

## Noviembre 2014

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*ANEURISMAS AÓRTICOS ABDOMINALES*

## **ANNALS OF INTERNAL MEDICINE**

[S25402511](#)

Three of 10 adults with diabetes remain undiagnosed, which may be related to less access to care. Compared with diagnosed adults, undiagnosed adults have less elevated hemoglobin A1c levels, less lipid treatment and worse control, and similarly poor BP and combined ABC control regardless of smoking status. Addressing these care gaps in both groups would prevent long-term complications.

[S25199883](#)

Good-quality evidence supports that several medications for bone density in osteoporotic range and/or preexisting hip or vertebral fracture reduce fracture risk. Side effects vary among drugs, and the comparative effectiveness of the drugs is unclear.

[S25402512](#)

Use of NSAIDs was associated with an independent risk for serious bleeding and thromboembolism in patients with AF. Short-term NSAID exposure was associated with increased bleeding risk. Physicians should exercise caution with NSAIDs in patients with AF.

## **ARCHIVOS DE BRONCONEUMOLOGIA**

[BUHELLI](#)

Un porcentaje relevante de individuos de una muestra no seleccionada tiene valores elevados de COHb. Posiblemente las principales fuentes de exposición estén en el domicilio particular, por lo que debe explorarse esta posibilidad, alertar sobre los riesgos y estimular la toma de medidas preventivas.

## **ATENCIÓN PRIMARIA**

[S24768658](#)

Se demuestra la efectividad de esta experiencia para mejorar conocimientos sobre salud cardiovascular y algunos hábitos de vida saludable.

[S25288498](#)

La enfermedad renal crónica (ERC) es un importante problema de salud pública que puede afectar en sus diferentes estadios a cerca del 10% de la población española y que supone una elevada morbimortalidad, así como un importante consumo de recursos al Sistema Nacional de Salud. Diez sociedades científicas involucradas en el manejo del paciente renal nos hemos puesto de acuerdo para hacer una puesta al día del anterior documento de consenso sobre ERC de 2007. El presente es la edición abreviada del documento general extenso, que puede ser consultado en las páginas Web de cada una de las sociedades firmantes. Contiene los siguientes aspectos:

definición, epidemiología y factores de riesgo de la ERC; criterios de diagnóstico, evaluación y estadificación de la ERC, albuminuria y estimación del filtrado glomerular; concepto y factores de progresión; criterios de derivación a nefrología; seguimiento del paciente, actitudes y objetivos por especialidad; prevención de la nefrotoxicidad; detección del daño cardiovascular; actitudes, estilo de vida y tratamiento: manejo de la hipertensión arterial, dislipidemia, hiperglucemia, tabaquismo, obesidad, hiperuricemia, anemia, alteraciones del metabolismo mineral y óseo; seguimiento coordinado por atención primaria-otras especialidades-nefrología; manejo del paciente en tratamiento renal sustitutivo, hemodiálisis, diálisis peritoneal y trasplante renal; tratamiento paliativo de la uremia terminal. Esperamos que sirva de gran ayuda en el manejo multidisciplinar del paciente con ERC, a la vista de las recomendaciones más actualizadas.

S24768655

Las actitudes de los profesionales ante las actividades de PPS son aceptables y se debe trabajar en su mantenimiento. Las organizaciones sanitarias deberían implementar intervenciones adaptadas a distintos perfiles profesionales así como intervenciones que pongan en valor dichas actividades y mejoren la pericia y la seguridad en su realización.

S24792420

La prevalencia de envejecimiento satisfactorio es elevada en personas de 86 años en la comunidad. La escasa actividad física multiplica por 7 la asociación a envejecimiento no satisfactorio, y la debilidad muscular por 6. Por ello, incorporar el cribado dirigido a detectar estos 2 factores podría mejorar intervenciones posteriores hacia un envejecimiento más óptimo, si estos resultados se confirman en futuros estudios.

S24768657

La participación activa de los médicos con uso de pruebas rápidas en la consulta se acompaña de una reducción importante de antibióticos en las ITR, sobre todo en las infecciones mayoritariamente virales.

