

TABLE OF CONTENTS

FROM THE EDITOR

'Obvious' answers aren't always so simple 487

In atrial fibrillation, rhythm control seemed "obviously" better than rate control-until randomized trials were done. J.D. CLOUGH

1-MINUTE CONSULT.....



Should primary care physicians screen for depression?

488

493

508

517

Yes, if they have the time and resources to do something about it if they find it. G.E. TESAR

EDITORIAL.....

On testing for proteinuria: Time for a methodical approach

It is now imperative that we test for proteinuria in outpatients. G. EKNOYAN

In-hospital initiation of statins: 502 Taking advantage of the 'teachable moment'

For a variety of reasons, starting a statin in the hospital increases long-term compliance. G.C. FONAROW

MINIMALLY INVASIVE SURGERY UPDATES

New series: Minimally invasive surgery updates

We hope to keep you abreast of how laparoscopic techniques are revolutionizing surgical care, and what this means for your patients. I.S. GILL

MINIMALLY INVASIVE SURGERY UPDATES......

Laparoscopic repair of giant paraesophageal 511 hernias: An update for internists

Laparoscopic repair is safe and can provide excellent results. M. ROSEN AND J. PONSKY

REVIEW

Staphylococcus aureus bacteremia: Using echocardiography to guide length of therapy

Empiric long-term antibiotic therapy is no longer uniformly recommended for all cases of S aureus bacteremia, although experts disagree about the optimal length of therapy. A.I. KIM, K.A. ADAL, AND S.K. SCHMITT

CONTINUED ON PAGE 484





JOHN D. CLOUGH, MD Editor-in-Chief BRIAN F. MANDELL, MD, PHD Deputy Editor PETER G. STUDER Publisher PHILLIP E. CANUTO Executive Editor GLENN R. CAMPBELL Executive Editor RAY BORAZANIAN Managing Editor DAVID A. HUDDLESTON Manuscript Editor AMY SLUGG MOORE Patient Education Editor BRUCE M. MARICH Production Manager ROBERT J. DEMAREST Medical Art Director JOSEPH A. PANGRACE Medical Illustrator DAVID R. SCHUMICK Medical Illustrator JOSEPH KANASZ Medical Illustrator IRIS TRIVILINO Department Coordinator CINDY PALMER Billing/Accounting

EDITORIAL ADVISORY BOARD

MUZAFFAR AHMAD, MD WILMA FOWLER BERGFELD, MD EMMANUEL L. BRAVO, MD WILLIAM R HART MD ERIC A. KLEIN, MD FLOYD D. LOOP, MD DOUGLAS S. MOODIE, MD RICHARD H. NODAR, PHD WILLIAM L. PROUDFIT, MD WILLIAM C. SHELDON, MD ERIC J. TOPOL. MD HERBERT P. WIEDEMANN, MD

ASSOCIATE EDITORS ALEJANDRO C. ARROLIGA, MD DAVID BRONSON, MD WILLIAM D. CAREY, MD BRIAN A. CLARK, PHD, MD BRIAN G. DONLEY, MD GARY FRANCIS MD KATHLEEN FRANCO-BRONSON, MD STEVEN M. GORDON, MD BRIAN GRIFFIN, MD GARY HOFFMAN, MD BYRON J. HOOGWERF, MD MANI S. KAVURU, MD RITA S. LEE, MD

MANDY C. LEONARD, PHARMD ANGELO A. LICATA, MD, PHD DAVID L. LONGWORTH, MD MAURIE MARKMAN, MD ATUL C. MEHTA, MD NEIL B. MEHTA, MD FRANKLIN A. MICHOTA, MD STEVEN NISSEN, MD ROBERT M. PALMER, MD NORMAN B. RATLIFF, MD S. SETHU K. REDDY, MD MARK E. ROSE, MD MARK ROTH, MD DOUGLAS SEIDNER, MD CATHY A. SILA, MD HOLLY L. THACKER, MD JAMES THOMAS, MD DONALD G. VIDT, MD WILLIAM S. WILKE, MD MARC WILLIAMS, MD JAMES B. YOUNG, MD

CLEVELAND CLINIC FOUNDATION DIVISION OF EDUCATION ANDREW J. FISHLEDER, MD Chairman PHILLIP R. GARD Administrato

REPRINTS: Marsha Fogler 1-800-482-1450 mfogler@medicalreprints.com

The Cleveland Clinic Journal of Medicine (ISSN 0891-1150) is published 12 times yearly by The Cleveland Clinic Foundation.

