy (CBT) and serotonin reuptake inhibitor (SRI) medications. Clinically meaningful symptom improvement is the norm following these strategies, although full remission is not, as symptoms tend to wax and wane over time. Paediatric OCD is highly co-morbid with other anxiety disorders, tic disorders, depression and attention-deficit hyperactivity disorder, which also require specific attention. For moderate to severe OCD, an interdisciplinary approach combining individual and family CBT with SRI trials is recommended. For severe treatment-refractory illness, early evidence supports the benefit of augmenting agents, such as atypical antipsychotics and potentially those with glutamatergic activity. Clinical outcome assessment in paediatric OCD should always include broad domains of individual and family functioning, in addition to symptom improvement.

EUROPEAN HEART JOURNAL

[S22408036](#)

Non-alcoholic fatty liver disease (NAFLD) affects up to a third of the population worldwide and may confer increased cardiometabolic risk with consequent adverse cardiovascular outcomes independent of traditional cardiovascular risk factors and the metabolic syndrome. It is characterized almost universally by insulin resistance and is strongly associated with type 2 diabetes and obesity. Non-alcoholic fatty liver disease is a marker of pathological ectopic fat accumulation combined with a low-grade chronic inflammatory state. This results in several deleterious pathophysiological processes including abnormal glucose, fatty acid and lipoprotein metabolism, increased oxidative stress, deranged adipokine profile, hypercoagulability, endothelial dysfunction, and accelerated progression of atherosclerosis. This ultimately leads to a dysfunctional cardiometabolic phenotype with cardiovascular mortality representing the main mode of premature death in NAFLD. This review is

aimed at introducing NAFLD to the clinical cardiologist by discussing in-depth the evidence to date linking NAFLD with cardiovascular disease, reviewing the likely mechanisms underlying this association, as well as summarizing from a cardiologist's perspective, current and potential future treatment options for this increasingly prevalent disease

S22507981

Evidence assembled in this review indicates that sympathetic nervous system dysfunction is crucial in the development of heart failure and essential hypertension. This takes the form of persistent and adverse activation of sympathetic outflows to the heart and kidneys in both conditions. An important goal for clinical scientists is translation of the knowledge of pathophysiology, such as this, into better treatment for patients. The achievement of this 'mechanisms to management' transition is at different stages of development with regard to the two disorders. Clinical translation is mature in cardiac failure, knowledge of cardiac neural pathophysiology having led to the introduction of beta-adrenergic blockers, an effective therapy. With essential hypertension perhaps we are on the cusp of effective translation, with recent successful testing of selective catheter-based renal sympathetic nerve ablation in patients with resistant hypertension, an intervention firmly based on the demonstration of activation of the renal sympathetic outflow. Additional evidence in this regard is provided by the results of pilot studies exploring the possibility to reduce blood pressure in resistant hypertensives through electrical stimulation of the area of carotid baroreceptors. Despite the general importance of the sympathetic nervous system in blood pressure regulation, and the specific demonstration that the blood pressure elevation in essential hypertension is commonly initiated and sustained by sympathetic nervous activation, drugs antagonizing this system are currently underutilized in the care of patients with hypertension. Use of beta-adrenergic blocking drugs is waning, given the propensity of this drug class to have adverse metabolic effects, including predisposition to diabetes development. The blood pressure lowering achieved with carotid baroreceptor stimulation and with the renal denervation device affirms the importance of the sympathetic nervous system in hypertension pathogenesis, and perhaps suggests a wider role for anti-adrenergic antihypertensives, such as the imidazoline drug class (moxonidine, rilmenidine) which act within the CNS to inhibit central sympathetic outflow, although the lack of large-scale outcome trials with this drug class remains a very material deficiency.

S22408030

This raises the question of whether the Cardiological community dismissed digoxin too readily and if we should reappraise its potential role in the treatment of heart failure

FAMILY MEDICINE

Accepting gifts from the pharmaceutical industry has implications for the doctor-patient relationship. Doing so can undermine trust and affect patients' intent to adhere to medical recommendations.

An intervention using a learning coach to provide one-on-one EBM and information mastery instruction to residents improved residents' attitudes, knowledge, and use of both in the clinical setting.

Internet use was high among our primary care patients. The major factor associated with Internet use among patients with chronic conditions was their age. If older adults with chronic illness are to reap the benefits of health information technology, their Internet access will need to be improved. Institutions that are planning to offer consumer health information technology should be aware of groups with lower Internet access.