S24667116

Algunos AINE pueden disminuir la efectividad del tratamiento antihipertensivo cuando se utilizan simultáneamente con antihipertensivos, en especial con inhibidores de la enzima convertidora de angiotensina, diuréticos, bloqueadores beta y antagonistas de los receptores de angiotensina. No se encontró evidencia de la modificación del efecto de los antagonistas de los canales de calcio, especialmente dihidropiridínicos, por el uso simultáneo con AINE.

## BRITISH JOURNAL OF PSYCHIATRY

S25368357

The classification of mood disorders lacks precision and consequently there has been no recent meaningful advance in their treatment. By virtue of its therapeutic specificity, lithium responsiveness offers an opportunity to diagnose a definitive subtype of mood disorders that may provide a platform for the development of targeted therapy.

## BRITISH MEDICAL JOURNAL

S25352501

There is no evidence suggesting that treatment for cervical intraepithelial neoplasia adversely affects fertility, although treatment was associated with a significantly increased risk of miscarriages in the second trimester. Research should explore mechanisms that may explain this increase in risk and stratify the impact that treatment may have on fertility and early pregnancy outcomes by the size of excision and treatment method used.

S25406188

Genetically low 25-hydroxyvitamin D concentrations were associated with increased all cause mortality, cancer mortality, and other mortality but not with increased cardiovascular mortality. These findings are compatible with the notion that genetically low 25-hydroxyvitamin D concentrations may be causally associated with cancer and other mortality but also suggest that the observational association with cardiovascular mortality could be the result of confounding.

S25378384

The risk of preterm birth is at most minimally affected by a small excision. Larger excisions, particularly over 15 mm or 2.66 cm(3), are associated with a doubling of the risk of both preterm and very preterm births. The risk does not decrease with increasing time from excision to conception. Efforts should be made to excise the entire lesion while preserving as much healthy cervical tissue as possible. Close obstetric monitoring is warranted for women who have large excisions of the cervical transformation zone.

S25403476

At age 55, though men and women have similar lifetime risks of cardiovascular disease, there are considerable differences in the first manifestation. Men are more likely to develop coronary heart disease as a first event, while women are more likely to have cerebrovascular disease or heart failure as their first event, although these manifestations appear most often at older ages.

S25389136

Aggregating patients' ratings of doctors' communication skills at practice level can mask considerable variation in the performance of individual doctors, particularly in lower performing practices. Practice level surveys may be better used to "screen" for concerns about performance that require an individual level survey. Higher scoring practices are unlikely to include lower scoring doctors. However, lower scoring practices require further investigation at the level of the individual doctor to distinguish higher and lower scoring general practitioners.

S25368388

Genetically low vitamin D concentrations and increased mortality: mendelian randomisation analysis in three large cohorts

## CANADIAN MEDICAL ASSOCIATION JOURNAL

S25316904

A Mediterranean diet supplemented with either extra virgin olive oil or nuts is not associated with the onset of metabolic syndrome, but such diets are more likely to cause reversion of the condition. An energy-unrestricted Mediterranean diet may be useful in reducing the risks of central obesity and hyperglycemia in people at high risk of cardiovascular disease.

## CIRCULATION

S25399395

Increased AED use is associated with increased survival in patients with a shockable initial rhythm. We recommend continuous efforts to introduce or extend AED programs.

S25399396

Data drawn from a large subset of U.S communities suggest that rates of survival from out-of-hospital cardiac arrest have improved among sites participating in a performance improvement registry.

S25399397

OHCA patients who were transported alive are increasingly likely to have cardiovascular risk factors but less likely to have previous cardiovascular conditions. The overall incidence of OHCA patients transported to hospital alive did not change over the past decade. Short- and longer-term survival after OHCA has substantially improved, with younger patients experiencing the greatest improvement.

S25252721

This large study of out-of-hospital cardiac arrest patients demonstrated that increased cardiopulmonary resuscitation compression depth is strongly associated with better survival. Our adjusted analyses, however, found that maximum survival was in the depth interval of 40.3 to 55.3 mm (peak, 45.6 mm), suggesting that the 2010 American Heart Association cardiopulmonary resuscitation guideline target may be too high.

