In This Issue of JAMA

November 13, 2018 Volume 320, Number 18 Pages 1831-1948

Research

CARING FOR THE CRITICALLY ILL PATIENT

Lung-Protective Ventilation

1872

A ventilation strategy using low tidal volumes may limit pulmonary complications in patients receiving intensive care. The PReVENT Investigators randomized 961 patients without acute respiratory distress syndrome who were receiving invasive ventilation and found that a low tidal volume strategy did not result in a greater number of ventilator-free days than an intermediate tidal volume strategy. In an Editorial, Rubenfeld and Shankar-Hari discuss the challenges of achieving optimal tidal volumes in patients requiring invasive ventilation.

Editorial 1863

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CARING FOR THE CRITICALLY ILL PATIENT

Weaning From Mechanical Ventilation

1881

Noninvasive mechanical ventilation may allow some patients to be extubated who are not yet able to breathe without assistance. Perkins and colleagues for the Breathe Collaborators randomized 364 patients receiving invasive mechanical ventilation for more than 48 hours in whom a spontaneous breathing trial had failed and found that early extubation to noninvasive ventilation did not shorten the time to liberation from any ventilation. In an Editorial, Munshi and Ferguson suggest that noninvasive ventilation may be a reasonable alternative in some patients who do not respond to a trial of spontaneous breathing.

Editorial 1865

Discontinuing Inappropriate Medications

1889

Inappropriate prescriptions in older adults can lead to adverse drug events, falls, cognitive impairment, and emergency hospitalizations. Martin and colleagues randomized 489 adults aged 65 years and older who were prescribed a sedative-hypnotic, first-generation antihistamine, glyburide, or a nonsteroidal anti-inflammatory drug, and found that a pharmacist-led educational intervention resulted in greater discontinuation of prescriptions for inappropriate medication than usual care. In an Editorial, Steinman and Landefeld suggest that interventions are more likely to be effective if they engage patients, physicians, and pharmacists in the deprescribing process.

Editorial 1867 Related Articles 1933 and 1934

■Summary Video jama.com CME jamanetwork.com/learning

Humanities

Poetry and Medicine 1942 The Surgery J Galin

JAMA Revisited 1943 No Intimations as Yet

Opinion

Viewpoint

1853 Gadolinium Retention After Contrast-Enhanced MRI D Levine, RJ McDonald, and HY Kressel

1855 Using Quality Improvement to Promote Clinical Trials of Emergency Trauma Therapies JA Harvin, SH Wootton, and CC Miller

1857 'Million Hearts 2022; Small Steps Are Needed for Cardiovascular Disease Prevention JS Wright, HK Wall, and MD Ritchey

1859 Group Purchasing Organizations, Health Care Costs, and Drug Shortages WE Bruhn, EA Fracica, and MA Makary

A Piece of My Mind 1861 Grief After Suicide N Orford

Editorial

1863 Lessons From ARDS for Non-ARDS Research: Remembrance of Trials Past GD Rubenfeld and M.Shankar-Hari

1865 Weaning From Mechanical Ventilation: What Should Be Done When a Patient's Spontaneous Breathing Trial Fails? L. Munshi and ND Ferguson

1867 Overcoming Inertia to Improve Medication Use and Deprescribing MA Steinman and CS Landefeld

1869 Screening for Unhealthy Alcohol Use A Bazzi and R Saitz

LETTERS

Research Letter

1933 Provision of Naloxone Without a Prescription by California Pharmacists 2 Years After Legislation Implementation T Puzantian and JJ Gasper

1934 Naloxone Accessibility
Without a Prescriber Encounter
Under Standing Orders at Community
Pharmacy Chains in Texas
KE Evoy and Coauthors

1937 Comment & Response

1940 Correction

Editor in Chief Howard Bauchner, MD 135 YEARS
OF CONTINUOUS
PUBLICATION

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Clinical Review & Education

RECOMMENDATION STATEMENT

Reducing Unhealthy Alcohol Use

Excessive alcohol use is associated with increased risks of motor vehicle crashes, liver disease, birth defects, and developmental disabilities. This US Preventive Services Task Force statement recommends screening for unhealthy alcohol use in primary care settings and providing patients engaged in risky or hazardous drinking with brief behavioral counseling. In an Editorial, Bazzi and Saitz suggest that addressing the stigma of heavy alcohol use may promote screening for this risky behavior.

- Editorial 1869 Related Article 1910 JAMA Patient Page 1948
- Author Audio Interview jama.com CME jamanetwork.com/learning

EVIDENCE REPORT

Screening and Counseling for Unhealthy Alcohol Use

In a review of 113 studies, O'Connor and colleagues found that screening in primary care can identify individuals with unhealthy alcohol use and that counseling interventions for those who screen positive are associated with reductions in unhealthy alcohol use.

- Editorial 1869 Related Article 1899 JAMA Patient Page 1948
- Author Audio Interview jama.com

Interpreting Genetic Tests

In the evaluation of a patient with a suspected genetic disease, the finding of a genetic variant may not be diagnostic. This JAMA Insights article by Biesecker and colleagues discusses how genetic test results are integrated with clinical characteristics and family history to arrive at a clinical-molecular diagnosis.

Screening and Countebing to Reduce Unhealthy Atothol Use







JAMA Patient Page

1948 Screening and Counseling to Reduce Unhealthy Alcohol Use

NEWS & ANALYSIS

1910

Medical News & Perspectives 1846 Overdiagnosis of Penicillin Allergy Leads to Costly Inappropriate Treatment

1848 Is There a Seasonal Influence on Cognition and Dementia?

1850 Biotech Innovations

Recovery of Voluntary Movement After Paralysis

Device Reduces Heart Failure Hospitalizations and Deaths

Relapses After CAR-T Therapy

1852 News From the CDC

Antibiotic Resistance Challenge

Alzheimer Burden

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Editor's Audio Summary

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

Author Interview



AUDIO Carol M. Mangione, MD, MSPH, author of "Screening and Behavioral Counseling Interventions to Reduce Unhealthy Alcohol Use in

Adolescents and Adults: US Preventive Services Task Force Final Recommendation Statement*

Audio Interview



Edward H. Livingston, MD, interviews a patient recovering from alcohol misuse.

Visual Abstract

"Effect of a Low vs Intermediate Tidal Volume Strategy on Ventilator-Free Days in Intensive Care Unit Patients Without ARDS: A Randomized Clinical Trial"

Departments

1837 Staff Listing

1931 CME Questions

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