

Research

Risk Score to Predict Cardiovascular Disease Outcomes 2532

Ganz and colleagues found that a 9-protein risk score—derived from the results of large-scale analysis of 1130 circulating proteins in a cohort of 938 patients with stable coronary artery disease and validated in an independent cohort of 971 patients—performed better than the Framingham secondary event risk score in predicting incident cardiovascular events. In an Editorial, Sabatine discusses the aptamer-based technology used in the study and relevance of the findings for patient care.

Editorial 2525

Dietary Intake Among US Adults: 1999-2012 2542

Rehm and colleagues examined trends in dietary intake and diet quality in an analysis of cross-sectional dietary recall data from 33 932 adults participating in the 1999-2012 National Health and Nutrition Examination Surveys. Among the findings were disparities in diet quality by race/ethnicity, education, and income. In an Editorial, Denke discusses the challenge to improve dietary habits in the United States.

Editorial 2527

CME jamanetworkcme.com

Plant-Based Therapies and Menopausal Symptoms 2554

In a meta-analysis of data from 62 randomized trials (6653 women), Franco and colleagues found that phytoestrogen supplementation was associated with a modest reduction in some menopausal symptoms, including the number of hot flashes and vaginal dryness, but no reduction in night sweats. Several herbal remedies were associated with decreased frequency of vasomotor symptoms.

Clinical Review & Education

Screening for Colorectal Cancer 2564

This US Preventive Services Task Force (USPSTF) Recommendation Statement addresses screening for colorectal cancer. Based on a review of the evidence and the results of a comparative modeling study examining optimal starting and stopping ages and screening intervals, the USPSTF recommends that asymptomatic adults begin screening at age 50 years and continue until age 75 years. The USPSTF concluded with high certainty that screening for colorectal cancer in average-risk, asymptomatic adults aged 50 to 75 years is associated with substantial net benefit. In an Editorial, Ransohoff and Sox discuss implications of the screening recommendations.

Editorial 2529 Related Articles 2519, 2576, and 2595 JAMA Patient Page 2635 and 2636

Author Audio Interview and Author Video Interview jama.com CME jamanetworkcme.com



Humanities

The Art of JAMA

2502 *Taimyr*, 1958
Victor Vasarely (1906-1997)

Poetry and Medicine

2625 Neighborhood Playground

JAMA Revisited

2626 The Strenuous Life
and Its Effects in Disease
S. T. Rucker, M.D., Memphis, Tenn.

Opinion

Viewpoint

2517 Transforming the Health Care Response to Intimate Partner Violence: Addressing "Wicked Problems"
K Young-Wolf, K Kotz, and B McCaw

2519 Blood-Based Screening for Colon Cancer: A Disruptive Innovation or Simply a Disruption?
RB Parikh and V Prasad

2521 Toward an Integrated Federal Health System
D Khullar and DA Chokshi

A Piece of My Mind

2523 Osler in Jail
JS Bell

Editorial

2525 A Protein-Based Risk Score for Cardiovascular Disease Prediction: Using Aptamer-Based Technology to Probe the Plasma Proteome
MS Sabatine

2527 Changing Dietary Habits and Improving the Healthiness of Diets in the United States
MA Denke

2529 Clinical Practice Guidelines for Colorectal Cancer Screening: New Recommendations and New Challenges
DF Ransohoff and HC Sox

LETTERS

Research Letter

2617 Changes in Insurance Coverage Among Hospitalized Nonelderly Adults After Medicaid Expansion in Michigan
MM Davis, A Gebremariam, and JZ Ayanian

Comment & Response

2618 Diet and Exercise for Obese Patients With Heart Failure

2620 Stem Cell Transplantation for Refractory Crohn Disease

2621 Lung Volume Reduction Coils for Severe Emphysema

2622 Drug-Drug Interactions in Treatment Using Azole Antifungal Agents

2623 Roles of Academic and Public Health Systems in Advancing Population Health

2624 Correction

Editor in Chief
Howard Bauchner, MD

132 YEARS
OF CONTINUOUS
PUBLICATION

Clinical Review & Education (continued)

Screening for Colorectal Cancer: Evidence Report 2576

Lin and colleagues summarize findings from the US Preventive Services Task Force evidence review of the effectiveness, diagnostic accuracy, and harms of colorectal cancer screening using stool-based tests, endoscopy, and imaging in adults at average risk. The authors report that colonoscopy, flexible sigmoidoscopy, computed tomographic colonography, and stool-based tests have differing levels of evidence to support their use, differing ability to detect cancer and precursor lesions, and vary in the risk of serious adverse events.

Related Articles [2564](#) and [2595](#)
CME jamanetworkcme.com

Benefits, Burden, and Harms of CRC Screening Strategies 2595

To inform the US Preventive Services Task Force Recommendations for colorectal cancer (CRC) screening, Knudsen and colleagues performed a microsimulation modeling study of a hypothetical screening-naïve population undergoing CRC screening with 100% adherence. The authors found that 4 strategies (performed from ages 50 to 75 years) resulted in similar life-years gained and a comparable balance of benefit and screening burden: colonoscopy every 10 years, sigmoidoscopy every 10 years with annual fecal immunochemical testing (FIT), computed tomographic colonography every 5 years, and annual FIT.

Related Articles [2564](#) and [2576](#)

Reducing Childhood Tobacco Smoke Exposure 2610

An article in *JAMA Pediatrics* reported that interventions delivered by health care professionals during routine child health care visits may be effective in preventing maternal postpartum smoking relapse. In this From The JAMA Network article, Ebbert and Jacobson discuss the limited effectiveness of parental smoking cessation interventions to reduce child exposure to tobacco smoke.

Delivery of Parenteral Nutrition in Neonates 2612

This JAMA Clinical Evidence Synopsis article by Ainsworth and McGuire summarizes a Cochrane review of 6 randomized trials (549 total patients) comparing peripherally inserted central catheters (PICCs) with short peripheral cannulas for delivering parenteral nutrition to neonates. The review found that parenteral nutrition via PICCs is associated with better nutrient delivery. Associations with mortality or invasive infection did not differ between the 2 catheter types.

Screening for Colorectal Cancer



ADULTS

A

Recommended

C

Recommendation depends on the patient's situation

JAMA Patient Page

- [2635](#) Screening for Colorectal Cancer
- [2636](#) Screening Tests for Colorectal Cancer

NEWS & ANALYSIS

Medical News & Perspectives

[2510](#) Patient Access to Physician Notes Is Gaining Momentum

JAMA Infographic

[2512](#) A Snapshot of Cancer Spending and Outcomes

2513 Global Health

Switch From Trivalent to Bivalent Oral Polio Vaccine

Reducing Malaria Parasite Load in Donated Blood

Focus on HIV in West and Central African Countries

Female Genital Mutilation Continues in Guinea

2514 News From the FDA

New Fluoroquinolone Warning

Olanzapine Linked With Potentially Fatal Skin Reaction

Antipsychotic Drug May Cause Impulse-Control Problems

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Editor's Audio Summary

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

Author Interview

VIDEO and AUDIO Interview with Douglas K. Owens, MD, MS, author of "Screening for Colorectal Cancer: US Preventive Services Task Force Recommendation Statement"

Animated Summary Video



Screening for Colorectal Cancer: US Preventive Services Task Force Recommendation Statement

Departments

- [2497](#) Staff Listing
- [2614](#) CME Questions
- [2627](#) JAMA Network Abstracts
- [2630](#) Classified Advertising
- [2633](#) Journal Advertiser Index
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