MANAGING DIABETES MDS MORE COMPLICATED IN ELDERLY PATIENTS

As part of managing diabetes therapy in their practice, internists must come up with just the right combination of diet and medication to control blood glucose and prevent adverse events, including hyperglycemia. But emerging evidence has indicated that treatment aimed at optimal lowering of blood glucose levels in elderly patients can in fact lead to hypoglycemia, sometimes severe enough to cause hospitalization. In this group of patients, perhaps more than any other, individualized targets are key to avoiding such serious adverse events. Stacey Rutterfield, in this issue’s cover story, looks at recent guidance on this topic and talks to experts about factors that could affect treatment in elderly diabetics, including patient preference, living arrangements, and duration of disease.

In April, the Centers for Medicare & Medicaid Services (CMS) released a large amount of data on Medicare payments to physicians, hospitals, and other suppliers. Physicians and physician groups, including the College, expressed concern that the data lacked context and could provide an inaccurate picture of the payments received. However, as some experts pointed out, the data were useful for spotting geographic trends and for other types of big-picture analysis. Our story, also on page 1, looks at the ramifications of the data release and how it relates to the overall movement toward more transparency in medicine.

As another fall begins, so does another flu season. While vaccination is still an important part of flu prevention, clinicians also need to be prepared to treat those who do come down with the disease by following the most up-to-date guidance. Turn to our story on page 9 to learn more.

Palliative care can still often be thought of as something that occurs near the end of life, but there’s a strong argument for beginning discussions earlier, when such care can do patients and families more good. In a Q&A on page 8, Ryan DuBosar talks to Amy Casement, MD, ACP Member, from St. Paul, Minn. Thanks to all who voted!

The winning entry captured 46.4% of the votes. This issue’s winning cartoon caption was submitted by David M. Casement, MD, ACP Member, from St. Paul, Minn. Thanks to all who voted! The winning entry captured 46.4% of the votes. Captions and voting are conducted through ACP InternistWeekly.

How do you prepare for flu season? Are you comfortable with early discussions of palliative care? Let us know your thoughts at acpinternist@acponline.org.

Sincerely,
Jennifer Kearney-Mutrie

Cartoon Caption Contest

Put words in our mouth

ACP InternistWeekly has compiled the results from its latest cartoon contest, where readers are invited to match wits against their peers to provide the most original and amusing caption.

This issue’s winning cartoon caption was submitted by David M. Casement, MD, ACP Member, from St. Paul, Minn. Thanks to all who voted! The winning entry captured 46.4% of the votes.

Captions and voting are conducted through ACP InternistWeekly. If you’re not already receiving ACP InternistWeekly, visit www.acpinternist.org/subscribe; contact Customer Service at 800-523-1546, ext. 2600, or direct at 215-351-2600 (M-F, 9 a.m. to 5 p.m. EST); or send an e-mail to custserv@acponline.org.

“Honest, I have no money to give you! The copay and insurance premiums took me for all I had.”

Crossed Words

Going viral

By Justin Vader, MD, ACP Resident/Fellow Member

Answers to clues are placed horizontally in rows to reveal an answer written vertically. Unlike the familiar acrostic puzzle format, the final answer can be in any column.

Horizontal clues
1) MDs en Español
2) Epstein Barr nuclear antigen gene determines this
3) Flowery formation of tumor cells in neuroendocrine tumors
4) What the capital femoral epiphysis can do from the femoral neck in SCFE
5) Mercury purgative/cathartic of yore

Vertical clues
1) Flowery formation of tumor cells in neuroendocrine tumors
2) What the capital femoral epiphysis can do from the femoral neck in SCFE
3) MDs en Español
4) Flowery formation of tumor cells in neuroendocrine tumors
5) Mercury purgative/cathartic of yore

MKSAP Quiz: Chest pain of 4 months’ duration

A 60-year-old man is evaluated for chest pain of 4 months’ duration. He describes the pain as sharp, located in the left chest, with no radiation or associated symptoms, that occurs with walking 1 to 2 blocks and resolves with rest. Occasionally, the pain improves with continued walking or occurs during the evening hours. He has hypertension. Family history does not include cardiovascular disease in any first-degree relatives. His only medication is amiodipine.

On physical examination, he is afebrile, blood pressure is 130/80 mm Hg, pulse rate is 72/min, and respiration rate is 12/min. BMI is 28. No carotid bruits are present, and a normal S1 and S2 with no murmurs are heard. Lung fields are clear, and distal pulses are normal.

An electrocardiogram is shown. Which of the following is the most appropriate diagnostic test to perform next?

A: Adenosine nuclear perfusion stress test
B: Coronary angiography
C: Echocardiography
D: Exercise treadmill stress test

See Test Yourself, page 15, for answer

Crossed Words, page 14, for answer

Test Yourself

See www.acponline.org/mksap16, page 15, for answer

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