# In This Issue of JAMA

March 10, 2015

Volume 313, Number 10 Pages 983-1070

#### Research

# **Transcatheter Aortic Valve Replacement: One-Year Outcomes**



Holmes and colleagues examined 1-year patient outcomes after transcatheter aortic valve replacement (TAVR) in an analysis of linked Medicare claims and Society of Thoracic Surgeons/American College of Cardiology Transcatheter Valve Therapy (STS/ACC TVT) Registry data. Patients (n=12 182) who underwent TAVR between November 2011 and July 2013 were included in the analysis. The

authors report that at 1-year follow-up, overall mortality was 23.7%, the stroke rate was 4.1%, and rate of the composite outcome of death and stroke was 26.0%. In the year after TAVR, 24.4% of survivors were rehospitalized once, and 12.5% were rehospitalized twice.

Continuing Medical Education jamanetworkcme.com

# Familial Hypercholesterolemia and Prevalence of Diabetes

Familial hypercholesterolemia is characterized by impaired cellular cholesterol uptake. In light of evidence that statin therapy is associated with an increased risk of type 2 diabetes, Besseling and colleagues hypothesized that perturbations in transmembrane cholesterol transport may be linked to development of type 2 diabetes and they assessed the relationship in a cross-sectional study involving 25137 patients with familial hypercholesterolemia and 38 183 unaffected relatives. The authors found a lower prevalence of diabetes among individuals with familial hypercholesterolemia. In an Editorial, Preiss and Sattar discuss a possible link between the low-density lipoprotein receptor and diabetes risk.

Editorial 1016

# **Treatment of Displaced Proximal Humeral Fractures**

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

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131 YEARS

Editor in Chief Howard Bauchner, MD PUBLICATION

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# In This Issue of JAMA

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# Clinical Review & Education

### **Food Antioxidants to Prevent Cataract**

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





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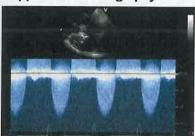
Outdated Regulatory Processes Delay New Treatments, Senators Say

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Improved Infection Control Still Falls Short of National Goals

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# Doppler Echocardiography in the Evaluation of a Heart Murmur



This JAMA Diagnostic Test Interpretation article by Foppa and colleagues presents the case of a 91-year-old woman with a history of hypertension who presented for a routine office visit. She denied chest pain, dyspnea on exertion, presyncope, or orthopnea. Her blood pressure was 140/76 mm Hg. Her lungs were clear. Cardiac examination demonstrated a regular rate and rhythm, normal S, and

systolic and diastolic murmurs. A 2-dimensional Doppler transthoracic echocardiogram was performed to assess valvular function, cardiac chamber size, and cardiac wall thickness. How would you interpret the echocardiography findings?

# From The Medical Letter: Drugs for Chronic Heart Failure

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

#### Online @ jama.com



### **Editor's Audio Summary**

Eric D. Peterson, MD, MPH summarizes and comments on this week's issue.

# **Author Reading**



AUDIO Patrick O'Gara, MD. reads his Viewpoint "Innovation and Implementation in Cardiovascular Medicine: Challenges in the Face of Opportunity."

#### **Author Interview**

VIDEO Interview with David R. Holmes Jr. MD. author of "Clinical Outcomes at 1 Year Following Transcatheter Aortic Valve Replacement"

### The JAMA Forum

Insightful commentary on the political aspects of health care from leading health economists, health policy experts, and legal scholars

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