Severity of enterovirus D68 in children
Children presenting to hospital for respiratory illness due to enterovirus D68 were more likely to have difficulty breathing, but not to die or require admission to the critical care unit, than children presenting with other enteroviruses or rhinoviruses. This matched cohort study evaluated 174 children presenting to the same hospital from August to October 2014. Enterovirus D68 appears to be more virulent than other enteroviruses but does not necessarily lead to worse outcomes, say the authors. See Research, page 1279

Enterovirus D68 (EV-D68) is a specific strain of nonpolio enteroviruses that is known to be associated with respiratory illness. Possible risk factors for severe disease include history of atopy or asthma; however, it remains to be determined whether EV-D68 is truly more severe than other respiratory viruses. An hypothesized association with neurological complications, particularly flaccid paralysis, remains unproven, say Science and Allen in their commentary. See Commentary, page 1269

Capitation model improves primary care
Patients receiving care from doctors in a team-based capitation system are more likely to receive recommended testing for diabetes and some forms of cancer screening. Using population-based administrative claims data for Ontario’s 13 million residents, the authors observed greater improvements in diabetes care over the period 2001 to 2011 in capitation-based practices than other types of practices. Physician payment reform and team-based care have the potential to improve chronic disease management and prevention, the authors conclude. See Research, page E494

Iliofemoral DVT guideline
The poor outcomes seen in patients with iliofemoral deep vein thrombosis (DVT) treated with standard anticoagulant therapy have led to exploration of other treatment options. In this clinical practice guideline, Liu and colleagues provide recommendations on the diagnosis and management of DVT, including anticoagulation, thrombus removal strategies and inferior vena cava filters. The prevention and treatment of post-thrombotic syndrome are also addressed. See Guidelines, page 1288

Preventing food allergy in infants
Emerging evidence from randomized controlled trials suggests that early introduction of allergenic foods, particularly peanut, is protective against the development of food allergy. Consequently, guidance on food introduction for infants has changed. Abrams and Becker discuss the evidence in this review. See Review, page 1297

Pulmonary aspergillosis and marijuana use
A 29-year-old man with type 1 diabetes who used marijuana regularly for neuropathic pain presented with chest pain and shortness of breath. Chronic necrotizing pulmonary aspergillosis was diagnosed. The authors hypothesize that the patient’s marijuana was the source of his infection — cultures of the marijuana grew similar fungi. They suggest that patients with diabetes or any other immunocompromising condition should be cautioned about inhaling marijuana. See Cases, page 1305

Nonobstetric diagnostic imaging in pregnancy
Although there is a weak association between antenatal ionizing radiation and childhood cancer, no single diagnostic radiologic procedure in pregnancy exceeds the “safe” threshold for fetal radiation (≤ 50 milliGray). Magnetic resonance imaging is also considered to be safe during the second and third trimesters, say the authors. See Five things to know about ..., page 1309