## DIABETES CARE

S25071075

Both diets achieved substantial improvements for several clinical glycemic control and CVD risk markers. These improvements and reductions in GV and antiglycemic medication requirements were greatest with the LC compared with HC. This suggests an LC diet with low saturated fat may be an effective dietary approach for T2DM management if effects are sustained beyond 24 weeks.

S25125505

Chronic pistachio consumption is emerging as a useful nutritional strategy for the prediabetic state. Data suggest that pistachios have a glucose- and insulin-lowering effect, promote a healthier metabolic profile, and reverse certain metabolic deleterious consequences of prediabetes.

S25168125

Measurement of HbA1c on admission is beneficial in tailoring treatment regimens at discharge in general medicine and surgery patients with type 2 diabetes.

S25139886

Healthy metabolic profile and the absence of diabetes risk factors do not protect young adults from incident diabetes associated with overweight and obesity.

S25342830

Natriuretic peptides (NPs) play a key role in cardiovascular homeostasis, counteracting the deleterious effects of volume and pressure overload and activating antibrain and antihypertrophic pathways in the heart. N-terminal B-type NP (NT-proBNP) also is a promising biomarker of global cardiovascular risk in the general population, and there is increasing interest on its potential use in diabetic patients for screening of silent cardiovascular abnormalities, cardiovascular risk stratification, and guided intervention. Recently, both atrial NP (ANP) and B-type NP (BNP) have emerged as key mediators in the control of metabolic processes including the heart in the network of organs that regulate energy usage and metabolism. Epidemiological studies have shown that ANP and BNP are reduced in people with obesity, insulin resistance, and diabetes, and this deficiency may contribute to enhance their global cardiovascular risk. Moreover, ANP and BNP have receptors in the adipose tissue, enhance lipolysis and energy expenditure, and modulate adipokine release and food intake. Therefore, low ANP and BNP levels may be not only a consequence but also a cause of obesity, and recent prospective studies have shown that low levels of NT-proBNP and midregional proANP (MR-proANP) are a strong predictor of type 2 diabetes onset. Whether ANP and BNP supplementation may result in either cardiovascular or metabolic benefits in humans remains, however, to be established.

S25342831

The hyperosmolar hyperglycemic state (HHS) is the most serious acute hyperglycemic emergency in patients with type 2 diabetes. von Frerichs and Dreschfeld described the first cases of HHS in the 1880s in patients with an "unusual diabetic coma" characterized by severe hyperglycemia and glycosuria in the absence of Kussmaul breathing, with a fruity breath odor or positive acetone test in the urine. Current diagnostic HHS criteria include a plasma glucose level >600 mg/dL and increased effective plasma osmolality >320 mOsm/kg in the absence of ketoacidosis. The incidence of HHS is estimated to be <1% of hospital admissions of patients with diabetes. The reported mortality is between 10 and 20%, which is about 10 times higher than the mortality rate in patients with diabetic ketoacidosis (DKA). Despite the severity of this condition, no prospective, randomized studies have determined best treatment strategies in patients with HHS, and its management has largely been extrapolated from studies of patients with DKA. There are many unresolved questions that need to be addressed in prospective clinical trials regarding the pathogenesis and treatment of pediatric and adult patients with HHS.

S25150157

Long-term use of sulfonylureas was associated with a significantly higher risk of developing CHD among women with diabetes.

S25168126

Serum hs-CRP levels, independent of possible confounders, were associated with a subsequent risk of developing, not progressing, diabetic nephropathy in type 2 diabetic patients. Serum hs-CRP may be useful for predicting the future risk of developing diabetic nephropathy.

