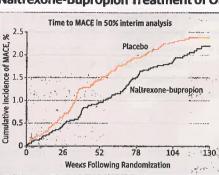
Research

Naltrexone-Bupropion Treatment of Obesity and MACE



Two previously marketed obesity drugs—fenfluramine and sibutramine—were withdrawn after evidence of cardiovascular harm emerged. Nissen and colleagues assessed whether obesity treatment with naltrexone-bupropion increases major adverse cardiovascular events (MACE) in a randomized, placebo-controlled noninferiority trial that enrolled 8910 overweight or obese patients.

The authors report results of interim analyses performed after accrual of 25% and 50% of expected MACE, which found that the risk estimate for MACE did not exceed the prespecified noninferiority boundary; however, because of unanticipated early termination of the trial, the cardiovascular safety of the treatment remains uncertain. In an Editorial, Sharfstein and Psaty discuss the evaluation of the cardiovascular safety of naltrexone-bupropion treatment of obesity.

- Editorial 984 Related Article 1046
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Vitamin D Supplementation for Symptomatic Knee Osteoarthritis 1005

Observational studies suggest vitamin D supplementation is associated with beneficial effects on knee osteoarthritis (OA). In a randomized, double-blind trial that enrolled 413 patients with symptomatic knee OA and low serum 25-hydroxyvitamin D levels, Jin and colleagues found that compared with placebo, vitamin D supplementation did not result in significant differences in the change in tibial cartilage volume or knee pain score over 2 years.

Risk Score for Persistent Postconcussion Symptoms in Children 1014

Persistent postconcussion symptoms (PPCS) occur in approximately one-third of children who experience a concussion. In an analysis of data from 3063 children aged 5 up to 18 years who presented to an emergency department with acute concussion, Zemek and colleagues derived and validated a clinical risk score for PPCS. The authors report the risk score had modest discrimination to stratify patients at risk of PPCS 28 days after head injury. In an Editorial, Babcock and Kurowski discuss identification of children at risk for PPCS.

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Hypertensive Disorders of Pregnancy and Cardiomyopathy Risk 1026

Hypertensive disorders of pregnancy, particularly preeclampsia, are associated with an increased risk of cardiomyopathy during the peripartum period—from the last month of pregnancy through 5 months after delivery. In a cohort study involving more than 1 million Danish women, Behrens and colleagues found that women with a history of hypertensive disorders of pregnancy, compared with women without such a history, have a small increased risk of cardiomyopathy, which persists beyond the peripartum period.

Clinical Review & Education

Glycemic Control in Older Adults With Type 2 Diabetes

Few older adults with type 2 diabetes are enrolled in randomized trials of glucose-lowering medications, leading to substantial uncertainty about optimal glycemic control for this patient population. Lipska and colleagues reviewed the existing evidence on the benefits and harms of intensive vs standard glycemic control targets for older patients. The authors present an approach to help patients and clinicians reach individualized treatment goals.

Author Audio Interview jama.com Continuing Medical Education jamanetworkcme.com

Time-to-Event Analysis

1046

In many clinical studies, an outcome of interest is the time interval between the initiation of treatment and the occurrence of an adverse event. This JAMA Guide to Statistics and Methods article by Tolles and Lewis discusses the use of time-to-event analysis in clinical trials, statistical methods for analyses, and considerations for interpreting results.

Related Article 990

Prevention, Diagnosis, Treatment of Postthrombotic Syndrome 1048

Postthrombotic syndrome (PTS) may occur in 20% to 50% of patients with a deep venous thrombosis. This JAMA Clinical Guidelines Synopsis by Jain and Cifu summarizes an American Heart Association scientific statement: The Postthrombotic Syndrome: Evidence-Based Prevention, Diagnosis, and Treatment Strategies. Prevention and treatment strategies considered in the evidence review include elastic compression stockings, low-molecular-weight heparin, new oral anticoagulants, and compression dressings and pentoxifylline for treatment of venous ulcers.



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Edward H. Livingston, MD, summarizes and comments on this week's issue.

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AUDIO Interview with Kasia J. Lipska, MD, MHS, author of "Polypharmacy in the Aging Patient: Glycemic Control in Older Adults With Type 2 Diabetes: A Review"

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