GUT

S22491499

Management of *Helicobacter pylori* infection is evolving and in this 4th edition of the Maastricht consensus report aspects related to the clinical role of *H pylori* were looked at again in 2010. In the 4th Maastricht/Florence Consensus Conference 44 experts from 24 countries took active part and examined key clinical aspects in three subdivided workshops: (1) Indications and contraindications for diagnosis and treatment, focusing on dyspepsia, non-steroidal anti-inflammatory drugs or aspirin use, gastro-oesophageal reflux disease and extraintestinal manifestations of the infection. (2) Diagnostic tests and treatment of infection. (3) Prevention of gastric cancer and other complications. The results of the individual workshops were submitted to a final consensus voting to all participants. Recommendations are provided on the basis of the best current evidence and plausibility to guide doctors involved in the management of this infection associated with various clinical conditions.

JOURNAL OF THE AMERICAN BOARD OF FAMILY MEDICINE

S22570392

Comprehensive primary care mental health screening that considers both anxiety and depression while including strength-based and psychosocial support questions is a helpful adjunct to clinical practices and has been done routinely by using an electronic tool at the point of care. Because certain common somatic and emotional

concerns can precede depression and anxiety, routine screening for these issues along with depression and anxiety screening is suggested.

S22570399

Family physicians play a crucial role in the management and ongoing care of patients with Alzheimer disease (AD). This article reviews the effects of nonpharmacologic and pharmacologic interventions on the functional abilities and behavior of patients with dementia and how these can be implemented into clinical practice. Nonpharmacologic interventions are recommended as the initial strategy for managing problematic behaviors. Strategies for improving behavior include ensuring that the patient's environment is safe, calm, and predictable; removing environmental stressors; and identifying and avoiding situations that agitate or frighten the patient. Simple interventions include redirecting and refocusing the patient, increasing social interaction, establishing regular sleep habits, eliminating sources of conflict and frustration, and establishing rewards for successes. The effectiveness of long-term behavioral management is largely dependent on the caregiver; as such, it is important to assess the role and needs of the caregiver. Because currently available therapies cannot reverse the pathologic processes of AD, the primary objective of pharmacotherapy is to preserve cognitive and functional ability, minimize behavioral disturbances, and slow disease progression. Cholinesterase inhibitors represent first-line therapy for patients with mild to moderate AD, whereas a glutamate N-methyl D-aspartate antagonist is used in the treatment of moderate to severe AD. Looking forward, there are a number of therapies in development aimed at modifying the disease course; these include amyloid-lowering drugs, t-based and neuroprotective approaches, acetylcholine agonists, and mitochondrial inhibitors.

S22570400

To date, user-friendly, practical guidelines for dementia have not been available for busy family physicians. However, the growing number of patients with dementia means that primary care physicians will have an increasingly important role in the diagnosis and subsequent management of dementia. This article provides practical guidance for the recognition and diagnosis of dementia and is aimed at family physicians, who are usually the first clinicians to whom patients present with dementia symptoms. Because Alzheimer disease (AD) is the most common form of dementia, this condition is the main focus of this article. We review the pathophysiology of AD and discuss recommended diagnostic protocols and the importance of early diagnosis. An AD diagnostic algorithm is provided, with clearly defined steps for screening and diagnosing AD and assessing daily functioning, behavioral symptoms, and caregiver status.

MEDICINA CLINICA

S22397982

La anemia supone un mayor riesgo de mortalidad por IC refractaria, pero no de reingreso, en el primer año tras una descompensación aguda.

S22503128

En el presente documento se pretende adaptar las recomendaciones generales establecidas en un consenso para la elaboración del informe de alta hospitalaria en especialidades médicas a las necesidades específicas de la población diabética hospitalizada. La diabetes es una enfermedad con un coste sanitario muy elevado, siendo el riesgo global de muerte entre personas con diabetes casi el doble que entre personas sin diabetes, lo que justifica que esta patología constituya uno de los diagnósticos más frecuentes en los pacientes hospitalizados y el creciente interés sobre el tratamiento de la hiperglucemia durante la hospitalización y al alta. Para establecer un plan de tratamiento al alta adecuado a cada paciente, los elementos más importantes a tener en cuenta son la etiología y el tratamiento previo de la hiperglucemia, la situación clínica del paciente y el grado de control glucémico. Debido a la inestabilidad del control glucémico también es necesario prever las necesidades educativas de cada paciente, así como establecer las pautas de monitorización y seguimiento al alta, y un adecuado plan de tratamiento al alta.