## DRUGS

S25300411

Phosphodiesterase-4 (PDE4) inhibitors have broad anti-inflammatory activity, inhibiting the airway inflammation associated with chronic obstructive pulmonary disease (COPD), especially by reducing airway neutrophils that are key cells in COPD. A careful evaluation of the results of several meta-analyses allows us to consider the use of PDE4 inhibitors as very important in those patients with COPD who are particularly susceptible to exacerbations, the so-called 'frequent exacerbators'. Consequently, PDE4 inhibitors should be used earlier and more frequently than is the case today, but they are prescribed sporadically because of side effects. Several strategies are conceivable to avoid side effects, but, unfortunately, many of these approaches are yet to be successfully translated into clinical effectiveness after several decades of research. A novel alternative approach is to administer multiple drugs simultaneously or drugs capable of two distinct primary pharmacological actions based on distinct pharmacophores (bifunctional drugs) in order to produce additive or synergistic effects and, consequently, to dispense these drugs at lower doses, inducing fewer side effects. The fact that we have realized that there is a need to target simultaneously more PDEs unquestionably represents an advance in the possible use of PDE inhibitors. Actually, the possibility that multivalent (multifunctional) ligands, which feature two or more pharmacophores, may deliver superior efficacy is an approach that is being explored. Recognizing the role of specific targeted therapy aimed at subcellular domains has changed our understanding of the use of PDE inhibitors, and offers an opportunity to improve both the therapeutic tolerability and efficacy of these drugs.

S25300410

Venous thromboembolism (VTE) is a major cause of morbidity, mortality, and healthcare expenditure. In the United States, approximately 0.1 % of the population experiences an initial VTE event each year. Anticoagulation therapy is the cornerstone of acute VTE treatment and for prevention of recurrent VTE events. Conventional anticoagulants, including heparin, low-molecular-weight heparins, fondaparinux, and vitamin K antagonists are widely used but have limitations. Newer oral anticoagulant agents, including direct thrombin inhibitors (e.g., dabigatran etexilate) and direct factor Xa inhibitors (e.g., rivaroxaban, apixaban, and edoxaban) have

been developed to attempt to overcome some of the limitations of conventional anticoagulant therapy. These new oral agents have been evaluated for safety and efficacy in large, randomized clinical trials in the treatment and secondary prevention of VTE with results that are comparable to conventional therapy. Dabigatran, rivaroxaban, apixaban, and edoxaban are important new treatment options for patients with VTE. In this review, we compare these new agents and their associated clinical trials in VTE treatment.

**S25315030**

Despite the availability of effective pharmacological treatments to aid the control of blood pressure, the global rate of uncontrolled blood pressure remains high. As such, further measures are required to improve blood pressure control. Recently, several national and international guidelines for the management of hypertension have been published. These aim to provide easily accessible information for healthcare professionals and patients to aid the diagnosis and treatment of hypertension. In this review, we have compared new and current guidelines from the American and International Societies of Hypertension; the American Heart Association, American College of Cardiology and the US Center for Disease Control and Prevention; the panel appointed to the Eighth Joint National Committee; the European Societies of Hypertension and Cardiology; the French Society of Hypertension; the Canadian Hypertension Education Program; the National Institute for Health and Clinical Excellence (UK); the Taiwan Society of Cardiology and the Chinese Hypertension League. We have identified consensus opinion regarding best practises for the management of hypertension and have highlighted any discrepancies between the recommendations. In general there is good agreement between the guidelines, however, in some areas, such as target blood pressure ranges for the elderly, further trials are required to provide sufficient high-quality evidence to form the basis of recommendations.

## ENFERMEDADES INFECCIOSAS Y MICROBIOLOGIA CLINICA

**S24908497**

Cases of high-grade dysplasia can be under-diagnosed by a first anal cytology. Detection of HPV can supplement this procedure, leading to the identification of those patients most at risk of developing high-grade anal dysplasia.

## EUROPEAN HEART JOURNAL

**S25139896**

This paper provides an update for 2014 on the burden of cardiovascular disease (CVD), and in particular coronary heart disease (CHD) and stroke, across the countries of Europe. Cardiovascular disease causes more deaths among Europeans than any other condition, and in many countries still causes more than twice as many deaths as cancer. There is clear evidence in most countries with available data that mortality and case-fatality rates from CHD and stroke have decreased substantially over the last 5-10 years but at differing rates. The differing recent trends have therefore led to increasing inequalities in the burden of CVD between countries. For some Eastern European countries, including Russia and Ukraine, the mortality rate for CHD for 55-60 year olds is greater than the equivalent rate in France for people 20 years older.

