Dear Colleague:

THIS ISSUE of the *Cleveland Clinic Journal of Medicine* features topics that range from the clinically pragmatic to the political. We hope each of the articles contains something relevant to your daily practice.

■ **Health care reform in 1998** (page 73)
What do the Feds have in store for us in the coming year? Dan Nickelson is from Washington, and he is here to help us figure out what election-year politics could mean to the resurging debate over health care.

■ **Help for impaired physicians** (page 101)
Substance abuse among physicians is more common than we would like to think, and it can be difficult to detect. Dr. Collins reviews new approaches that medicine is taking to identify impaired physicians and help them overcome their resistance to treatment.

■ **Angioplasty vs thrombolytic therapy** (page 75)
Time is of the essence when restoring occluded coronary artery blood flow, as the angioplasty substudy of the GUSTO IIb trial confirmed. Dr. Brener notes that restoration of coronary flow by angioplasty is more rapid than with thrombolytic therapy. This probably explains the superior outcomes of angioplasty, although the difference does not appear to be as great as previously thought.

■ **Subclinical hyperthyroidism** (page 65)
As physicians use sensitive assays for thyroid-stimulating hormone (TSH), they are encountering subclinical hyperthyroidism more often. Dr. Saadi describes how to use TSH, T_4,T_3, and other thyroid tests to diagnose the cause of hyperthyroidism, and an approach to treatment.

■ **Cancer and the mind** (page 107)
Among the more mysterious aspects of carcinogenesis is the role the mind may play in it. Dr. Markman here presents some thoughts (hopefully nonmalignant) about this.

■ **Two patients with neuroglycopenia** (page 82)
The effects of hypoglycemia on the central nervous system can be impressive indeed. Drs. Dizon, Danese, and Hoogwerf discuss control of insulin production and how to evaluate hyperinsulinism in the hypoglycemic patient.

■ **Cultural differences in clinical practice** (page 66)
People interpret verbal and nonverbal behavior differently, depending on their cultural backgrounds. Dr. Slomka emphasizes the need for physicians to understand such differences, in order to serve the patient's needs more effectively.

■ **Hemolytic anemia** (page 89)
One of the first clinical autoimmune processes to be recognized was antibody-mediated hemolytic anemia. Dr. Domen provides a clear review of this complex set of diseases, outlining how different tests can help pinpoint the cause and treatment.

As always we are interested in what you think of the *Journal*, and in your ideas for future topics.

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