In This Issue of JAMA

Research

CARING FOR THE CRITICALLY ILL PATIENT
Hypothermia for Severe Traumatic Brain Injury 2211
Prophylactic hypothermia may attenuate inflammatory and biochemical cascades to limit secondary brain injury. For the POLAR Trial Investigators and the ANZICS Clinical Trials Group, Cooper and colleagues randomized 511 patients with severe traumatic brain injury and found that early prophylactic hypothermia compared with normothermia did not improve neurologic outcomes. In an Editorial, Docherty and colleagues discuss why clinical trials of this intervention have not been successful, despite the promising findings of animal studies.

Anticoagulants, Proton Pump Inhibitors, and Bleeding 2221
In patients prescribed warfarin and dabigatran, proton pump inhibitor (PPI) co-therapy is associated with a reduced incidence of upper gastrointestinal tract bleeding, but it is uncertain whether PPI co-therapy is beneficial for patients treated with other anticoagulants. A retrospective cohort study by Ray and colleagues of 1643123 Medicare patients found that the incidence of hospitalization for upper gastrointestinal tract bleeding among patients treated with rivaroxaban or apixaban was lower if they were also receiving PPI co-therapy.

Renin-Angiotensin Inhibitors After Aortic Valve Replacement 2231
In patients with aortic stenosis or surgical aortic valve replacement, treatment with a renin-angiotensin system inhibitor may improve clinical outcomes. Inohara and colleagues followed 21312 patients who underwent transcatheter aortic valve replacement and found that receiving a renin-angiotensin system prescription at hospital discharge was associated with a lower risk of mortality and readmission for heart failure.

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2272 Correction
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Research (continued)

Medicaid Expansion and Renal Disease Mortality

Before Medicaid expansion, as much as one-fifth of nonelderly patients lacked insurance coverage when initiating dialysis. A study by Swaminathan and colleagues of patients initiating dialysis (142,724 in Medicaid expansion states and 93,522 in nonexpansion states) found that living in a Medicaid expansion state was associated with lower 1-year mortality. In an Editorial, Erickson and colleagues note that this result is consistent with studies reporting health benefits in other high-risk patient populations after Medicaid expansion.

Editorial 2206

Clinical Review & Education

CARING FOR THE CRITICALLY ILL PATIENT

Bayesian Reanalysis of a Randomized Clinical Trial

The results of a recent trial of extracorporeal membrane oxygenation for severe acute respiratory distress syndrome are controversial because of a divergence of prior assumptions about the intervention. Goligher and colleagues conducted a post hoc Bayesian analysis of the trial data and determined that the probability of a positive result depends on prior assumptions and on the specification of a minimum clinically important benefit. In an Editorial, Lewis and Angus compare frequentist and Bayesian approaches to scientific research.

Editorial 2208

Intra-articular Injections for Osteoarthritis of the Knee

Patients with osteoarthritis who have inadequate responses or contraindications to exercise, weight loss, physical therapy, or systemic anti-inflammatory or analgesic drugs may be treated with intra-articular injections of a corticosteroid or hyaluronic acid. This Medical Letter on Drugs and Therapeutics discusses the limited benefits of 2 new intra-articular medications for osteoarthritic knee pain.

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Incidental Pulmonary Nodules

In this JAMA Clinical Guidelines Synopsis of a 2017 guideline developed by the Fleischner Society, Anderson and Davis discuss the clinical management of patients with incidental pulmonary nodules detected on computed tomography images.

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