TABLE OF CONTENTS

FROM THE EDITOR ............................................................................

The urge to know: 144
What does iron have to do with infection?
Why might iron supplementation be harmful in the setting of infection?
B.F. MANDELL

THE CLINICAL PICTURE ......................................................................

Genital lesions and acute urinary retention 151
A 36-year-old patient has not voided in 48 hours. Catheterization yields 1,250 mL. What is the next step?
N. ALTOROK, A. ABUGIAZIA, N. ABU SHANAB, AND A. CONWAY

REVIEW ...........................................................................................

Can a bowel preparation exacerbate heart failure? 157
A 73-year-old man with a history of heart failure develops shortness of breath after consuming about 1 L of a polyethylene glycol solution in preparation for colonoscopy the next day.
K. PARIKH AND H. WEITZ

THE CLINICAL PICTURE ......................................................................

A 40-year-old woman with excoriated skin lesions 161
The lesions have been present for many years; a few show signs of recent bleeding. What is the diagnosis?
M.C. ALRAIES, E. KELLER, K. SHAHEEN, AND A.H. ALRAIYES

1-MINUTE CONSULT ..........................................................................

Is iron therapy for anemia harmful in the setting of infection? 168
The harmful effects are more theoretical than observed. On the other hand, there are also no convincing data to support the benefit of this therapy.
E. DAOUD, E. NAKHLA, AND R. SHARMA

IM BOARD REVIEW ..............................................................................

Recurrent abdominal pain after laparoscopic cholecystectomy 171
Four months after gallbladder surgery, her pain is back. Why?
C. MACARON, M.A. QADEER, AND J.J. VARGO

CONTINUED ON PAGE 142
CONTINUED FROM PAGE 141

CURRENT DRUG THERAPY

Dronedarone for atrial fibrillation: 179
How does it compare with amiodarone?
Dronedarone’s precise role is yet to be defined, but if it is as well tolerated as hoped, it may help clinicians pursue a rhythm control strategy more often.
N. PENUGONDA, A. MOHAMAND-BORKOWSKI, AND J.F. BURKE

EDITORIAL

The estimated glomerular filtration rate 186
as a test for chronic kidney disease: Problems and solutions
Creatinine-based testing is not perfect. Perhaps a two-step approach would be better.
A.D. RULE AND J.C. LIESKE

REVIEW

Interpreting the estimated glomerular filtration rate in primary care: Benefits and pitfalls
Many laboratories are now reporting the glomerular filtration rate automatically, and primary care providers are left trying to interpret the results.
J. SIMON, M. AMDE, AND E.D. POGGIO

CANCER DIAGNOSIS AND MANAGEMENT

Malignant bowel obstruction: 197
Individualized treatment near the end of life
Surgery should not be routinely done. Less-invasive approaches such as gastric and colonic stenting are useful.
A. SORIANO AND M.P. DAVIS

DEPARTMENTS

Letter to the editor 145
A reader comments on oral contraceptives and menstrual manipulation (July 2010).

CME Calendar 156
Directions for taking CME tests online 207
To receive CME credit, read any or all of the CME-certified articles in this issue (those that carry the CME logo), then go to www.ccjm.org to take the test for the article or articles you select. It should take up to 1 hour to complete the activity for each article.
Release date: March 1, 2011
Expiration date: February 28, 2012

UPCOMING FEATURES

Pharmacogenomics:
Why drugs work in some patients but not in others

New atrial fibrillation:
Managing rate, rhythm, and risk

Immune thrombocytopenia:
No longer idiopathic, not always purpuric

Meeting the health care needs of lesbian, gay, bisexual, and transgender patients

Giant cell arteritis
Suspect it, treat it promptly

Cancer pain:
Frequently asked questions

Visceral angioedema:
An uncommon but serious adverse effect of ACE inhibitors