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Sleep apnea and risk of pneumonia

Su and colleagues analyze data from the Taiwan National Health Insurance Research Database to examine the relation between obstructive sleep apnea and incident pneumonia in adults. With a retrospective cohort design and adjustment for known confounders, this large study found that obstructive sleep apnea appears to be an independent risk factor for the development of an episode of pneumonia. The risk was even higher among patients who received continuous positive airway pressure therapy. **See Research, page 415**

Risk of adverse events in COPD exacerbation

A risk scale incorporating 10 clinical variables was developed for patients presenting to the emergency department with exacerbations of chronic obstructive pulmonary disease. Based on a prospective cohort study evaluating data for 945 patients, the risk scale had greater sensitivity than current practice for predicting adverse events. Once validated, this risk scale could be used to select for admission most of those at risk for adverse events, without unduly increasing admission rates, say the authors. **See Research, page E193**

Goals of care in serious illness

Although advance care planning is pertinent for everyone, it is important for clinicians to identify high-risk patients in hospital who need to determine their goals of care. A brief question, “Would I be surprised if this patient died in the next year?” is a suitable screening tool, say You and colleagues. The paper provides further guidance for clinicians in engaging in meaningful discussions around goals of care with patients in hospital and their family members. **See Review, page 425**

Omega-6 polyunsaturated fatty acids

Health Canada allows the food industry to claim that replacing saturated fats with polyunsaturated fats reduces the risk of heart disease. However, this claim may be misguided for fats rich in omega-6 linoleic acid but relatively poor in omega-3

α -linolenic acid. The authors consider the implications of current research findings. **See Analysis, page 434**

Obesity in a young child

At a routine visit, the mother of a healthy five-year-old boy expresses concern about his weight. Is the child obese? If so, are any investigations required? What treatment might be helpful? Birken and Hamilton provide an approach to obesity in children in the primary care setting. **See Practice, page 443**

Managing polypharmacy

A 93-year-old man was referred to a geriatric day hospital for assessment of falls, mobility, mood and function. He was taking nine medications, some of which had been prescribed 15 years earlier. Were all these drugs still needed? Were the medications helping his symptoms, or making them worse? Farrell and colleagues describe a practical approach to managing polypharmacy in older people. **See Practice, page 445; Commentary, page 407**

Measles

Recent measles outbreaks in the developed world have been attributed to an increasing number of people who either have not been vaccinated or have been incompletely vaccinated. Physicians can play an important role in increasing vaccine coverage for measles, say MacFadden and Gold, noting that previous research alleging a link between the vaccine and autism or bowel disease has been discredited and retracted. **See Practice, page 450**

Acute pleural effusion

A 78-year-old man admitted to hospital with a urinary tract infection experienced sudden-onset severe retrosternal chest pain. A chest radiograph taken 30 minutes later showed a new pleural effusion that had not been there at the time of admission. Was this the result of a pulmonary embolism, or was something else going on? **See Practice, page 451**