



Dear Colleague:

THIS ISSUE runs the gamut from inpatient to outpatient care. We hope the articles are informative and relevant to your practice.

■ Agitated dementia (page 191)

Agitation presents a discouraging problem to caregivers of patients with Alzheimer's disease, especially when the patient remains in the home. Drs. Pozuelo, Franco, and Palmer provide insights into potentially reversible causes of agitation and describe an eclectic approach to management.

■ Primary biliary cirrhosis (page 174)

Liver transplantation remains the definitive therapy for primary biliary cirrhosis despite the emergence of new drugs. Dr. Carithers discusses the role of ursodiol in the management of this disease, but emphasizes the hazard of delay in considering transplantation.

■ Stroke treatment (page 185)

There are few situations in medicine where the timing is so urgent as in the administration of thrombolytic therapy to a patient with a developing stroke. Dr. Furlan points out that even though many patients do not respond to thrombolytic therapy, enough do respond to make quick treatment imperative. And the future is bright for improving stroke treatment even more.

■ Care at the end of life (page 219)

The high cost of care at the end of life is a source of concern for payers and health planners alike. Assuming that the imminence of death is recognized, however, some costs are justified in maintaining a reasonable quality of life. Dr. Markman discusses various factors that cause variation in the cost of cancer care at the end of life.

■ IM Board Review (page 209)

The causes of low platelet count are many and varied. In an IM Board Review Drs. Mazzone and Nielsen explore the investigation of a patient presenting with rash and low platelet count.

■ Oxygen and drug delivery devices (page 200)

Technology for delivery of oxygen and other agents to patients via the respiratory tract has proliferated. Mr. Burkhart and Dr. Stoller provide a handy review to help guide the selection of appropriate devices and methods for a variety of clinical circumstances, with color illustrations that outline how each device operates.

■ Diagnosing Marfan syndrome (page 176)

Dr. Moodie reviews the diagnosis and treatment of Marfan syndrome. Although mutations of the gene *FBNI* appear to be responsible for the condition, these mutations are too variable for development of a reliable test based on them, and the diagnosis remains clinical.

■ Giant cell arteritis (page 218)

Giant cell arteritis, a cause of headache and loss of vision in the elderly, is not always easy to diagnose. In this brief illustrated vignette, Dr. Hoffman discusses the reliability of temporal artery biopsy in the diagnostic process.

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

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