Research

Vitamin D and Survival With Digestive Tract Cancers

Effect of vitamin D supplementation on relapse or death

The supplementation on relapse or death

Placebo

Vitamin D

Years After Randomization

Higher levels of vitamin D are associated with lower digestive system cancer mortality. Urashima and colleagues randomized 417 patients with cancers of the digestive tract and found that vitamin D supplementation did not improve relapse-free survival. In an Editorial, Barry and colleagues suggest that a higher vitamin D level may be an indicator of overall health status.

Editorial 1354 Related Article 1370

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High-Dose Vitamin D and Survival With Colorectal Cancer

Experimental evidence suggests that vitamin D may have antineoplastic activity. Ng and colleagues randomized 139 patients with advanced or metastatic colorectal cancer and found that adding high-dose vitamin D_3 , vs standard-dose vitamin D_3 , to standard chemotherapy had no benefit for the outcome of median progression-free survival but did reduce the hazard ratio for progression or death.

Editorial 1354 Related Article 1361

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HIV Prophylaxis and Sexually Transmitted Infections

Adherence to HIV preexposure prophylaxis reduces the risk of infection with HIV, but may be associated with behavioral change that leads to an increase in bacterial sexually transmitted infections. In an observational study with 2981 participants, Traeger and colleagues for the PrEPX Study Team found that participants were more likely to be diagnosed as having sexually transmitted infections after initiating HIV preexposure prophylaxis. In an Editorial, Gandhi and colleagues suggest that enhanced testing and treatment strategies could decrease the transmission of sexually transmitted infections.

Editorial 1356

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Research (continued)

Genomic Profiling, Clinical Care, and Therapeutic Outcomes

Exploratory analyses of genomic and clinical data may suggest hypotheses for studies of

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cancer therapeutics. In a feasibility analysis of clinical and genomic data from the electronic health records of 4064 patients with non-small cell lung cancer, Singal and colleagues were able to replicate previously described associations between patient characteristics and responses to targeted therapy. In an Editorial, Basch and Schrag suggest that electronic patient data sets may have several applications, but too few of them include information about symptoms, functioning, and quality of life.

Editorial 1359

Clinical Review & Education

Cost-effectiveness Analysis

In this JAMA Guide to Statistics and Methods, Sanders and colleagues explain how the incremental benefits and costs of interventions can be compared within a consistent framework.

Reducing Wait Times in the Emergency Department

This article in the JAMA Performance Improvement series presents a patient who visited an emergency department twice and waited a total of 6 hours to be evaluated for a scaphoid fracture. Mercer and colleagues discuss the implementation of a fast-track care pathway that reduced wait times for patients with low-acuity conditions without increasing wait times for patients with higher-acuity conditions.

Author Audio Interview jama.com

A Woman With Headache and Blurred Vision

This JAMA Diagnostic Test Interpretation article by Hale and colleagues presents a 65-year-old woman with a throbbing headache and blurred vision who had an elevated erythrocyte sedimentation rate, an elevated globulin gap, and a normal temporal artery biopsy. What would you do next?



JAMA Patient Page 1418 Eosinophilic Esophagitis

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

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Author Audio Interview



John A. Baron, MD, MS, MSc, author of "Vitamin D as Cancer Therapy? Insights From 2 New Trials'

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