S22015005

Se realizó una revisión sistemática de artículos científicos y estudios de instituciones oficiales europeas. En total, fueron identificados 21 artículos y 10 estudios. Los datos sugieren un aumento de la iniciación sexual juvenil y del número de parejas sexuales. El 15-20% de los jóvenes usan de forma inconstante el preservativo. Entre los conocimientos y actitudes de riesgo detectadas encontramos: desconocer otras ITS distintas al VIH, tener una actitud favorable a las relaciones sexuales casuales, creer erróneamente que algunas medidas son eficaces para prevenir el VIH, desconocer los riesgos de tener múltiples parejas sexuales y desconocer la transmisión sexual del VIH.

S21663923

Tras el diagnóstico inicial de la IC, más de la mitad de los pacientes fallecen a los 10 años de seguimiento. La edad, la diabetes mellitus, la cardiopatía isquémica y la insuficiencia renal crónica se asocian a un peor pronóstico en estos pacientes, mientras que el uso de betabloqueantes se asocia a un mejor pronóstico.

S22118974

Se constata el deterioro del control glucémico con la evolución de la enfermedad y la complejidad del proceso y del tratamiento, lo que en parte puede estar relacionado con la inadecuada selección e intensificación del tratamiento.

S22153783

La implantación del CI es un sistema que mejoró la atención precoz del ictus en todo el territorio, pero su activación en el ámbito de atención primaria fue baja.

[S22440145](#)

Use of AOBP devices can contribute to decrease WCE and to improve accuracy of office BP measurement.

[S21944650](#)

Más de 5 de cada 10 mujeres hipertensas mayores de 64 años presentan ERC, y de estas casi la mitad tienen valores de creatinina normales.

REUMATOLOGIA CLINICA

[S22089065](#)

En la actualidad, la determinación de marcadores bioquímicos de remodelado óseo supone una propuesta novedosa en la evaluación clínica de los pacientes con osteoporosis. El uso de estos biomarcadores podría permitir la identificación de pacientes con mayor riesgo de fractura y monitorizar la respuesta terapéutica. Al tratarse de mediciones no invasivas y relativamente económicas, debería extenderse su empleo, ya que posibilitaría una medición seriada y en intervalos cortos de las variaciones en el recambio óseo. Sin embargo, su variabilidad analítica y biológica limita en la actualidad su aplicabilidad clínica.

[S22421456](#)

La prevención de FC con alendronato en mujeres osteoporóticas > 64 años es coste-útil a largo plazo (20 años) con bajo impacto presupuestario en el grupo de 75-79 años.

THE LANCET

[S22538178](#)

Adolescence is a life phase in which the opportunities for health are great and future patterns of adult health are established.

Health in adolescence is the result of interactions between prenatal and early childhood development and the specific biological and social-role changes that accompany puberty, shaped by social determinants and risk and protective factors that affect the uptake of health-related behaviours. The shape of adolescence is rapidly changing—the age of onset of puberty is decreasing and the age at which mature social roles are achieved is rising. New understandings of the diverse and dynamic effects on adolescent health include insights into the effects of puberty and brain development, together with social media. A focus on adolescence is central to the success of many public health agendas, including the Millennium Development Goals aiming to reduce child and maternal mortality and HIV/AIDS, and the more recent emphases on mental health, injuries, and non-communicable diseases. Greater attention to adolescence is needed within each of these public health domains if global health targets are to be met. Strategies that place the adolescent years centre stage—rather than focusing only on specific health agendas—provide important opportunities to improve health, both in adolescence and later in life.

[S22538179](#)

The health of adolescents is strongly affected by social factors at personal, family, community, and national levels. Nations present young people with structures of opportunity as they grow up. Since health and health behaviours correspond strongly from adolescence into adult life, the way that these social determinants affect adolescent health are crucial to the health of the whole population and the economic development of nations. During adolescence, developmental effects related to puberty and brain development lead to new sets of behaviours and capacities that enable transitions in family, peer, and educational domains, and in health behaviours.

