In This Issue of JAMA

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Research

OnabotulinumtoxinA vs Sacral Neuromodulation in Incontinence 1366

Treatment options for refractory urgency urinary incontinence include sacral neuromodulation, posterior tibial nerve stimulation, and onabotulinumtoxinA injection. Evidence to guide the choice of therapy is lacking. In an open-label randomized clinical trial that enrolled 386 women with refractory urgency urinary incontinence, Amundsen and colleagues found that treatment with onabotulinumtoxinA, compared with sacral neuromodulation, resulted in a small improvement in mean daily episodes of incontinence—3.9 fewer vs 3.3 fewer episodes per day, respectively. Treatment with onabotulinumtoxinA resulted in a higher risk of urinary tract infections and need for self-catheterizations.

Hypothermia After In-Hospital Cardiac Arrest

Therapeutic hypothermia is recommended for comatose patients following out-of-hospital or in-hospital cardiac arrest. However, whether this treatment improves patient survival after in-hospital cardiac arrest is not known. Chan and colleagues assessed the association between therapeutic hypothermia and survival to hospital discharge in an analysis of data from 5238 patients who had been successfully resuscitated from an in-hospital cardiac arrest. Patients who had been treated with hypothermia (n = 1524) were matched by propensity score to 3714 patients who received usual care that did not include hypothermia. The authors found that compared with usual care, use of therapeutic hypothermia was associated with a lower likelihood of survival to hospital discharge and a lower likelihood of favorable neurological survival.

■ CME jamanetworkcme.com

LDL-C-Lowering Genetic Variants and Risk of Type 2 Diabetes 13

Treatment with statins is associated with a higher incidence of new-onset type 2 diabetes. In a meta-analysis of genetic association studies that included 50775 individuals with type 2 diabetes and 270269 controls, Lotta and colleagues found that exposure to low-density lipoprotein cholesterol (LDL-C)-lowering genetic variants in or near *NPCIL1* and other genes was associated with a higher risk of type 2 diabetes.



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

Treatments for Nausea and Vomiting in Pregnancy

1392

Nausea and vomiting in pregnancy affects up to 85% of women. In a systematic review of 78 studies (67 randomized clinical trials) of treatments for pregnancy-associated nausea and vomiting, including the most severe form, hyperemesis gravidarum, McParlin and colleagues found that compared with placebo, treatments with ginger, vitamin B_6 , antihistamines, and metoclopramide were associated with improvement of mild symptoms of nausea and vomiting. Pyridoxine-doxylamine, promethazine, and metoclopramide were associated with improvement in symptoms of moderate severity. Ondansetron was associated with improvement in nausea and vomiting of any severity, and corticosteroids were associated with benefit in severe cases.

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■ Author Video Interview jama.com CME jamanetworkcme.com

Management of Acne

1402

An estimated 50 million people in the United States—including 85% of all adolescents and 12% of adult women—have acne. This JAMA Clinical Guidelines Synopsis article summarizes the 2016 American Academy of Dermatology Guidelines of Care for the Management of Acne Vulgaris. Successful acne management depends on accurate disease assessment, development of an appropriate treatment regimen, and attention to treatment adherence. Effective topical agents include retinoids and benzoyl peroxide alone or in combination with a topical antibiotic. Evidence regarding use of systemic antibiotics, combined oral contraceptives, and oral isotretinoin in the treatment of acne is reviewed.

From The Medical Letter: Alternatives to Fluoroguinolones

1404

The US Food and Drug Administration has approved changes in the labeling of systemic fluoroquinolones, noting that risks of serious adverse effects—including tendinitis, peripheral neuropathy, and central nervous system effects—generally outweigh any benefits of fluoroquinolones in the treatment of acute sinusitis, acute exacerbations of chronic bronchitis, and uncomplicated urinary tract infections. This *Medical Letter on Drugs and Therapeutics* article provides information on alternatives to fluoroquinolones for the treatment of these diseases.



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Editor's Audio Summary

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

JAMA Performance Improvement

This new section is accompanied by an audio case discussion providing in-depth analysis. Listen at

http://sites.jamanetwork.com/linked-audio /jpi160002audio1.html

Author Interview

AUDIO Interview with Steve Robson, MD, author of "Treatments for Hyperemesis Gravidarum and Nausea and Vomiting in Pregnancy: A Systematic Review"

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