

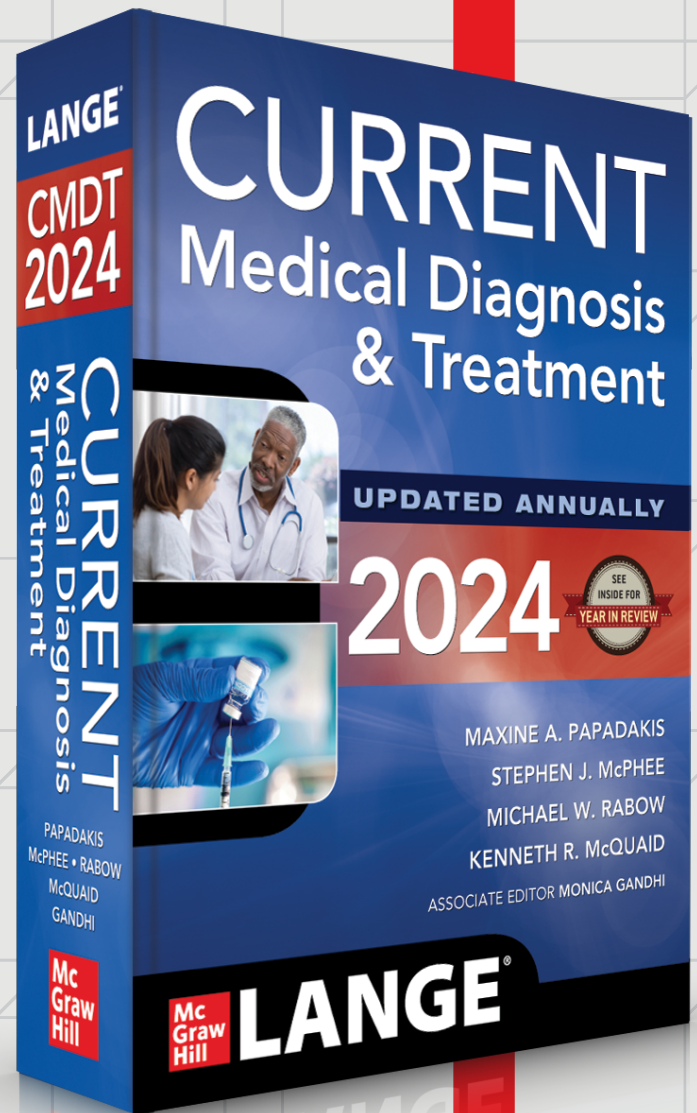


CMDT 2024
YEAR IN REVIEW



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YEAR IN REVIEW: KEY CLINICAL UPDATES IN CMDT 2024

Topic	Page Number	Key New Advances Affecting Clinical Practice*
CHAPTER 1: DISEASE PREVENTION & HEALTH PROMOTION		
Prevention of Cardiovascular Disease	6	<ul style="list-style-type: none"> The decision to initiate low-dose aspirin use for the primary prevention of CVD in adults aged 40–59 years who have a 10% or greater 10-year CVD risk should be an individual one. Evidence indicates that the net benefit of aspirin use in this group is small. Persons who are not at increased risk for bleeding and are willing to take low-dose aspirin daily are more likely to benefit. The USPSTF recommends against initiating low-dose aspirin use for the primary prevention of CVD in adults aged 60 years or older. <i>US Preventive Services Task Force; Davidson KW et al. JAMA. [PMID: 35471505]</i>
	7	<ul style="list-style-type: none"> A head-to-head trial found varenicline more effective than other pharmacologic therapies, and all pharmacologic therapies more effective than placebo, for smoking cessation. <i>Rigotti NA et al. JAMA. [PMID: 35133411]</i>
	9	<ul style="list-style-type: none"> Several types of interventions to improve control of hypertension, including telehealth applications, have been shown to be effective in increasing adherence and blood pressure control. <i>Mikulski BS et al. Am J Prev Med. [PMID: 34963562]</i>
Prevention of Infectious Diseases	4	<ul style="list-style-type: none"> The Advisory Committee on Adult Immunization Practices recommends a 2-, 3-, or 4- dose primary series for all adults aged 19–59 years who have not been previously vaccinated for or infected with hepatitis B and for patients aged 60 years or older who are at increased risk or who wish to be vaccinated. <i>Centers for Disease Control and Prevention (CDC).</i>
CHAPTER 2: COMMON SYMPTOMS		
Fever & Hyperthermia	30	<ul style="list-style-type: none"> Febrile patients admitted to a hospital with a body temperature above 39.5°C had higher mortality and acute kidney injury events compared to patients with less fever (38.0–38.1°C). <i>Marcusohn E et al. Am J Emerg Med. [PMID: 34894473]</i>
CHAPTER 3: PREOPERATIVE EVALUATION & PERIOPERATIVE MANAGEMENT		
Evaluation of the Patient with Liver Disease	48	<ul style="list-style-type: none"> The VOCAL-Penn score predicted mortality and risk of hepatic decompensation in surgical patients with cirrhosis and performed better than MELD-based prediction tools in an external validation study. <i>Mahmud N et al. Liver Transpl. [PMID: 33788365]</i>
Preoperative Hematologic Evaluation	49	<ul style="list-style-type: none"> While transfusion for a hemoglobin level below 7 g/dL (70 g/L) is recommended in many nonsurgical patients, a meta-analysis of trials comparing transfusion strategies suggests that a threshold of 8 g/dL (80 g/L) was associated with lower mortality than more restrictive thresholds in surgical patients. <i>Douketis JD et al. Chest. [PMID: 35964704]</i>
CHAPTER 4: GERIATRIC DISORDERS		
Depression	59	<ul style="list-style-type: none"> Among those with mild cognitive impairment or mild to moderate dementia, cognitive behavioral therapy added to usual care probably increases depression remission and slightly reduces depression symptoms. <i>Orgeta V et al. Cochrane Database Syst Rev. [PMID: 35466396]</i>

*See chapter for further details and references.

(continued on following page)