Myasthenia gravis: An update for internists
Recognizing the spectrum of the disease in patients’ complaints enhances our clinical reasoning skills when faced with the extremely commonly expressed symptom of “fatigue.”
Brian F. Mandell, MD, PhD

Oral leukoplakia and oral cancer
A 53-year-old male who had smoked for 36 years was referred by his dentist for worsening vitiligo diagnosed as leukoplakia 3 years earlier.
Takeshi Onda, DDS, PhD; Kamichika Hayashi, DDS, PhD; Akira Katakura, DDS, PhD; Masayuki Takano, DDS, PhD

What are the treatment options for myasthenia gravis if first-line agents fail?
From 5% to 20% of patients may have a suboptimal response or prohibitive adverse effects over a period of a few weeks to 3 months.
Christopher Zust, MD; John A. Morren, MD

The constellation of vitamin D, the acute-phase response, and inflammation
An astronomic increase in vitamin D testing and supplementation is happening in the absence of an evidence-based rationale.
Maria J. Antonelli, MD; Irving Kushner, MD; Murray Epstein, MD, FASN, FACP

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Vitamin D: A metabolic bone disease perspective 91
When checking levels, clinicians should keep in mind that vitamin D levels fluctuate by season and time of day, and that different laboratories may use different assays that yield different results.
Bruce Long, MD, FACR, BS Pharm

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Red flags included low voltage, normal sinus rhythm, and Q waves on electrocardiography, a history of carpal tunnel syndrome, and evidence of renal dysfunction.
Kaylee Watson, MD; David Wolinsky, MD; Mauricio Velez, MD; David Snipelisky, MD, FACC

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Who is at risk? Which tests should be ordered? How does the disease course affect management decisions? What instructions should you give patients? And other questions.
John A. Morren, MD; Yuebing Li, MD, PhD

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Jordana Yahr, DO; George Thomas, MD; Juan Calle, MD; Jonathan J. Taliercio, DO

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