

# THE AMERICAN JOURNAL *of* MEDICINE®

www.amjmed.com

CONTENTS

*The Green Journal*

July 2018 Volume 131/Number 7

## COMMENTARIES

- 719 **Medical Axioms: The Pithy Little Sayings That Reflect Deeper Knowledge**

Joseph S. Alpert

- 721 **Learning to De-Adopt Ineffective Healthcare Practices**

Kevin Selby and Geoffrey D. Barnes

- 723 **Returning to (Electronic) Health Records That Guide and Teach**

Shuai Xu and Arthur Papier

- 726 **Will Cardio-Virology Be the Next Cardio-Oncology?**

Stephen A. Geraci

## REVIEWS

- 728 **Geographic Variability in Liver Disease-Related Mortality Rates in the United States**

Archita P. Desai, Prashanthinie Mohan, Anne M. Roubal, Ricki Bettencourt, and Rohit Loomba

*There is significant interstate variability in liver disease mortality, with an association between viral hepatitis death rates, Hispanic ethnicity, racial diversity, and household income, but not obesity or alcohol consumption and liver disease mortality.*

- 735 **A Review of Women's Neurology**

Mary Angela O'Neal

*Thorough knowledge of how neurologic diseases affect women is important to provide good care throughout a woman's life, including reproductive health, pregnancy, and healthy aging. Disorders that frequently raise questions may be those that primarily affect women but also include disorders such as epilepsy, that have no increased incidence in women but raise specific concerns around pregnancy.*

- 745 **Management of Common Benign Anorectal Disease: What All Physicians Need to Know**

David Parés and Herand Abcarian

*Benign anorectal conditions produce anal pain, rectal bleeding, or discharge from the perianal region, which are common symptoms in the general population. Well-trained physicians, irrespective of their specialty, can treat most of these disorders and refer them to a proctology specialist only when necessary. This review provides a practical guide to the management of these disorders, and the criteria for specialist referral.*



0002-9343(201807)131:7;1-E

A9

- 752 **New Injectable Agents for the Treatment of Type 2 Diabetes Part 1 – Injectable Insulins**  
Christa M. George, AhYoung Byun, and  
Amanda Howard-Thompson

*The FDA has recently approved several new insulin products and new formulations of existing insulin products; however, they are costly. Physicians need to be aware of the potential advantages and disadvantages of these new therapies to provide high-quality care to patients with diabetes.*

---

### CONCISE ADVICE FOR CLINICIANS

---

- 755 **Cannabinoids in Patients with Nausea and Vomiting Associated with Malignancy and Its Treatments**  
Jose M. Garcia and Tatyana A. Shamliyan

---

### ADVANCING HIGH VALUE HEALTH CARE

---

- 760 **Eliminating In-Hospital Fecal Occult Blood Testing: Our Experience with Disinvestment**  
Arjun Gupta, Zhouwen Tang, and  
Deepak Agrawal

---

### DIAGNOSTIC DILEMMA

---

- 764 **A Congenital Culprit: Anomalous Origin of the Left Coronary Artery from the Pulmonary Artery**  
Pooja Prasad, Benjamin R. Stripe,  
Ezra A. Amsterdam, and Gagan D. Singh
- 768 **A Binge and a Breach: Cardiac Tamponade Caused by *Haemophilus influenzae***  
Anthony J. Kanelidis, Drew Oehler,  
Cassandra L. Oehler, Jonathan Rosenberg, and  
Jonathan D. Paul

---

### IMAGES IN RADIOLOGY

---

- 772 **No Ordinary Back Pain: Malignant Spinal Cord Compression**  
Shing Fung Lee, Frank Chi Sing Wong, and  
Stewart Yuk Tung

---

### IMAGES IN DERMATOLOGY

---

- 775 **Gradually Transformed: Parry-Romberg Syndrome**  
Carlos Felipe Matute, Felipe Jose Matute,  
Daniel Cardona, and Daniel G. Federman

