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Hysterectomy for Stage I Endometrial Cancer  1224

Endometrial cancer is typically treated by removing the uterus and performing a bilateral salpingo-oophorectomy. Compared with abdominal hysterectomy via laparotomy, laparoscopic hysterectomy has lower morbidity and results in better recovery. In a randomized clinical trial by Janda and colleagues of 760 women with treatment-naive endometrial cancer, the operations resulted in equivalent disease-free survival at 4.5 years and no difference in overall survival. In an Editorial, Wright cites this trial as evidence that laparoscopic hysterectomy is the preferred surgical modality for women with early-stage endometrial cancer.

Editorial 1215

Vitamin D, Calcium, and Cancer  1234

Some studies have reported an association of low vitamin D status with an increased risk of cancer. To determine whether dietary supplementation with vitamin D3 and calcium can reduce the risk of cancer, Lappe and colleagues conducted a randomized clinical trial of 2303 healthy postmenopausal women and found that supplementation, compared with placebo, did not result in a significantly lower risk of all-type cancer at 4 years. In an Editorial, Manson and colleagues note that many participants in this trial had baseline vitamin D levels in the range that has been hypothesized to provide protection against cancer, and they suggest that the potential benefits of vitamin D supplementation may be limited to individuals with vitamin D insufficiency.

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CME jamanetworkcme.com

Childhood Blood Lead Levels and Adult Cognitive Function  1244

Young adults with history of childhood lead exposure have been reported to have limited intellectual function and altered brain structure. To learn whether the adverse effects of lead exposure persist until later in adulthood, Reuben and colleagues followed a cohort of 1007 participants for 38 years. Lead exposure during childhood was associated with declines in IQ and downward social mobility. In an Editorial, Bellinger suggests that cognitive and behavioral deficits associated with lead exposure may lead to poor educational attainment, reduced job opportunities, and lower income, relegating affected individuals to a lower socioeconomic stratum than they otherwise would have achieved.

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Editor in Chief

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Screening for Celiac Disease

Celiac disease is caused by an immune response to dietary gluten, a protein complex found in wheat, barley, and rye. This recommendation statement of the US Preventive Services Task Force (USPSTF) concludes that current evidence is insufficient to assess the balance of benefits and harms of screening for celiac disease in asymptomatic persons. In an Editorial on this article and a systematic review in this issue of JAMA, Choung and Murray acknowledge the lack of evidence to support screening for asymptomatic individuals. However, they recommend testing for individuals with symptoms that may be caused by undiagnosed celiac disease, especially in high-risk populations such as those with an affected family member or those with type 1 diabetes mellitus.

Screening for Celiac Disease: Evidence Report

To inform the USPSTF deliberations on screening for celiac disease, Chou and colleagues synthesized findings of a systematic review of 56 original studies and 12 previous systematic reviews, along with primary studies of 62, 158, and 40 participants. The authors found little or no evidence on the benefits and harms of screening for celiac disease in asymptomatic individuals. In an Editorial, Choung and Murray suggest that the availability of less invasive testing and more ready access to a gluten-free diet should stimulate more research on screening.

Retained Lumbar Catheter Tip

This article in the JAMA Performance Improvement series explores the case of a patient with a retained lumbar catheter tip. A root cause analysis identified a lack of clarity about which specialty service was responsible for catheter management and insufficient training and supervision of residents in the procedure of catheter removal. DeLancey and colleagues discuss strategies for improving clinician education, communication, and delineation of task responsibility.

JAMA Patient Page

Screening for Celiac Disease

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