



Research

Community-Wide CVD Prevention Program Outcomes **147**

Record and colleagues report results of a 40-year observational study in Franklin County, Maine—a rural, low-income community (population, 22 444 in 1970)—that involved community-wide programs targeting cardiovascular disease (CVD) risk factors and behavior change to improve health outcomes among the county residents. The authors report that compared with the rest of the Maine, hypertension and hyperlipidemia control increased and rates of hospitalization and mortality decreased among Franklin County residents from 1970 to 2010. In an Editorial, Labarthe and Stamler discuss replication of successful community-based CVD prevention programs.

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📺 Continuing Medical Education jamanetworkcme.com

Asthma and Risk of Obstructive Sleep Apnea **156**

Obstructive sleep apnea is common among patients with asthma; however, it is not known whether asthma is associated with the development of obstructive sleep apnea. In a population-based prospective study that included 547 adults free of obstructive sleep apnea at baseline (1988), Teodorescu and colleagues found that the presence and duration of asthma was associated with an increased 4-year risk of new-onset obstructive sleep apnea.

Breast Cancer Stage at Diagnosis and Survival **165**

In an analysis of Surveillance, Epidemiology, and End Results 18 data from 452 215 women diagnosed with invasive breast cancer from 2004 to 2011, Iqbal and colleagues examined differences in stage at diagnosis and cancer-specific survival rates by race and ethnicity. The authors report that the likelihood of diagnosis at an early stage and survival after stage I diagnosis varied by race and ethnicity, with much of the variation explained by biological differences in tumor aggressiveness. In an Editorial, Daly and Olopade discuss personalizing risk assessment and treatment to close the breast cancer survival gap.

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Editor's Audio Summary
Phil B. Fontanarosa, MD, MBA, summarizes and comments on this week's issue.

Author Interview

VIDEO Interview with Steven A. Narod, MD, author of "Differences in Breast Cancer Stage at Diagnosis and Cancer-Specific Survival by Race and Ethnicity in the United States"

Author Reading

AUDIO Robert S. Langer, ScD, reads his Viewpoint "Nanotechnology."



Editor in Chief
Howard Bauchner, MD

131 YEARS
OF CONTINUOUS
PUBLICATION

Clinical Review & Education

Anatomy of Medical Research: US and International Comparisons 174

Moses and colleagues analyzed 1994-2012 data relating to investment in medical research in the United States and globally and found that the rate of investment in the United States has declined since 2004, which contrasts with growth in research investment globally—particularly in Asia. Investment in health services research in the United States was low compared with other industries. In an Editorial, Dzau and Fineberg discuss why the United States must maintain its position as a global leader in biomedical research. An Editorial by Fontanarosa and Bauchner introduces a new *JAMA* series, Scientific Discovery and the Future of Medicine.

Editorial 143 and 145

Participation of Psychiatrists in Health Insurance Networks 190

An article in *JAMA Psychiatry* reported that acceptance rates of private insurance, Medicare, and Medicaid were significantly lower for psychiatrists than for physicians in other specialties in 2009-2010. This From The *JAMA* Network article by Cummings discusses psychiatrists' declining rates of participation in health insurance networks and implications for patient access to mental health care.

Screening for Asymptomatic Carotid Artery Stenosis 192

This *JAMA* Clinical Guidelines Synopsis article by Weyer and Davis summarizes the 2014 US Preventive Services Task Force guideline for carotid artery stenosis (CAS) screening in asymptomatic individuals, which recommends against screening. Guideline development included review of 56 studies relevant to the relationship between CAS screening and stroke reduction, the benefits and harms of screening, and outcomes of therapeutic interventions.

Lactate in Sepsis 194

Gomez and Kellum discuss a patient with a 5-day history of fever, cough, and malaise who presented to the emergency department in severe respiratory distress. A serum lactate level was 3.1 mmol/L (normal range, <2 mmol/L). Following intubation, initiation of antibiotic therapy, and fluid resuscitation, the lactate level normalized but then worsened to 3.0 mmol/L. How would you interpret these findings?



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