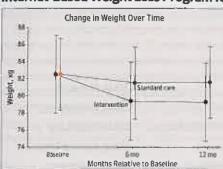
Research

Internet-Based Weight Loss Program for Postpartum Women



Postpartum weight retention increases lifetime risk of obesity and related morbidity, but few effective interventions exist for multicultural, low-income women. In a randomized clinical trial by Phelan and colleagues of 371 low-income postpartum women, an internetbased weight loss program compared with standard care from the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) re-

sulted in significantly greater weight loss over 12 months. In an Editorial, Tsai and Nicholson note that clinical guidelines may need to be adapted for individual patients or patient groups because some new mothers may be able to achieve weight loss with lifestyle interventions that do not require in-person visits.

Editorial 2375

New Treatments for Metastatic Colon Cancer

2392 Combination chemotherapy with cytotoxic drugs and biological antibodies is active against metastatic colorectal cancer, but the optimal choice of biologic therapy is unknown. In a randomized clinical trial by Venook and colleagues of 1074 patients with untreated advanced or metastatic colorectal cancer, there was no significant difference in overall survival for patients who received chemotherapy plus cetuximab vs chemotherapy plus bevacizumab. In an Editorial, Lieu and Messersmith suggest that additional analyses of this and other trials may help guide the clinical management of patients with colorectal cancer.

Editorial 2376

BRCA1 and **BRCA2** Mutation Carrier Status and Cancer Risks 2402

Estimates of the risk of developing cancer for women with BRCA1 and BRCA2 mutations can be used to inform decisions about screening and prevention. Kuchenbaecker and colleagues conducted a prospective cohort study of 6036 women with BRCA1 mutations and 3820 women with BRCA2 mutations and assessed their cumulative risks of breast and ovarian cancer



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Editor in Chief Howard Bauchner, MD 133 YEARS OF CONTINUOUS PUBLICATION

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Clinical Review & Education

Screening for Obesity in Children: USPSTF Recommendation 2417

Overweight and obesity in childhood are associated with short-term and long-term morbidity. Based on evidence that comprehensive behavioral interventions can result in improvements in weight status for up to 12 months, the US Preventive Services Task Force recommends screening for obesity in children and adolescents aged 6 years and older and referral for evidence-based behavioral interventions. In an Editorial, Thornton and colleagues note that intensive weight management programs may be out of reach for many families and emphasize the importance of complementary social and environmental strategies.

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Weight Management in Children: Evidence Report

To inform US Preventive Services Task Force deliberations on screening for obesity and interventions for weight management, O'Connor and colleagues synthesized findings of a systematic review of 42 trials with 6956 participants and found that lifestyle-based interventions with 26 or more hours of contact can help children and adolescents lose weight.

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Phenytoin Toxicity

This article in the JAMA Performance Improvement series explores the case of a patient with iatrogenic phenytoin toxicity. A root cause analysis identified a system error in the process of updating the patient's medication list. Gupta and colleagues discuss the importance of reconciling medication orders at every handoff of patient care.

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Screening for Obesity in Children and Admescents





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Editor's Audio Summary

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

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Author Interview



AUDIO Interview with David C. Grossman, MD, MPH, author of "Screening for Obesity in Children and Adolescents: US Preventive Services Task

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