



## Dear Colleague:

AS MANY OF YOU already know, in March the *Cleveland Clinic Journal of Medicine* began offering 2 hours of Category I CME credit at no charge, to those who complete the test in the back of each issue. We are pleased to offer this service to our readers and are gratified by the response. We hope the *Journal* can continue to serve your clinical and professional needs.

On a personal note, our move instituting free CME came at the suggestion of one of our associate editors, Joseph M. Cash, MD. Joe died unexpectedly shortly before this new policy was implemented. He was a strong proponent of the *Journal*, and we valued his suggestions and support. His death is a great loss, both professionally and personally.

### ■ Antibiotic resistance (page 232)

Physicians are creating a potential nightmare by indiscriminately using antibiotics to treat colds and other viral infections. The prevalence of antibiotic-resistant bacteria has increased markedly in the last few years because of this practice, and Dr. Gordon tells how we have to change the way we do things. The article features an illustration explaining how bacteria acquire resistance.

### ■ Invasive strep A infections (page 241)

One of the more gruesome emerging diseases, though still uncommon, is the "flesh-eating bacteria syndrome" caused by group A streptococci. Drs. File, Tan, and DiPersio explore the diagnosis and treatment of this dramatic affliction.

### ■ IM Board Review (page 237)

The differential diagnosis of hypercalcemia requires the physician to have detailed knowledge of the interactions of hormones that regulate calcium levels and to understand how different diseases alter these hormone

levels. Drs. Hussein and Licata provide a concise discussion of this complex subject in this month's installment of Internal Medicine Board Review.

### ■ The EPILOG trial (page 267)

The beneficial effects of coronary artery angioplasty can be undone if the vessel closes down as a result of the procedure, producing myocardial ischemia, infarction, and possibly death. The EPILOG study, as discussed by Drs. Roe and Moliterno, suggests that the tongue-twisting drug abciximab, which inhibits platelet aggregation, may be the answer to this paradoxical occurrence.

### ■ Depression and primary care (page 251)

Often primary care physicians treat patients who are depressed. Yet recognizing this condition can be difficult, as the patients may often complain of somatic symptoms. Drs. Alarcon, Isaacson, and Franco-Bronson give some tips for identifying and treating this common problem.

### ■ Chronic fatigue and hypotension (page 261)

When researchers at Johns Hopkins University postulated a link between neurally mediated hypotension and chronic fatigue syndrome, it sparked a great deal of interest. Unfortunately, the follow-up studies have not been as clear as the initial findings. Drs. Wilke, Fouad-Tarazi, Cash, and Calabrese update us on this interesting controversy.

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

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