

Is Obesity a Risk for Post-Operative Complications?

- **The Issue:** Many people assume that obese patients are especially likely to develop post-operative complications. The findings of this prospective study suggest otherwise.
- **The Study:** Swiss researchers followed 6,336 patients who underwent elective general surgery under general or regional anesthesia; patients who underwent vascular, thoracic, bariatric, or transplantation surgery were excluded. Eight hundred eight patients were classified as obese (body mass index [BMI]: 30). Post-operative complications were categorized on a five-grade scale that ranged from minor, self-limited complications, to death. No differences were observed in overall or grade-specific complication rates between obese and non-obese groups during their hospitalizations.
- **The Results:** This study's main limitation is that no surveillance for complications occurred after hospital discharge. In addition, few patients had extreme obesity (BMI: 40). Nevertheless, the results suggest that obese patients are not at unusually high risk for immediate post-operative complications.

Dindo D, Muller MK, Weber M, et al: Obesity in general elective surgery. *Lancet* 2003; 361(9374):2032-5.

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Few Patients Use the Web for Health Info

- **The Issue:** Patients frequently ask physicians to assess information they obtained from the Internet, but do physicians welcome this experience?
- **The Study:** Researchers surveyed a representative sample of U.S. adults by telephone to examine how seeking health information on the Internet affects the physician-patient relationship. In the 12 months before the survey, 31% had sought health information on the Internet. Half of the 53% survey respondents who found relevant health information then took it to their physicians for comment; 67% said their physicians reacted positively.
- **The Results:** These data suggest that only a minority of patients use the Internet to educate themselves regarding health.

Murray E, Lo B, Pollack L, et al: The impact of health information on the Internet on the physician-patient relationship: Patient perceptions. *Arch Intern Med* 2003; 163(14):1727-34.

Smallpox Vaccine Proven Safe

- **The Issue:** In the fall of 2002, a principal concern in the national smallpox vaccination program was the safety of the vaccine in the setting of a largely unimmunized population. Four reports arising from the National Institutes of Health and U.S. military smallpox vaccination programs provide partial, but relatively reassuring, news on the safety and efficacy of the vaccine.
- **The Study:** Grabenstein and Winkenwerder describe the overall experience in the first six months of the U.S. military smallpox vaccination program, through which 450,293 individuals were vaccinated. Temporary mild symptoms, including malaise, myalgias, and headache, occurred commonly, but only 3% of carefully followed individuals took sick leave and only for an average duration of one day.
- **The Results:** These studies suggest that, if the need arises, we should be able to immunize much of the healthy U.S. population safely and effectively, even with a diluted vaccine product.


Grabenstein JD, Winkenwerder W Jr: U.S. military smallpox vaccination program experience. JAMA 2003; 289(24):3278-82.

β-Carotene and Vitamin E Provide No Real Benefit

- **The Issue:** Despite a lack of evidence that antioxidant vitamins prevent cardiovascular disease, many patients take them and some physicians recommend them. In this meta-analysis, researchers from the Cleveland Clinic attempted to clarify whether β-carotene and vitamin E are beneficial.
- **The Study:** For β-carotene, eight randomized trials were identified. Compared with controls, β-carotene recipients had significantly higher rates of overall mortality and cardiovascular mortality. For vitamin E, seven randomized trials were identified. Outcomes in the vitamin E and control groups were similar for overall mortality and for cardiovascular mortality.
- **The Results:** These data show that β-carotene and vitamin E supplements do not prolong life, at least among adults who take them for four to six years. The results of this meta-analysis are consistent with recent U.S. Preventive Services Task Force guidelines on vitamin supplementation.

Vivekananthan DP, Penn MS, Sapp SK, et al: Use of antioxidant vitamins for the prevention of cardiovascular disease: Meta-analysis of randomised trials. Lancet 2003; 361(9374):2017-23.

Missing Celiac Disease Diagnoses

- **The Issue:** Celiac disease occurs in some genetically susceptible people (those with specific human leukocyte antigen [HLA] haplotypes) when they are exposed to gluten-containing products, such as wheat or barley. In 2001, Finnish investigators retrospectively tested sera that had been obtained in 1994 from an unselected cohort of 3,654 children (age range in 1994, 7 to 16) for endomysial and tissue transglutaminase antibodies.
- **The Study:** In 1994, no member of the cohort had been diagnosed with celiac disease; by 2001, 10 had a biopsy-confirmed diagnosis. Fifty-six serum samples were positive for one or both of the celiac-associated antibodies. Each antibody-positive subject who had not been diagnosed previously was offered small-bowel biopsy to confirm the presence or absence of celiac disease. Of the 36 subjects who underwent biopsies in 2001, 27 had evidence of celiac disease. All but two subjects with celiac disease had a celiac-associated HLA haplotype.
- **The Results:** Clinicians should consider testing children and young adults for celiac disease if unexplained weight loss, chronic diarrhea, or abdominal distention is present. 

Mäki M, Mustalahti K, Kokkonen J, et al: Prevalence of celiac disease among children in Finland. *N Engl J Med* 2003; 348(25):2517-24.



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