**S25179762**

Venous thrombo-embolism is the third most frequent acute cardiovascular syndrome after myocardial infarction and stroke. Recently published landmark trials paved the way for significant progress in the management of the disease and provided the evidence for the ESC Pulmonary Embolism (PE) Guidelines 2014 update. Risk stratification strategies for non-high-risk PE continue to evolve, with an increasing emphasis on clinical prediction rules and right ventricular (RV) assessment on computed tomographic pulmonary angiography. In the field of anticoagulation treatment, pharmacogenetic testing for vitamin K antagonists on top of clinical parameters was not found to offer a significant benefit during the initiation phase; on the other hand, dosing based on the patient's clinical data seems superior to fixed loading regimens. The phase 3 trial programme of new oral anticoagulants in the treatment of venous thrombo-embolism has been completed, and the results indicate that these agents are at least as effective and probably cause less major bleeding than currently standard treatment. A multicentre prospective phase 4 trial will determine whether early discharge and out-of-hospital treatment of low-risk PE with the oral factor Xa inhibitor rivaroxaban is feasible, effective, and safe. For intermediate-risk PE defined on the basis of imaging tests and laboratory biomarkers, the bleeding risks of full-dose thrombolytic treatment appear too high to justify its use, unless clinical signs of haemodynamic decompensation appear. Patients in whom PE has resulted in chronic thrombo-embolic pulmonary hypertension and who are not suitable for pulmonary endarterectomy, may be expected to benefit from emerging pharmaceutical and interventional treatment options.

## FAMILY MEDICINE

**DORY**

Conclusions: Written tests of clinical reasoning could provide relevant additional information to the evaluation of students' competence over the course of a family medicine clerkship. Further research is needed to determine the potential educational consequences of such programs of assessment.

**THOMPSON**

Conclusions: Smoking cessation should be recommended for all current smokers, and those with a history of smoking should be informed about lung cancer screening with CT scan.

**RENSHAW**

Conclusions: As medical care services and settings change, documenting comprehensive clinical experiences will be valuable to respond to changes in patient presentations in family physician offices, both locally and nationally. Patient encounter data evaluations should be used to ensure students' clinical experiences are adequate, equivalent, and reflective of community practice. Continuous assessment of student experiences is essential due to shifts in prevalence, practice characteristics, and changes in patient preferences.

**BENE**

Conclusions: We find evidence from several different educational settings that peer teaching benefits both the peer teachers and the learners. This suggests that peer teaching is a valuable methodology for medical schools to engage learners as teachers.

## GACETA SANITARIA

**S25087116**

En una cohorte prospectiva de mayores de 75 años que viven en su propio domicilio en la ciudad de Lleida, el mayor nivel de fragilidad está asociado con un mayor riesgo de muerte a los 2 años.

**S25189674**

Esta revisión muestra que entre las personas mayores persiste la desigualdad de género y de nivel socioeconómico con respecto a la salud autopercibida. Son necesarios futuros estudios para aclarar los factores que hacen que persistan las desigualdades en los mayores, y así poder diseñar políticas de salud específicas para este sector de la población.

**S25234273**

La contribución de este trabajo consiste en comprender por qué los/las médicos/as gestores/as desarrollan actitudes adversas a la gestión y por qué se definen como médicos/as y no como gestores/as. La explicación recae en los significados que otorgan a la gestión, como base sobre la cual construyen sus actitudes hacia ésta y su identidad profesional. De esta comprensión se derivan algunas implicaciones para la gestión sanitaria.

#### JAMA INTERNAL MEDICINE

S25179753

In this sample of drug users seeking emergency medical treatment, a relatively robust brief intervention did not improve substance use outcomes. More work is needed to determine how drug use disorders may be addressed effectively in the ED.

S25201279

Most nursing home residents with advanced dementia receive medications with questionable benefit that incur substantial associated costs.

