



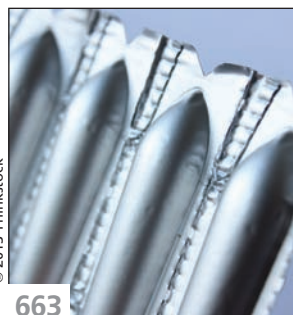
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Better influenza vaccine needed

Vaccination of health care workers against influenza is usually voluntary, with a pick-up of about 60%. There has been a call to make vaccination mandatory, but as summarized by Gardam and Lemieux, the vaccine is only effective in about 60% of healthy adults. Although it still makes sense for health care workers to receive the vaccine, in light of these considerable limitations, making vaccination mandatory is likely premature. First we need a better vaccine. **See Commentary, page 639**

Preventive health practices

Do doctors who take care of their own health cause their patients to do the same for themselves? Earlier surveys of physicians found that those who reported healthier personal habits were more likely to encourage those behaviours in their patients. In this study of the screening and vaccination practices of physicians and patients, Frank and colleagues found that the personal preventive health practices of physicians had a beneficial effect on those of their patients. **See Research, page 649**

Increases in stillbirth rates

Increases in late terminations of pregnancy are responsible for recent increases in stillbirth rates. Joseph and colleagues examined data for all births and stillbirths in British Columbia from 2000 to 2010 to try to explain why stillbirth rates have been rising in recent years. The increase in late terminations was also accompanied by a simultaneous decrease in the prevalence of congenital anomalies among live-born infants. Future research into temporal trends and regional variations in stillbirth rates should focus separately on spontaneous stillbirths and those due to pregnancy terminations, say the authors. **See Research, page E345**

Optimizing organ donation

Rates of organ donation are 4 times higher in transplant hospitals than in large general hospitals that do not have a transplant program. Redelmeier and colleagues used routine hospital data to compare numbers of patients dying and numbers of

organs donated across hospitals in Ontario. Optimizing organ donation requires greater attention aimed at large general hospitals, suggest the authors. **See Research, page E337**

Constipation in older people

About 1 in 2 adults over the age of 80 years experience constipation. Although physicians tend to rely on the frequency of bowel movements to diagnose constipation, straining is the most commonly identified symptom among older adults. Gandell and colleagues review the efficacy and safety of available treatments in this age group, including new agents that show promise. **See Review, page 663**

Positive urine culture: when to treat

When is it appropriate to give treatment to a patient with a positive urine culture? Vaisman and colleagues describe the factors to consider when deciding what to do for a 78-year-old woman who had significant growth of bacteria on urine culture, lethargy and signs of dehydration after a gastrointestinal illness. **See Practice, page 679**

Cutaneous leishmaniasis

After returning from a trip to Belize, a 42-year-old man presented with a small erythematous nodule and swelling of his right ear. The lesion looked like cellulitis, but didn't respond to appropriate antibiotic treatment and worsened dramatically. Eventually, he was given the diagnosis of cutaneous leishmaniasis, a parasitic infection that can be mistaken for more common bacterial and fungal infections. Demers and coauthors discuss the importance of early diagnosis and treatment to limit mutilation and scarring. **See Practice, page 681**

Trauma and PTSD in older adults

Past exposure to trauma is common in older adults and is associated with posttraumatic stress disorder (PTSD). Those who have experienced trauma or have PTSD have higher rates of cardiovascular disease and associated risk factors, as well as osteoarthritis and diabetes. **See Practice, page 685**