---

### CLINICAL RESEARCH STUDIES

---

- 778 **Diabetes Mellitus and Cardiogenic Shock Complicating Acute Myocardial Infarction**  
Justin B. Echouffo-Tcheugui, Dhaval Kolte,  
Sahil Khera, Herbert D. Aronow, J. Dawn Abbott,  
Deepak L. Bhatt, and Gregg C. Fonarow

*Diabetes is associated with an increased risk of acute myocardial infarction, which can be complicated by cardiogenic shock. Compared with patients without diabetes, those with diabetes experiencing acute myocardial infarction compounded by cardiogenic shock were at higher risk, had a lower in-hospital survival rate, and longer hospital stays for survivors.*

- 787 **Rivaroxaban Versus Warfarin and Risk of Post-Thrombotic Syndrome Among Patients with Venous Thromboembolism**  
Mette Søgaard, Peter Brønnum Nielsen,  
Flemming Skjøth, Jette Nordstrøm Kjældgaard,  
Craig I. Coleman, and Torben Bjerregaard Larsen

*Post-thrombotic syndrome is a chronic burdensome complication of venous thromboembolism. Compared with warfarin, treatment with rivaroxaban was associated with lower rates of post-thrombotic syndrome. This association remained consistent across different types of venous thromboembolism, and with patients experiencing recurrent events.*

- 795 **Preventing Postoperative Atrial Fibrillation After Noncardiac Surgery: A Meta-analysis**  
Adam Oesterle, Benjamin Weber, Roderick Tung,  
Niteesh K. Choudhry, Jagmeet P. Singh, and  
Gaurav A. Upadhyay

*Atrial fibrillation after noncardiac surgery is associated with increased morbidity, mortality, and costs. Pharmacologic prophylaxis with amiodarone, beta-blockers, or statins reduces the incidence of postoperative atrial fibrillation after non-cardiac surgery. Amiodarone and statins have a relatively low overall risk of short-term adverse events.*

**805 Thiazolidinediones and Risk of Atrial Fibrillation Among Patients with Diabetes and Coronary Disease**

Jannik Langtved Pallisgaard, Maria Mori Brooks, Bernard R. Chaitman, Derek B. Boothroyd, Marco Perez, and Mark A. Hlatky on behalf of the Bypass Angioplasty Revascularization Investigation 2 Diabetes Study Group

*Because inflammation is a risk factor for atrial fibrillation, and thiazolidinediones are insulin sensitizers that decrease the inflammatory response, it is possible that treating diabetes with these drugs might decrease the risk of developing atrial fibrillation. However, no significant reduction of atrial fibrillation incidence with thiazolidinedione use was found.*

**813 Alogliptin in Patients with Type 2 Diabetes Receiving Metformin and Sulfonylurea Therapies in the EXAMINE Trial**

William B. White, Simon R. Heller, Christopher P. Cannon, Heena Howitt, Kamlesh Khunti, and Richard M. Bergenstal for the EXAMINE Investigators

*The addition of dipeptidyl dipeptidase-4 inhibitors to existing metformin and sulfonylurea therapy is widely endorsed and commonly used. This research found that upon addition of alogliptin as a third agent, glycemic control was significantly improved and was well tolerated. Patients treated with triple therapy including alogliptin also had lower rates of mortality.*

**820 Clinical Features and Prognosis of Type 2 Myocardial Infarction in Acutely Decompensated Diabetic Patients**

Abdul Wahab Hritani, M. Fuad Jan, Gregory Schleis, Tara Zehrer, Susan Olet, Khawaja Afzal Ammar, and Suhail Allaqaband

*Diabetic patients are at high risk for developing type 2 myocardial infarction when admitted in a decompensated state; they are also at high risk for future cardiovascular events. Acutely decompensated diabetic patients with type 2 myocardial infarction are at increased risk for death and MACE. These patients may also be at risk for undiagnosed coronary artery disease.*

**829 Comparative Trends in Heart Disease, Stroke, and All-Cause Mortality in the United States and a Large Integrated Healthcare Delivery System**

Stephen Sidney, Michael E. Sorel, Charles P. Quesenberry, Marc G. Jaffe, Matthew D. Solomon, Mai N. Nguyen-Huynh, Alan S. Go, and Jamal S. Rana

