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Six-month exercise training program to treat post-thrombotic syndrome

Exercise training may improve post-thrombotic syndrome, say Kahn and colleagues. This small randomized controlled trial of 43 patients showed important improvements in quality-of-life measures in patients allocated to the exercise group. These results should be interpreted with caution but provide the rationale for planning a larger, definitive trial, say the authors. **See Research, page 37**

Glomerular filtration rate and initiation of dialysis

Mortality is higher among people with renal failure whose hemodialysis is initiated early than among those in whom hemodialysis is initiated later. Clark and colleagues analyzed data from the Canadian Organ Replacement Register covering more than 90% of Canadians with initiation of hemodialysis between 2001 and 2007. The results suggest that the trend toward earlier dialysis is not improving the survival of people with renal disease. **See Research, page 47**

Studies to date have suggested either no effect of starting dialysis at higher levels of estimated glomerular filtration rate or an increased risk of death. However, nephrologists may use criteria other than estimated or measured glomerular filtration rate in the decision to start dialysis. The authors point out that more research is needed to definitively determine if starting dialysis at higher levels of renal function is harmful. **See Commentary, page 24**

Determinants of choosing a career in family medicine

Demographic characteristics and some attitudes measured on entry into medical school were associated with later choice of training program on completion of medical school. Answers to this survey of 2000 students at eight medical schools at the start of their studies were linked to their choice of residence training as collected through the Canadian Residency Matching Service after graduation. Medical schools might be able to use these results to help select stu-

dents more likely to train as family doctors, say the authors. **See Research, page E1**

Off-label use of factor VIIa unproven

Recombinant factor VIIa probably does not have clinically important benefits in preventing or treating bleeding in patients who do not have hemophilia. Lin and colleagues reviewed and summarized the results from 26 randomized controlled trials to compare mortality, need for blood transfusion and thromboembolic events. The off-label use of this hemostatic agent should be restricted to clinical trials, say the authors. **See Research, page E9**

Is bigger better? An argument for very low starting doses

Patients may experience fewer side effects and save money if they are prescribed lower than approved starting doses of certain drugs, report McCormack and colleagues. About 16% of all new products will have their doses officially decreased because of safety issues. The starting dose should be geared to a patient's individual characteristics and history, state the authors. **See Analysis, page 65**

Personal fertility monitors for contraception

Women can use personal fertility monitors at home to identify their fertile period. Although preliminary studies on effectiveness are promising, Bouchard and Genuis caution that more studies are needed before these devices can be widely recommended for contraception. **See Practice, page 73**

Shortness of breath while lying down

A 36-year-old woman had a six-month history of shortness of breath that worsened when she lay down. Although orthopnea can occur in common conditions, such as congestive heart failure, the cause in this situation was more unusual. Pulmonary function testing was used to make the diagnosis. What is your call? **See Practice, page 77**