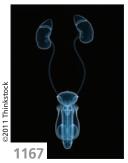
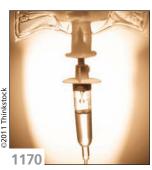
HIGHLIGHTS









Preventing stroke after transient ischemic attack

The ABCD2 score does not provide useful information about prognosis in patients presenting to the emergency department with symptoms of transient ischemic attack or minor stroke. This is the finding of a prospective validation cohort study of 2056 patients enrolled in eight emergency departments that classified patients using the ABCD2 score and followed them for 90 days to count completed strokes and recurrent transient ischemic attacks. A better way of prioritizing patients is required, say the authors. **See Research, page 1137**

With stroke management becoming more complex, and clinical rules like the ABCD2 no longer being sufficient, Hill and Coutts argue that understanding the mechanism of the stroke syndrome allows a rational approach to early intervention. See Commentary, page 1127

Injection drug use in Aboriginal youth

The rate of transition to injection drug use among young, urban Aboriginal people in British Columbia is about 11 participants per 100 person-years, a rate that is almost twice as high as that found among street youth elsewhere in Canada. Transition to injection drug use is more common in women who are involved in sex work. Culturally safe prevention programs tailored specifically to this population are urgently required, say the authors. See Research, page 1147

Left atrial size may be a cause of stroke

Increased left atrial size is associated with mortality in men and women and with ischemic stroke in women. These are the findings of a follow-up study of 54 513 patients who had echocardiograms in one hospital between 1990 and 2008. Information about cause of death was obtained from death certificates. Further research is needed to assess the usefulness of measuring left atrial size for the purpose of predicting prognosis, say the authors. **See Research, page E657**

For many patients, the cause of stroke is never determined. Although there are a variety of established risk factors, the search is on for novel risk factors for stroke. Left atrial enlargement is associated with stroke, but it is unclear whether this is a risk marker or a risk factor. **See Commentary, page 1129**

Attitudes toward end-of-life interventions

Oncologists are more reluctant to support the active ending of life of terminally ill patients than are cancer patients, family caregivers and members of the general public. These findings come from a survey of 3840 people in Korea who were asked about their attitudes toward critical interventions at the end of life, including pain control, withholding of life-sustaining measures, euthanasia and physician-assisted suicide. Although there were differences in opinions, all four participant groups had similar supportive attitudes toward pain control and withdrawal of futile life-sustaining treatment. See Research, page E673

Chronic Achilles tendinopathy

Despite the many treatments that have been suggested to cure or improve chronic Achilles tendinopathy, only heavy-load exercise has strong evidence of a treatment effect in randomized controlled trials. Nonsteroidal anti-inflammatory drugs have little long-term benefit, and corticosteroid injections should be avoided, caution Scott and colleagues. Orthotics may be helpful only in those with identifiable biomechanical abnormalities. **See Review, page 1159**

Defining acute renal failure

Imprecision inherent in the traditional definition of acute renal failure may lead to suboptimal care of patients experiencing kidney damage. Newer definitions may aid clinicians in earlier recognition of these patients and the use of measures to prevent or reverse kidney damage. See Practice, page 1167

Opioids for dyspnea

Opioids are the drugs of choice for treating shortness of breath that does not respond to disease-specific therapy in patients with advanced disease. Gallagher emphasizes that opioids do not shorten life or cause respiratory depression in this group. See Practice, page 1170