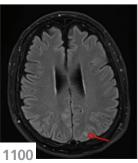
HIGHLIGHTS









Predicting AKI after cardiac surgery

A new risk prediction model that uses routinely available preoperative clinical and lab data to predict the risk of acute kidney injury (AKI) after cardiac surgery can be applied and interpreted easily at the bedside. See Research, page 1076

Incentive payments for complex care

Incentive payments to primary care physicians for providing care to patients with multiple chronic conditions were not associated with any significant impacts on primary care contacts, continuity of care or costs. This observational study examined population health services data on 155 754 patients in British Columbia for 24 months before and 24 months after implementation of incentive payments by the provincial government in 2007. This \$240-million program may have improved compensation for managing complex illness, but other strategies will be needed to improve outcomes in this population, say the authors. See Research, page E375

There is little high-quality evidence to support or not support financial incentives to improve quality in primary care, despite widespread attempts at physician-payment reform worldwide. See Commentary, page 1065

Resting heart rate and risk of disease

In this meta-analysis of 45 studies, resting heart rate was an independent predictor of coronary artery disease, stroke, sudden death and noncardiovascular diseases, with the risk increasing significantly with every increment of 10 beats/min over 60 beats/min. The authors conclude that measured resting heart rate is worth considering in risk prediction algorithms for coronary artery disease and cancer. **See Research, page E384**

Diagnosis of food allergy

Food allergy is common and may be associated with high morbidity. True prevalence is lower than self-reported prevalence. Because managing food allergy can be difficult and costly, it is important to make an accurate diagnosis. Allergies to milk, egg, soy and wheat will resolve during child-hood in most instances; allergies to peanuts, tree nuts and

seafood tend to persist. Abrams and Sicherer review the diagnosis and optimal management of different forms of food allergy. See Review, page 1087

Bilateral undescended testes

A baby boy had bilateral undescended testes as a newborn. What manoeuvres should be included in physical examination at his four-month check-up? Does he require any investigations or referral? If so, when should these be done? Dave answers these and other questions on the management of undescended testes in infants. See Decisions, page 1098

Autonomic dysreflexia

A 59-year-old man with complete T4 spinal cord injury had an episode of substantial hypertension (219/113 mm Hg), associated with lowered level of consciousness, headache and a seizure. The diagnosis was posterior reversible encephalopathy syndrome, secondary to autonomic dysreflexia from a urinary tract infection. The authors discuss the prevention and management of this life-threatening cascade that can begin with a simple infection or constipation. **See Cases, page 1100**

Critical illness polyneuromyopathy

Nearly all critically ill patients with multiorgan failure will develop critical illness polyneuromyopathy, in which flaccid weakness develops in the limbs or respiratory muscles. Management is focused on avoidance of risk factors and early physical therapy; however, the condition can cause persistent functional limitations. See Five things to know about ..., page 1104

Acrodermatitis continua

Acrodermatitis continua was diagnosed in a woman in her fifties after pustules and plaques developed on her right thumb and left index finger, along with anonychia. Early identification and treatment of this condition, a variant of pustular psoriasis, is essential to avoid its destructive and disabling effects. See Clinical images, page 1105