

## Research

### Sustained Inflations for Extremely Preterm Infants 1165

Some evidence suggests that preterm infants may require fewer days of mechanical ventilation if they receive positive pressure ventilation with inflations of 5 seconds or more at the time of birth. Kirpalani and colleagues randomized 460 extremely preterm infants and found that sustained inflations at birth, compared with standard intermittent positive pressure ventilation, did not reduce the risk of bronchopulmonary dysplasia or death at 36 weeks' postmenstrual age. In an Editorial, Perlman discusses the inherent complexities of intervention studies for the premature infant population.

Editorial 1161

CME [jamanetwork.com/learning](http://jamanetwork.com/learning) Visual Abstract [jama.com](http://jama.com)

### Intramyocardial Injection of Mesenchymal Precursor Cells 1176

Delivery of mesenchymal precursor cells into failing hearts has been associated with improvement in the geometry and function of the left ventricle. In a randomized trial that enrolled 159 patients with advanced heart failure undergoing implantation of a left ventricular assist device, Yau and colleagues for the Cardiothoracic Surgical Trials Network found that intramyocardial injections of mesenchymal precursor cells did not facilitate temporary weaning from left ventricular assist device support at 6 months.

Editor's Note 1187

### Birth Outcomes for Extremely Preterm Infants 1188

It is unclear whether guidelines for the management of extremely preterm births in Sweden have affected infant survival. Norman and colleagues compared outcomes for all 2206 births of extremely preterm infants in Sweden and found that 1-year survival and survival without major neonatal morbidity improved between 2004-2007 and 2014-2016. In an Editorial, Rysavy and Ehret suggest that long-term follow-up is critical for children born preterm and their families.

Editorial 1163

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## Opinion

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A Glickman, SSP DiMaggio, and EJ Emanuel

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I Katz and AK Jha

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ME Sundaram, LB Guterman, and SB Omer

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S Sengupta

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## Clinical Review & Education

### In-Hospital Cardiac Arrest

1200

In-hospital cardiac arrest is common and often fatal. Andersen and colleagues review the clinical management of patients during and after cardiac arrest and discuss opportunities for quality improvement.

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### Adjusting for Variability in Multicenter Randomized Trials

1211

In this JAMA Guide to Statistics and Methods, Senn and Lewis discuss analytic methods to adjust for systematic differences by treatment site, such as differences in patient populations, ancillary treatment practices, or other factors.

### A Man With Persistent Painful Vesicles

1213



This JAMA Clinical Challenge by Haley and Tyring presents a 22-year-old man with an 8-year history of painful grouped vesicular and verrucous lesions in a single anatomical location. What would you do next?



### JAMA Patient Page

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### Editor's Audio Summary

Howard Bauchner, MD, summarizes and comments on this week's issue.

### Author Audio Interview



Ezekiel J. Emanuel, MD, PhD, author of "The Next Phase in Effective Cost Control in Health Care"

### Audio Interview

Ted Muller, MD, profiled in "Paradise's Emergency Department Director Recalls California's Worst Wildfire"

### Visual Abstract

"Effect of Sustained Inflation vs Intermittent Positive Pressure Ventilation on Bronchopulmonary Dysplasia or Death Among Extremely Preterm Infants: The SAIL Randomized Clinical Trial"

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