

Research

Dietary Factors and Mortality

912

Understanding the role of dietary components in the development of cardiometabolic disease can help to identify priorities, guide public health planning, and inform prevention strategies. Using data from National Health and Nutrition Examination Surveys (n = 16 620) and the National Center for Health Statistics (n = 702 308) to estimate associations of diet and disease from meta-analyses of prospective studies and clinical trials, Micha and colleagues found that dietary factors are associated with a substantial proportion of deaths from heart disease, stroke, and diabetes. In an Editorial, Mueller and Appel discuss the challenges of isolating and estimating the effects of individual nutrients and foods, but they conclude that the benefits of better eating justify policies to improve diet quality.

Editorial 908

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Maternal Body Mass Index in Pregnancy and Cerebral Palsy

925

Maternal obesity is a major prenatal risk factor for obstetric complications, preterm delivery, and asphyxia-related neonatal morbidities. In a population-based retrospective cohort study of 1 423 929 singleton children born to women in Sweden from 1997 through 2011 and followed up through 2012, Villamor and colleagues found that maternal overweight and obesity were significantly associated with the rate of cerebral palsy. The association was limited to children born at full term and was partly mediated through asphyxia-related neonatal complications.

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Lipoprotein Lipase Gene Variation and Coronary Artery Disease

937

The activity of lipoprotein lipase (LPL) is the rate-determining step in clearing triglyceride-rich lipoproteins from the circulation. Mutations that damage the LPL gene (*LPL*) lead to lifelong deficiency in enzymatic activity. In a series of studies by Khera and colleagues, *LPL* was sequenced, common variants were genotyped in up to 305 699 individuals of the Global Lipids Genetics Consortium and up to 120 600 individuals of the CARDIoGRAM Exome Consortium, and study-specific estimates were pooled via meta-analysis. The presence of rare damaging mutations in *LPL* was significantly associated with higher triglyceride levels and presence of coronary artery disease.

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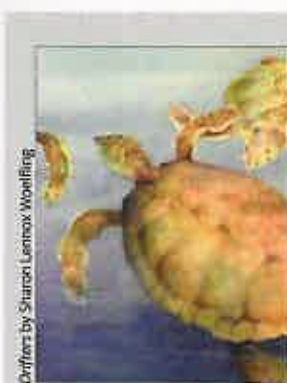
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Editor In Chief
Howard Bauchner, MD

Clinical Review & Education

Screening for Gynecologic Conditions With Pelvic Examination 947

It is unclear whether screening pelvic examinations in asymptomatic women have a significant effect on disease morbidity and mortality. This recommendation statement of the US Preventive Services Task Force (USPSTF) concludes that current evidence is insufficient to assess the balance of benefits and harms of screening pelvic examinations for asymptomatic, nonpregnant adult women, and encourages clinicians to engage in shared decision making with their patients to determine whether a pelvic examination should be done. In an Editorial, McNicholas and Peipert acknowledge the lack of evidence for this and other components of the physical examination and affirm that women, as patients, should be involved in the decision to perform a pelvic examination for the purpose of screening.

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A Author Audio Interview jama.com CME jamanetworkcme.com

Periodic Screening Pelvic Examination 954

To inform the USPSTF's deliberations on whether nonpregnant women without gynecologic symptoms would obtain net health benefits from periodic screening pelvic examinations, Guirguis-Blake and colleagues reviewed 9 studies (27 630 participants) of unselected women who were not symptomatic or pregnant. No direct evidence was identified for overall benefits and harms of the pelvic examination as a 1-time or periodic screening test.

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Opioid Agonist Treatment for Patients With Opioid Dependence 967

This JAMA Clinical Evidence Synopsis by Nielsen and colleagues summarizes findings from a Cochrane review of current evidence for the treatment of prescription opioid dependence using opioid agonist treatments. The review found that long-term maintenance with buprenorphine was associated with less prescription opioid use and better adherence to treatment for opioid dependence than opioid taper or psychological treatments alone. No difference was found in treatment outcomes for patients receiving methadone or buprenorphine as maintenance therapy.

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Editor's Audio Summary

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

Author Interview



AUDIO Interview with Maureen G. Phipps, MD, MPH, author of "Screening for Gynecologic Conditions With Pelvic Examination: US Preventive Services Task Force Recommendation Statement"

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