*Despite significant declines in heart disease and stroke mortality, there remains an improvement gap nationally among those aged less than 65 years, when compared with the results found at one large integrated healthcare delivery system. Enhanced preventative efforts nationally, especially among middle-aged adults, are warranted to promote further declines in cardiovascular mortality.*

**837 Effect of Spironolactone on Myocardial Fibrosis and Other Clinical Variables in Patients with Hypertrophic Cardiomyopathy**

Martin S. Maron, Raymond H. Chan, Navin K. Kapur, Iris Z. Jaffe, Adam P. McGraw, Raj Kerur, Barry J. Maron, and James E. Udelson

*In patients with hypertrophic cardiomyopathy, spironolactone does not alter markers of myocardial fibrosis or improve other clinically relevant variables such as exercise capacity. Consequently, there is no evidence that spironolactone plays a therapeutic role in hypertrophic cardiomyopathy patients.*



**AJM ONLINE**

Please note that articles with an “e” page designation are available only in the online version of the Journal at [www.amjmed.com](http://www.amjmed.com).

**COMMENTARY**

**e287 Is the Popularity of Dipeptidyl-Peptidase-4 Inhibitors Justified? Insights From Mechanistic Studies and Clinical Trials**

Milton Packer

**CLINICAL COMMUNICATIONS TO THE EDITOR**

**e291 Vena Cava Compression Syndrome in Obesity is Reversed by Bariatric Surgery**

Yvonne Bewarder, Ingrid Kindermann, and Michael Böhm

**e293 From Mechanical to Chemical: A Case of Diabetes Insipidus Induced by Concussive Brain Injury**  
Muhammad Hassaan Shahid, Ashish Verma, and Laura Youngblood

**e295 Skin and Nasal Involvement: Look for Sarcoidosis!**  
Thomas Radulesco, Pierre-André Jarrot, Raphael Cauchois, Nicolas Macagno, Gilles Kaplanski, Patrick Dessi, and Justin Michel

**e297 Sepsis-Associated Encephalopathy with Multiple Microbleeds in Cerebral White Matter**  
Akihiro Shindo, Kei Suzuki, Yoshiaki Iwashita, and Hidekazu Tomimoto

**e299 Hypertriglyceridemia-Induced Acute Pancreatitis with Normal Pancreatic Enzymes**  
Sho Kitagawa and Koya Sawai

**e301 Polymyalgia Rheumatica with Normal Inflammatory Markers**  
Shingo Suzuki, Yuta Hirose, Eriko Takeda, and Masatomi Ikusaka

**e303 Importance of Genetic Testing in the Diagnosis of Transthyretin Cardiac Amyloidosis**  
Jessica R. Golbus, Joanna M. Wells, Michael G. Dickinson, and Scott L. Hummel

**e305 Raccoon Eye Appearance: Amyloidosis**  
Hiroki Matsuura, Yoshiaki Anzai, Naoki Kuninaga, and Takeshi Maeda

---

#### LETTERS

**e307 How to Attract More Physicians Into Primary Care**  
Edward Volpintesta

**e309 The Reply**  
James E. Dalen

**e311 Dubious Benefit of Inferior Vena Cava Filters**  
Paul A. Bergl

**e313 The Reply**  
Paul D. Stein, Fadi Matta, and Mary J. Hughes

**e315 Comments on Chronic Kidney Disease, Basal Insulin Glargine, and Health Outcomes in People with Dysglycemia: The Origin Study**  
Saeid Safiri

**e317 The Reply**  
Vasilios Papademetriou

**e319 Bilateral Tarsal Tunnel Syndrome**  
Junpei Komagamine

---

#### BRIEF OBSERVATION

**842 Serum Cardiac Troponin T Levels in Asymptomatic Elderly Nursing Home Residents**  
Amir Orlev, Robert Klempfner, and David Rott

---

#### AAIM PERSPECTIVES

**846 Impact of an Interdisciplinary Computational Research Section in a Department of Medicine: An 8-Year Perspective**  
Avrum Spira and David Coleman

---

#### PERSONOMICS

**852 Moments of Wonder**  
Antony Rosen

---

#### CLASSIFIED ADS

**A23 Positions available**