

ADDITIONAL ARTICLES ABSTRACTED IN ACP JOURNAL CLUB

The following articles are abstracted in the March/April 2005 issue of *ACP Journal Club*. The declarative title of each abstract as published in *ACP Journal Club* precedes the article citation.

THERAPEUTICS

► Review: Low-dose but not high-dose corticosteroids reduced all-cause mortality in severe sepsis and septic shock

Annane D, Bellissant E, Bollaert PE, et al. Corticosteroids for severe sepsis and septic shock: a systematic review and meta-analysis. *BMJ* 2004;**329**:480–8.

► Review: Glucocorticoids reduced mortality in sepsis in recent trials (post-1997), but not in previous (pre-1989), or all trials combined

Minnecci PC, Deans KJ, Banks SM, et al. Meta-analysis: the effect of steroids on survival and shock during sepsis depends on the dose. *Ann Intern Med* 2004;**141**:47–56.

► Review: Nonsteroidal antiinflammatory drugs provide better pain relief than do opioids for acute renal colic

Holdgate A, Pollock T. Systematic review of the relative efficacy of non-steroidal anti-inflammatory drugs and opioids in the treatment of acute renal colic. *BMJ* 2004;**328**:1401–8.

► Review: Cardiac resynchronization therapy reduces mortality and hospitalization for heart failure

McAlister FA, Ezekowitz JA, Wiebe N, et al. Systematic review: cardiac resynchronization in patients with symptomatic heart failure. *Ann Intern Med* 2004;**141**:381–90. **Nichol G, Kaul P, Huszti E, et al.** Cost-effectiveness of cardiac resynchronization therapy in patients with symptomatic heart failure. *Ann Intern Med* 2004;**141**:343–51.

► Review: Oral and intravenous antibiotics do not differ for effectiveness in febrile neutropenic patients with cancer

Vidal L, Paul M, Ben-Dor I, et al. Oral versus intravenous antibiotic treatment for febrile neutropenia in cancer patients. *Cochrane Database Syst Rev* 2004;(4):CD003992.

► Lumiracoxib reduced ulcer complications compared with ibuprofen and naproxen in osteoarthritis and did not increase cardiovascular outcomes

Schnitzer TJ, Burmester GR, Mysler E, et al. Comparison of lumiracoxib with naproxen and ibuprofen in the Therapeutic Arthritis Research and Gastrointestinal Event Trial (TARGET), reduction in ulcer complications: randomised controlled trial. *Lancet* 2004;**364**:665–74. **Farkouh ME, Kirshner H, Harrington RA, et al.** Comparison of lumiracoxib with naproxen and ibuprofen in the Therapeutic Arthritis Research and Gastrointestinal Event Trial (TARGET), cardiovascular outcomes: randomised controlled trial. *Lancet* 2004;**364**:675–84.

► Routine invasive strategy within 24 hours of thrombolysis reduced death, nonfatal reinfarction, and ischemia-induced revascularization in STEMI

Fernandez-Avilés F, Alonso JJ, Castro-Beiras A, et al. Routine invasive strategy within 24 hours of thrombolysis versus ischaemia-guided conservative approach for acute myocardial infarction with ST-segment elevation (GRACIA-1): a randomised controlled trial. *Lancet* 2004;**364**:1045–53.

► A 10-day regimen of levofloxacin was not needed in patients with cellulitis who had an acceptable 5-day response

Hepburn MJ, Dooley DP, Skidmore PJ, et al. Comparison of short-course (5 days) and standard (10 days) treatment for uncomplicated cellulitis. *Arch Intern Med* 2004;**164**:1669–74.

► Gly/Gly and Arg/Arg genotype responses to albuterol differed in mild asthma

Israel E, Chinchilli VM, Ford JG, et al. Use of regularly scheduled albuterol treatment in asthma: genotype-stratified, randomised, placebo-controlled cross-over trial. *Lancet* 2004;**364**:1505–12.

► Dalteparin reduced venous thromboembolic events without increased bleeding in acutely ill medical patients

Leizorovicz A, Cohen AT, Turpie AG, et al. Randomized, placebo-controlled trial of dalteparin for the prevention of venous thromboembolism in acutely ill medical patients. *Circulation* 2004;**110**:874–9.

► Peginterferon α -2a alone or combined with lamivudine increased response rates more than lamivudine alone

Marcellin P, Lau GK, Bonino F, et al. Peginterferon alfa-2a alone, lamivudine alone, and the two in combination in patients with HBeAg-negative chronic hepatitis B. *N Engl J Med* 2004;**351**:1206–17.

► An early invasive strategy improved long-term freedom from major adverse cardiac events in older patients with angina

Pfisterer M. Long-term outcome in elderly patients with chronic angina managed invasively versus by optimized medical therapy: four-year follow-up of the randomized Trial of Invasive versus Medical therapy in Elderly patients (TIME). *Circulation* 2004;**110**:1213–8.

► Caspofungin was noninferior to amphotericin B for invasive fungal infections in persistent fever and neutropenia and better tolerated

Walsh TJ, Teppler H, Donowitz GR, et al. Caspofungin versus liposomal amphotericin B for empirical antifungal therapy in patients with persistent fever and neutropenia. *N Engl J Med* 2004;**351**:1391–402.

► Stenting was not inferior to endarterectomy in patients with severe carotid-artery stenosis and coexisting conditions

Yadav JS, Wholey MH, Kuntz RE, et al. Protected carotid-artery stenting versus endarterectomy in high-risk patients. *N Engl J Med* 2004;**351**:1493–501.

AETIOLOGY

► Reduced glomerular filtration rate was associated with increased death, cardiovascular events, and hospitalization

Go AS, Chertow GM, Fan D, McCulloch CE, Hsu C. Chronic kidney disease and the risks of death, cardiovascular events, and hospitalization. *N Engl J Med* 2004;**351**:1296–305.

► Renal impairment increased mortality and cardiovascular complications after myocardial infarction

Anavekar NS, McMurray JJ, Velazquez EJ, et al. Relation between renal dysfunction and cardiovascular outcomes after myocardial infarction. *N Engl J Med* 2004;**351**:1285–95.