#### JAMA PSYCHIATRY

S25208208

Duration of daily sunshine was significantly correlated with suicide frequency independent of season, but effect sizes were low. Our data support the hypothesis that sunshine on the day of suicide and up to 10 days prior to suicide may facilitate suicide. More daily sunshine 14 to 60 days previously is associated with low rates of suicide. Our study also suggests that sunshine during this period may protect against suicide.

#### REUMATOLOGIA CLINICA

S24913963

La columna es terreno abonado para la simulación, involucrando a diferentes Especialistas (traumatólogos, neurocirujanos, rehabilitadores, médicos de familia, etc.). La simulación requiere la producción intencional de síntomas exagerados o falsos respondiendo a un incentivo externo. Sin embargo, en la práctica, hay dificultades en la demostración de dichos requisitos. Esto origina que algunos simuladores no resulten identificados y que pacientes no simuladores con actitud incongruente sean etiquetados de rentistas, originando distrés iatrógeno y exposición a litigación.

Se analiza la simulación en el raquis, proponiendo una modificación terminológica, así como una nueva estrategia de diagnóstico, para evitar errores y reducir tanto el distrés iatrógeno como la litigabilidad.

Basándonos en la experiencia clínico-forense de los autores, se analiza la bibliografía y se propone una semiología uniforme. El abordaje es multidimensional y la estrategia de diagnóstico basada en: anamnesis, exploración y pruebas complementarias, adaptando sus resultados a una terminología uniforme con significado preciso de signos y síntomas.

#### THE LANCET

S25455249

The perinatal period is associated with an increased risk of severe mental disorders. We summarise the evidence regarding the epidemiology, risk factors, and treatment of severe mental illness in relation to childbirth, focusing on bipolar disorder, affective psychosis, and schizophrenia. We discuss women with ongoing chronic conditions and those with the onset of new episodes of post-partum psychosis. Despite the importance of perinatal episodes, with suicide a leading cause of maternal death, few studies are available to guide the management of women with severe mental disorders in pregnancy and the post-partum period. However, general principles of management are discussed, including the need for an individual risk-benefit analysis for each woman.

S25236409

Low Apgar score at 5 min was strongly associated with the risk of neonatal and infant death. Our findings support its continued usefulness in contemporary practice.

S25064594

Our findings suggest that regular or as-needed dosing with paracetamol does not affect recovery time compared with placebo in low-back pain, and question the universal endorsement of paracetamol in this patient group.

S25455248

Mental disorders are among the most common morbidities of pregnancy and the postnatal period, and can have adverse effects on the mother, her child, and family. This Series paper summarises the evidence about epidemiology, risk factors, identification, and interventions for non-psychotic mental disorders. Although the phenomenology and risk factors for perinatal mental disorders are largely similar to those for the disorders at other times, treatment considerations differ during pregnancy and breastfeeding. Most randomised controlled trials have examined psychosocial and psychological interventions for postnatal depression, with evidence for effectiveness in treating and preventing the disorder. Few high-quality studies exist on the effectiveness or safety of pharmacological treatments in the perinatal period, despite quite high prescription rates. General principles of prescribing of drugs in the perinatal period are provided, but individual risk-benefit analyses are needed for decisions about treatment.

S25078309

Combined simeprevir and sofosbuvir was efficacious and well tolerated.

S25098487

Introduction of telephone triage delivered by a GP or nurse was associated with an increase in the number of primary care contacts in the 28 days after a patient's request for a same-day GP consultation, with similar costs to those of usual care. Telephone triage might be useful in aiding the delivery of primary care. The whole-system implications should be assessed when introduction of such a system is considered.

#### THE NEW ENGLAND JOURNAL OF MEDICINE

S25372087

We estimated that screening for lung cancer with low-dose CT would cost \$81,000 per QALY gained, but we also determined that modest changes in our assumptions would greatly alter this figure. The determination of whether screening outside the trial will be cost-effective will depend on how screening is implemented. (Funded by the National Cancer Institute; NLST ClinicalTrials.gov number, NCT00047385.).

S25390739

Some older generic drugs have become very expensive, owing to factors including drug shortages, supply disruptions, and consolidations in the generic-drug industry. But generics manufacturers that legally obtain a market monopoly can also unilaterally raise prices.