

Research

CARING FOR THE CRITICALLY ILL PATIENT

Aspirin and the Development of ARDS in At-Risk Patients 2406

Management of acute respiratory distress syndrome (ARDS) is primarily supportive. Whether early intervention can prevent the development of ARDS is not known. In a multicenter randomized placebo-controlled trial that enrolled 400 patients who presented to the emergency department and were assessed to be at risk of developing ARDS, Kor and colleagues evaluated the efficacy and safety of early aspirin administration for prevention of ARDS. The authors found that compared with placebo, use of aspirin—a 325-mg loading dose followed by 81 mg/d through hospital day 7—did not reduce the risk of ARDS at 7 days. An Editorial by Reilly and Christie discusses prevention of ARDS.

Editorial 2403

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Opioids and Mortality in Patients With Chronic Noncancer Pain 2415

In a retrospective study of Tennessee Medicaid data representing 22 912 new episodes of prescribed therapy for patients with chronic noncancer pain and no evidence of end-of-life care, Ray and colleagues assessed the relative risk of death among patients who initiated therapy with long-acting opioids compared with analgesic anticonvulsants or low-dose cyclic antidepressants prescribed for pain. The authors found that prescription of long-acting opioids was associated with a significantly increased risk of all-cause mortality, including deaths from causes other than overdose.

Comparative Weight Loss With Pharmacologic Treatment 2424

Data on the comparative effectiveness of 5 medications approved for management of obesity are limited. In a network meta-analysis of data from 28 randomized trials (29 018 total patients) comparing orlistat, lorcaserin, naltrexone-bupropion, phentermine-topiramate, or liraglutide with either another active agent or placebo to treat overweight or obesity in adults, Khera and colleagues found that compared with placebo, the medications were each associated with higher odds of achieving a 5% or greater weight loss at 1 year. Phentermine-topiramate and liraglutide were associated with the greatest weight loss.

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132 YEARS
OF CONTINUOUS
PUBLICATION

Editor in Chief
Howard Bauchner, MD

Research (continued)

CARING FOR THE CRITICALLY ILL PATIENT

Ventilation Delivered by Helmet vs Face Mask in ARDS

2435

Noninvasive ventilation (NIV) with a face mask is relatively ineffective for preventing endotracheal intubation in patients with acute respiratory distress syndrome (ARDS). In a randomized trial that enrolled 83 patients with ARDS and NIV with a face mask for at least 8 hours, Patel and colleagues found that compared with continued NIV delivered by face mask, switching to NIV delivered with a helmet resulted in a significant reduction in intubation rates and 90-day mortality. In an Editorial, Beitler and colleagues discuss NIV in early ARDS.

Editorial 2401

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Clinical Review & Education

Polymyalgia Rheumatica and Giant Cell Arteritis

2442

This systematic review by Buttgereit and colleagues summarizes the evidence relating to the diagnosis and treatment of polymyalgia rheumatica and giant cell arteritis. Twenty randomized trials of therapies (1016 patients) and 30 imaging studies for diagnosis or assessment of treatment response (2080 patients) were included. Characteristic clinical features, findings on imaging studies, and consensus-based recommendations for pharmacotherapy are presented.

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Avoiding Opioid Analgesics in Chronic Low Back Pain

2459

Authors of a systematic review and meta-analysis published in *JAMA Internal Medicine* reported that recommended doses of opioid analgesics did not provide clinically meaningful pain relief in persons with chronic low back pain. In this From The JAMA Network article, Ballantyne discusses avoiding opioid treatment in the absence of evidence for effectiveness.

From The Medical Letter: Treatment of Lyme Disease

2461

This *Medical Letter on Drugs and Therapeutics* article summarizes recommendations for treatment of Lyme disease. After an *Ixodes scapularis* or *I pacificus* tick bite, prophylaxis with a single dose of doxycycline can be considered for nonpregnant adults and children aged 8 years and older. Antibiotics (doxycycline or recommended alternatives) cure almost all patients with erythema migrans and prevent more severe manifestations of Lyme disease.

Online @ jama.com



Editor's Audio Summary

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

Author Interview

AUDIO Interview with Linden T. Hu, MD, and Paul G. Auwaerter, MD, who discuss the prevention, diagnosis, and treatment of Lyme disease



VIDEO Delivery of Noninvasive Ventilation by Helmet
Bic Patel and Coauthors



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