

Research

Laryngeal Tube Insertion for Cardiopulmonary Resuscitation 769

During resuscitation with endotracheal intubation, the endotracheal tube may be malpositioned or dislodged. Wang and colleagues randomized 3004 adults with out-of-hospital cardiac arrest who were resuscitated by paramedics from 27 emergency medical services agencies and found that a strategy of laryngeal tube insertion was associated with significantly greater 72-hour survival compared with a strategy of endotracheal intubation. In an Editorial on 2 trials of advanced airway management, Andersen and Granfeldt speculate whether an even simpler technique, bag-valve-mask ventilation, would have similar or better outcomes.

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A Supraglottic Device for Cardiopulmonary Resuscitation 779

Insertion of a supraglottic airway device is faster than endotracheal intubation and requires less training to maintain proficiency. However, in a trial by Bengler and colleagues that randomized 1523 paramedics from 4 ambulance services, use of a supraglottic airway device compared with endotracheal intubation did not result in a favorable functional outcome at 30 days.

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Global Variation in Firearm Mortality Rates 792

A comparison of firearm mortality rates can suggest opportunities for prevention. The US Burden of Disease Collaborators analyzed vital registration data from 195 countries and territories and estimated there were 195 000 to 276 000 firearm injury deaths globally in 2016, with marked variation among countries and across demographic subgroups. In an Editorial, Rivara and colleagues suggest that better data on access to firearms would facilitate the evaluation of firearm injury policies and prevention strategies.

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Editor in Chief
Howard Bauchner, MD

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Clinical Review & Education

Clinical Management of Alcohol Use Disorder **815**

The frequent or binge use of alcohol is a common cause of morbidity and mortality. Kranzler and Soyka review the diagnosis and treatment of patients with alcohol use disorder. In an Editorial, Saitz recommends that all adults be screened for alcohol use disorder in primary care.

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Will This Patient Develop Severe Alcohol Withdrawal? **825**

Patients with severe alcohol withdrawal syndrome may experience seizures, delirium tremens, aspiration pneumonia, arrhythmia, or myocardial infarction. This article in the JAMA Rational Clinical Examination series by Wood and colleagues reviews the identification of patients at risk for developing severe alcohol withdrawal.

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Editor's Audio Summary

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

Author Audio Interview



Henry R. Kranzler, MD, author of "Diagnosis and Pharmacotherapy of Alcohol Use Disorder: A Review," and Evan Wood, MD, author of "Will This Adult Patient Develop Severe Alcohol Withdrawal?"

Visual Abstract

Effect of a Strategy of Initial Laryngeal Tube Insertion vs Endotracheal Intubation on 72-Hour Survival in Adults With Out-of-Hospital Cardiac Arrest: A Randomized Clinical Trial

Animated Video Summary



Global Mortality From Firearms, 1990-2016

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