In This Issue of JAMA

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Research

Cerebral Protection Device, Brain Lesions After TAVI

592

Cerebral emboli are a common risk of transcatheter aortic valve implantation (TAVI). In a clinical trial involving 100 patients with severe aortic stenosis who were randomly assigned to undergo TAVI with or without a cerebral embolism protection (filter) device, Haussig and colleagues found that use of the protection device reduced the frequency of ischemic lesions. In an Editorial, Messé and Mack discuss interventions to improve cerebral safety of high-risk cardiovascular procedures.

- G Editorial 587
- Author Video Interview jama.com

Clinical Manifestations of Diabetic Kidney Disease

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In an analysis of cross-sectional data from 6251 adults with diabetes who participated in the 1988-2014 National Health and Nutrition Examination Surveys, Afkarian and colleagues found that the overall prevalence of diabetic kidney disease did not change significantly, whereas the prevalence of albuminuria declined and the prevalence of reduced estimated reduced glomerular filtration rate increased.

Noninvasive Ventilation, Mortality, and BPD in Preterm Infants

611

In a systematic review and network meta-analysis of data from 30 randomized trials (5598 infants) of 7 different ventilation strategies for preterm infants, Isayama and colleagues found that less invasive surfactant administration—involving nasal continuous positive airway pressure without intubation and surfactant administration via a thin diameter tube directly into the trachea—was associated with the lowest likelihood of death or bronchopulmonary dysplasia (BPD) at 36 weeks' postmenstrual age.

Clinical Review & Education

USPSTF RECOMMENDATION STATEMENT

Screening for Lipid Disorders in Children and Adolescents

625

This US Preventive Services Task Force (USPSTF) Recommendation Statement addresses screening for lipid disorders in children and adolescents. Based on results of 2 separate evidence reviews—screening for multifactorial dyslipidemia and screening for heterozygous familial hypercholesterolemia—the USPSTF concluded the current evidence is insufficient to assess the balance of benefits and harms of screening for lipid disorders in children and adolescents. An Editorial by Urbina and de Ferranti discusses benefits and potential harms of lipid screening in children and adolescents.

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- Author Audio Interview jama.com CME jamanetworkcme.com

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PUBLICATION

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Clinical Review & Education (continued)

USPSTF EVIDENCE REPORT

Screening Children to Detect Multifactorial Dyslipidemia

Lozano and colleagues summarize findings from the US Preventive Services Task Force evidence review of the benefits and harms of screening children and adolescents for multifactorial dyslipidemia. The evidence was limited. The review found that the diagnostic yield of screening varies by age and body mass index. No direct evidence addressed benefits or harms of childhood screening or treatment on outcomes in adulthood.

- Editorial 589 Related Articles 625 and 645
- CME jamanetworkcme.com

USPSTF EVIDENCE REPORT

Screening Children to Detect Familial Hypercholesterolemia

Lozano and colleagues summarize findings from the US Preventive Services Task Force evidence review of the benefits and harms of screening children and adolescents for heterozygous familial hypercholesterolemia (FH). The authors report screening detects FH in children, and lipid-lowering treatment can reduce lipid concentrations in the short term with little evidence of harm. However, there was no evidence that childhood screening for FH effects lipid concentrations or cardiovascular outcomes in adulthood or evidence of long-term benefits or harms of beginning lipid-lowering treatment in childhood.

- Editorial 589 Related Articles 625 and 634
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Euthanasia in Patients With Psychiatric Illness

An article in JAMA Psychiatry reported clinical details from 66 Dutch patients who received euthanasia or assisted suicide for psychiatric conditions. In this From The JAMA Network article, Olié and Courtet discuss treatment to address impaired decision making and psychological pain in patients with psychiatric disorders who request euthanasia or assisted suicide.

Primary Prevention of Stroke

This JAMA Clinical Guidelines Synopsis article provides a summary of Guidelines for the Primary Prevention of Stroke developed by the American Heart Association and the American Stroke Association. Major recommendations include assessing stroke risk using a risk assessment tool; encouraging healthful lifestyle habits; applying guideline-appropriate cholesterol-lowering treatment; and prescribing aspirin for cardiovascular disease prophylaxis for patients with a 10-year risk of cardiovascular disease exceeding 10%.

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Editor's Audio Summary

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

Author Interview

AUDIO Interview with David C. Grossman, MD, MPH, author of "Screening for Lipid Disorders in Children and Adolescents; US Preventive Services Task Force Recommendation Statement" VIDEO Interview with Axel Linke, MD, author of "Effect of a Cerebral Protection Device on Brain Lesions Following Transcatheter Aortic Valve Implantation in Patients With Severe Aortic Stenosis: The CLEAN-TAVI Randomized Clinical Trial"

Opioid Use and Addiction

Read the JAMA collection on opioid use and addiction at http://sites.jamanetwork.com/opioids/

Screening for Up of Discretes in Children and Adules, en



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There is insufficient evidence to make a recommendation.

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