

Annals of Internal Medicine tip sheet for June 17 2008 issue

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1. Hearing Impairment is Common Among Adults With Diabetes

Hearing impairment is common in adults with diabetes, and diabetes seems to be an independent risk factor for the condition. Using the National Health and Nutrition Examination Survey, collected by the National Center for Health Statistics from 1999 to 2004, researchers analyzed data from 5,140 adults aged 20 to 69 who completed an audiometric examination and a diabetes questionnaire. Hearing impairment was more prevalent among adults with diabetes. Age-adjusted prevalence of low- or mid-frequency hearing impairment of mild or greater severity assessed in the worse ear was 21.3 percent among 399 adults with diabetes compared to 9.4 percent among 4,741 adults without diabetes. These differences in hearing between people with and without diabetes were present in both sexes; all groups of race or ethnicity, education, and income; and all age groups but the oldest. See separate news release and video news release for more information.

Note: This article will be posted online at www.annals.org

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2. Coffee Drinkers Have Slightly Lower Death Rates Than People Who Do Not Drink Coffee

Regular coffee drinking (up to 6 cups per day) is not associated with increased deaths in either men or women. In fact, both caffeinated and decaffeinated coffee consumption is associated with a somewhat smaller rate of death from heart disease. Women consuming two to three cups of caffeinated coffee per day had a 25 percent lower risk of death from heart disease during the follow-up period (which lasted from 1980 to 2004 and involved 84,214 women) as compared with non-consumers, and an 18 percent lower risk of death caused by something other than cancer or heart disease as compared with non-consumers during follow-up. For men, this level of consumption was associated with neither a higher nor a lower risk of death during the follow-up period (which lasted from 1986 to 2004 and involved 41,736 men). See separate news release and video news release for more information.

3. Screening HIV in Patients Older Than 55 Years of Age is Cost-Effective

A new study examined the cost-effectiveness of HIV screening in patients from age 55 to 75. Recently revised screening guidelines issued by the CDC recommend that all patients aged 13 to 64 be tested. The study looked at economic effects of voluntary HIV screening in patients aged 55 to 75: 8,672 inpatients and outpatients at six Department of Veterans Affairs Health Care Systems, whose HIV status was unknown, were included. The authors concluded that if the tested population has an HIV prevalence of 0.1 percent or greater, HIV screening in persons from age 55 to 75 is cost-effective according to conventional definitions of cost-effectiveness. The authors also suggest that to be cost-effective, screening decisions in patients older than 64 should consider whether the patient is at increased risk, has a partner at risk for contracting HIV, or has other life-threatening conditions. Advanced age alone should not preclude screening for HIV.

4. Open-access Scheduling has Mixed Results

The goal of open-access scheduling of office appointments is to guarantee patients that they can see a physician on the same day that they seek an appointment. The authors assessed the impact of open-access scheduling on patient appointment availability, no-show rates, and patient and staff satisfaction in six primary care practices from 2003 to 2006. The authors found that within four months of implementation, practices were able to significantly reduce their mean wait for appointment availability. However, none of the practices attained the goal of same-day access, although most practices felt their efforts were beneficial, since implementing open-access scheduling forced a re-evaluation of office systems and staffing. The findings contrast with the more optimistic results of several previous studies, which suggests the need for large-scale research of the effects of

open-access scheduling.

Fact: The younger the child, the possibility of a greater lack of iron. Atlanta Center for Disease Control and Prevention to provide the data show that 1-2-year-old child learning to walk in, there will be nine percent of iron deficiency. In the 3-5 year-old child, the proportion fell to 3 percent, and the 6-11 year-old child, the ratio was 2 percent. Beginners can walk the children from their diet was a lot of iron, which is good news. Many families are born vegetarian or do not eat beef and mutton. Moreover, the meat firm, children can not chew.

Red meat contains easy absorption of iron, therefore, appropriate to eat some of the children is good. However, children learning to walk, can also be enhanced by eating bread and cereals, dried fruit (such as raisins), spinach, molasses, soya beans, lentils, eggs, fish and poultry to meet the physical needs of the various minerals. 10 children under the age of the daily intake should be at least 10 milligrams of iron, this number is very easy to achieve, a cup of cheese (about 8 milligrams of iron) and the two pouch raisins (about 2 milligrams of iron) on the line.

If you can not determine whether the children of iron deficiency, you can consult doctors. They will be under the child s feeding history, and so on, to provide you with some suggestions.

Fact: Some children do not like to eat vegetables, is still very healthy. Reason is that they like to eat fruit. In the children gradually learn to accept Chinese cabbage, spinach, green vegetables such as the process of fruit is a good nutritional alternatives.

If your children do not eat carrots, may be added to the lack of vitamin A and carotene, you may wish to eat some of his apricot or Hami Gua; oranges or strawberries can replace spinach to meet the needs of the children of folic acid. Banana can replace the potato as the source of potassium; citrus fruits can substitute cabbage vitamin C to meet the demand.

However, no matter how, vegetables and fruit, after all, can not completely replace each other. Vegetables not only rich in the essential vitamins and minerals, but also contains a variety of health promotion plant chemicals. Therefore, you must continue to provide vegetables for their children, let him accept and like vegetables. This is very important.

About the Author

From www.eurekalert.org:

Information on nutritional supplements aimed at athletes and exercisers is provided, including potential.

Find nutrition facts, including food labels, calories, nutritional information and analysis that helps promote healthy eating by telling you about the foods.

Substitution of ingredients may alter nutritional values. and nutrition or are particularly sensitive to specific ingredients or foods, please.

Get the facts on how alcohol impacts nutrition, metabolism, diet and weight loss, blood sugar, vitamins and minerals. Learn the calorie content.

This section contains fact sheets that provide a detailed description of vitamins, minerals and macronutrients as well as fad diets.

Covering a wide range of topics, these brief fact sheets provide nutrition facts along with healthy eating tips and recipes. Nutrition.

To perform at their best, dancers need to be well fueled for classes, rehearsals, and performances. This paper will present a strategy.

Nutritional facts for brand name products and fast food restaurants. Weight Loss, free diets, nutritional supplements, calorie.

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