



Dear Colleague:

Many of our readers have told us that they would like to see more articles on heart failure in the *Journal*, and we are responding with a new series that debuts this issue.

The series, Heart Failure Update, edited by Dr. James B. Young, medical director of the Kaufman Center for Heart Failure at the Cleveland Clinic, is designed to explain new findings on heart failure and how they are changing clinical practice.

Tell us how you like the series and what other topics you would like to see in the *Journal*.

Also, because so many of you are now taking advantage of our free CME, I wanted to clarify the rules regarding the test. To meet the requirements of the Accreditation Council for Continuing Medical Education, 75% of your answers must be correct.

■ The heart failure pandemic (page 351)

Dr. Starling kicks off the new series with a review of the changing definition of heart failure. He points out how changing demographics make heart failure one of the most significant public health problems to face this country. He outlines how cost-control strategies can actually improve the care of heart failure patients.

■ Pelvic inflammatory disease (page 369)

Dr. Rome discusses the Center for Disease Control and Prevention's latest treatment guidelines for pelvic inflammatory disease (PID), a common and difficult problem affecting young women. Dr. Rome points out that PID is often underdiagnosed and that it is important that it be recognized and treated effectively at the earliest opportunity.

■ Acromegaly (page 343)

Acromegaly, a well-known clinical

syndrome caused by excess secretion of growth hormone, has many complications and several new approaches to treatment. Dr. Barkan reviews the physiology, diagnosis and management of this interesting endocrinopathy, emphasizing the role of insulin-like growth factor.

■ IM Board Review (page 377)

Transient and migratory sensorimotor neurologic manifestations present the physician with a diagnostic challenge. Drs. Rensel and Kinkel pose a set of questions arising from such a case in this month's IM Board Review.

■ Treating spinal metastasis (page 359)

Reluctance to recommend surgery for a patient with spinal metastases may lead to a missed opportunity to improve the patient's quality of life. Drs. McLain and Bell point out that decompression or stabilization of the spine can provide pain relief, improve neurologic function and/or alleviate spinal instability in selected patients.

■ The "cancer cure" media frenzy (page 386)

The recent media frenzy over a potential "cancer cure" provided more grist for physicians frustrated by hype in medical reporting. Dr. Markman outlines his objections to recent news coverage, and gives some suggestions for physicians as they relate to the news media.

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

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