

Clinical Briefs in Primary Care

The essential monthly primary care update

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Effects of Intercessory Prayer on Patients with Rheumatoid Arthritis

Source: Matthews DA, et al. *South Med J.* 2000;93(12):1177-1186.

Numerous observational data sets acknowledge that religious involvement is associated with favorable health outcomes. However, the few studies that have examined religion as an intervention, (e.g., prayer) have had mixed results. The current study prospectively investigated the effect of intercessory prayer (IP), both direct-contact (in-person) and/or distant (no personal contact between subject and person(s) praying) upon 40 rheumatoid arthritis patients in a private rheumatology practice. Individual prayer sessions in which Christian ministers prayed aloud and touched affected body parts (2 h/d ? 3) were enhanced in one group with distant prayer, in which ministers prayed at least 10 minutes daily for the patient, with whom they did not have additional contact.

IP was associated with significant increases in mean grip strength, reduction in number of tender and swollen joints, and improvements in patient pain, fatigue, and level of functional impairment. Supplemental distant IP had no additional statistically significant effect.

The study was not randomized or placebo controlled. IP was associated in this study with improvements in RA. Distant IP added no further benefit. The authors comment that the degree of improvement seen compares favorably with recipients of DMARD therapy. ■

Nasal Carriage as a Source of *Staphylococcus aureus*

Source: von Eiff CV, et al. *N Engl J Med.* 2001;344:11-16.

Both community acquired and nosocomial infections with *Staphylococcus aureus* (SA) are important causes of morbidity and mortality. Concern about progressively more difficult levels of antibiotic resistance has prompted investigation for opportunities to interrupt the cycle of infection. It has already been determined that SA colonization is the primary source of SA infections in hospitals, and as many as 40% of hospitalized persons harbor SA as nasal carriers. Though interventional trials have shown that elimination of SA from nasal carriers reduces the frequency of SA hospital infection, such studies did not use modern molecular methods to define the correlation between nasal carrier and clinical infection strains.

In the first part of this two-segment study, nasal swab cultures were immediately obtained from all patients in 32 hospitals who had blood cultures positive for SA, and genotyping was performed if SA positive. The second segment of the study consisted of prospectively obtained nasal cultures from hospital patients; in those who subsequently developed bacteremia, analysis was done to confirm if the same strain was involved.

In both segments of the study, more than 82% of isolates from blood were identical to those obtained in nasal cultures. von Eiff and associates conclude that elimination of nasal SA carriage may prevent subsequent SA infections. ■

Transurethral Resection of the Prostate: Failure Patterns and Surgical Outcomes

Source: Blanchard K, et al. *South Med J.* 2000;93(12):1192-1196.

Alpha-antagonists (eg, doxazosin, tamsulosin, terazosin) have become the mainstay of therapy for most symptomatic men with lower urinary tract symptoms due to benign prostatic hyperplasia (BPH). Unfortunately, not all men respond to alpha-antagonist (AA) treatment, and must often be treated surgically. This report details results of a retrospective chart review of three years of data on men at the Department of Urology, Ochsner Clinic, in New Orleans, La. Study subjects were divided into two groups: group 1 had undergone transurethral resection of the prostate (TURP) after failure of AA therapy; group 2 had undergone TURP for symptomatic BPH but had not undergone AA therapy.

Outcomes in Group 2 were better than Group 1: persistent irritative voiding symptoms, new stress incontinence, and chronic urinary retention appeared more often as persistent problems in Group 1. Complete resolution of symptoms occurred more frequently in group 2 (92% vs 71%). Contrary to popular wisdom, prostate size did not contribute to relative success or failure of therapy. Blanchard and associates counsel that men who fail AA treatment should be informed that surgical results for them might not be as good as for other candidates. ■

Effect of Alcohol Consumption on Myocardial Infarction

Source: Hines LM, et al. *N Engl J Med.* 2001;344:549-555.

The epidemiologically observed favorable association between moderate alcohol consumption and cardiovascular end points has been demonstrated in multiple populations. Multiple mechanisms for this association have been proposed, though none have been confirmed in randomized, placebo-controlled, interventional trials. The current study examined participants in the Physicians' Health Study (PHS) comparing relative risk (RR) for myocardial infarction (MI) in persons with various genetic profiles in reference to alcohol metabolism.

Comparing genetic alcohol slow-metabolizers (A-SM) with alcohol rapid metabo-

lizers (A-RM) there was a 35% reduced risk of MI among the A-SM group. As has been previously described, moderate alcohol consumption was associated with favorable reduced incidence of MI across all genetic profiles. Of persons who consumed moderate amounts of alcohol, those with the homozygous A-SM genetic makeup enjoyed the greatest RR reduction (RR = .14). These persons also had the highest HDL levels.

Apparently, the slower metabolism of alcohol, possibly by reducing alcohol clearance, favorably affects MI risk. A-SM persons demonstrated higher HDL levels, but analysis indicated that only half of the beneficial risk reduction could be attributed to HDL. Hines and associates comment that variation in MI risk associated with genetic makeup would argue against previous thoughts that non-alcoholic components, like flavonoids, are etiologic in alcohol benefits, since only alcohol, and not flavonoids, is affected by the different alcohol dehydrogenase genetic patterns. ■

80° centigrade, after which 2 minutes of steam was applied. Additionally, a ventilation system filtering air at 1 air exchange rate per hour was placed above the rooms of the actively treated participants. The placebo group received treatment with the same equipment, but no heat or steam was applied. House dust mite concentration was measured by ELISA prior to and immediately after the intervention, as well as 6 and 12 months later.

In addition to a durable reduction of dust mite concentrations in actively treated sites, bronchial hyperreactivity decreased 4-fold compared to sham-treated sites, and was maintained at this level through the 12 months duration of the trial. The cost of the heat treatment (\$800) and installation of ventilation (\$640) are not insubstantial. ■

Intake of Fruits and Vegetables and Risk of Breast Cancer

Source: Smith-Warner SA, et al. *JAMA.* 2001;285:769-776.

The bulk of epidemiologic evidence suggests that increased fruit and vegetable intake is associated with reduced likelihood of breast cancer. However, the strength of these observations has been affected by the potential recall and selection bias in the dominantly case-control methodologies that have been used.

To help address such issues, Smith-Warner and associates performed a pooled analysis of prospective cohort studies in which a validation study of diet intake (or similar method) was used. The population from which data was drawn included 7377 women with breast cancer among 351,825 women for whom appropriate baseline diet data was available.

No favorable association of fruit or vegetable intake was discernible in this population. Smith-Warner et al conclude that there is no relationship between fruit and vegetable intake and breast cancer. ■

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Eradication of House Dust Mite from Homes of Atopic Asthmatic Subjects

Source: Htut T, et al. *J Allergy Clin Immunol.* 2001;107:55-60.

Most asthmatic patients demonstrate allergic responses to inhaled allergens, of which house dust mites are the most consistent offenders. Although living in altitudes unfavorable for mites (high altitudes) favorably affects allergic symptoms, upon return to lower altitudes, symptoms recur. Mite reduction through steam cleaning and acaracides has produced transient benefit in some trials. Htut and associates report a new treatment method used in Sheffield, England, in which technicians used dry heat to achieve a mattress temperature of