These transitions modify childhood trajectories towards health and wellbeing and are modified by economic and social factors within countries, leading to inequalities. We review existing data on the effects of social determinants on health in adolescence, and present findings from country-level ecological analyses on the health of young people aged 10-24 years. The strongest determinants of adolescent health worldwide are structural factors such as national wealth, income inequality, and access to education. Furthermore, safe and supportive families, safe and supportive schools, together with positive and supportive peers are crucial to helping young people develop to their full potential and attain the best health in the transition to adulthood. Improving adolescent health worldwide requires improving young people's daily life with families and peers and in schools, addressing risk and protective factors in the social environment at a population level, and focusing on factors that are protective across various health outcomes. The most effective interventions are probably structural changes to improve access to education and employment for young people and to reduce the risk of transport-related injury.

[S22475493](#)

Cervical pessary use could prevent preterm birth in a population of appropriately selected at-risk women previously screened for cervical length assessment at the midtrimester scan.

[S22440946](#)

Alongside the previously reported reduction by aspirin of the long-term risk of cancer death, the short-term reductions in cancer incidence and mortality and the decrease in risk of major extracranial bleeds with extended use, and their low case-fatality, add to the case for daily aspirin in prevention of cancer.

[S22440947](#)

That aspirin prevents distant metastasis could account for the early reduction in cancer deaths in trials of daily aspirin versus control. This finding suggests that aspirin might help in treatment of some cancers and provides proof of principle for pharmacological intervention specifically to prevent distant metastasis.

S22559900

Myopia has emerged as a major health issue in east Asia, because of its increasingly high prevalence in the past few decades (now 80-90% in school-leavers), and because of the sight-threatening pathologies associated with high myopia, which now affects 10-20% of those completing secondary schooling in this part of the world. Similar, but less marked, changes are occurring in other parts of the world. The higher prevalence of myopia in east Asian cities seems to be associated with increasing educational pressures, combined with life-style changes, which have reduced the time children spend outside. There are no reported major genes for school myopia, although there are several genes associated with high myopia. Any genetic contribution to ethnic differences may be small. However, to what extent many genes of small effect and gene-environment interactions contribute to variations in school myopia within populations remains to be established. There are promising optical and pharmacological interventions for preventing the development of myopia or slowing its progression, which require further validation, and promising vision-sparing treatments for pathological myopia.

S22377290

Adults with disabilities are at a higher risk of violence than are non-disabled adults, and those with mental illnesses could be particularly vulnerable. However, available studies have methodological weaknesses and gaps exist in the types of disability and violence they address. Robust studies are absent for most regions of the world, particularly low-income and middle-income countries.

S22377290

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S22538180

The burden of morbidity and mortality from non-communicable disease has risen worldwide and is accelerating in low-income and middle-income countries, whereas the burden from infectious diseases has declined. Since this transition, the prevention of non-communicable disease as well as communicable disease causes of adolescent mortality has risen in importance. Problem behaviours that increase the short-term or long-term likelihood of morbidity and mortality, including alcohol, tobacco, and other drug misuse, mental health problems, unsafe sex, risky and unsafe driving, and violence are largely preventable. In the past 30 years new discoveries have led to prevention science being established as a discipline designed to mitigate these problem behaviours. Longitudinal studies have provided an understanding of risk and protective factors across the life course for many of these problem behaviours. Risks cluster across development to produce early accumulation of risk in childhood and more pervasive risk in adolescence. This understanding has led to the construction of developmentally appropriate prevention policies and programmes that have shown short-term and long-term reductions in these adolescent problem behaviours. We describe the principles of prevention science, provide examples of efficacious preventive interventions, describe challenges and potential solutions to take efficacious prevention policies and programmes to scale, and conclude with recommendations to reduce the burden of adolescent mortality and morbidity worldwide through preventive intervention.

THE NEW ENGLAND JOURNAL OF MEDICINE

S22591295

In this large prospective study, coffee consumption was inversely associated with total and cause-specific mortality. Whether this was a causal or associational finding cannot be determined from our data.

S22591294

During 5 days of azithromycin therapy, there was a small absolute increase in cardiovascular deaths, which was most pronounced among patients with a high baseline risk of cardiovascular disease

S22621626

Aspirin reduced the risk of recurrence when given to patients with unprovoked venous thromboembolism who had discontinued anticoagulant treatment, with no apparent increase in the risk of major bleeding.

THORAX

S22052579

This is encouraging early evidence that an awareness and early recognition initiative may facilitate lung cancer diagnosis.