STATEMENTS AND OPINIONS expressed in the Cleveland Clinic Journal of Medicine are those of the authors and not necessarily of The Cleveland Clinic Foundation or its Board of Trustees.

SUBSCRIPTION RATES: U.S. and possessions: personal \$98; institutional \$124; single copy/back issue \$16. Foreign: \$124; single copy/back issue \$16. Institutional (multiple-reader rate) applies to libraries, schools, hospitals, and federal, commercial, and private institutions and organizations. Individual subscriptions must be in the names of, billed to, and paid by individuals.

POSTMASTER ADDRESS CHANGES: Cleveland Clinic Journal of Medicine, NA32, 9500 Euclid Avenue, Cleveland, OH 44195

SUBSCRIPTIONS, EDITORIAL, BILLING/ACCOUNTING AND PRODUCTION: (same address as above) Phone (216) 444-2661 Fax (216) 444-9385 E-mail ccjm@ccf.org http://www.ccjm.org

ADVERTISING: Joseph Dennehy, Director, Sales and Marketing, 120 Castle Ridge Rd, Manhasset, NY 11030 • Phone (516) 365-8640 • Fax (516) 365-0587

AUTHORIZATION TO PHOTOCOPY items for internal or personal use is granted by the Cleveland Clinic Journal of Medicine, ISSN 0891-1150, published by The Cleveland Clinic Foundation, provided that the appropriate fee is paid directly to Copyright Clearance Center, 222 Rosewood Drive, Danvers, MA 01923 USA 978-750-8400. Prior to photocopying items for educational classroom use, please contact Copyright Clearance Center, Inc., at the address above. For permission to reprint material, please fax your request with complete information to the Republication department at CCC, fax (978) 750-4470. For further information visit CCC Online at http://www.copyright.com. To order bulk reprints, see above.

DISCLAIMER: This information is provided for general medical education purposes only and is not meant to substitute for the independent medical judgment of a physician relative to the diagnostic and treatment options of a specific patient's medical condition. In no event will The Cleveland Clinic Foundation be liable for any decision made or action taken in reliance upon the information provided through this activity.





CONTINUED FROM PAGE 482

REVIEW

Proteinuria: 535 How to evaluate an important finding

Proteinuria should be taken seriously, even in outpatients without symptoms. W. KASHIF, N. SIDDIQI, A.P. DINCER, H.E. DINCER, AND S. HIRSCH

Withholding nutrition at the end of life: 548 Clinical and ethical issues

The decision to withhold or withdraw enteral or parenteral nutrition at the end of life should be based on medical need, in collaboration with the family and patient, if possible. J. SLOMKA

REVIEW ...



Raising an isolated low HDL-C level: 553 Why, how, and when?

No current therapy is optimal, but many can modestly increase HDL-C. The decision to treat depends on the patient's risk for coronary disease. M. MILLER

INTERPRETING KEY TRIALS

The Lescol Intervention Prevention Study: Start all patients on statins early after percutaneous coronary intervention

The trial showed a significant reduction in cardiac events in patients who received a statin drug immediately after a successful percutaneous coronary intervention. Currently, this is seldom done. A.W. MESSERLI, H.D. ARONOW, AND D.L. SPRECHER

INTERPRETING KEY TRIALS.....

Atrial fibrillation: Rate control is as good 567 as rhythm control for some, but not all

Many clinicians are questioning the need to restore or maintain sinus rhythm in atrial fibrillation. What did four recent trials show? M.K. CHUNG

DEPARTMENTS

CME Calendar 534 Classified advertisements 574 **Corrections** 501

Osteoporosis in men (Cleve Clin J Med 2003; 70:247-254). Preventing kidney failure (Cleve Clin J Med 2003; 70:337–344).



CME Self-test Online

575

561

■ VISIT OUR WEB SITE AT HTTP://WWW.CCJM.ORG

■ The Cleveland Clinic Journal of Medicine is peer-reviewed and indexed in *Index Medicus*.

UPCOMING FEATURES

- **C-reactive protein** as a cardiac test
- Pap testing: New methods, guidelines
- Building new bone: PTH for osteoporosis
- **Acne: One treatment** does not fit all
- New coronary imaging: See the wall, not the lumen
- Are metformin, acarbose weight-loss drugs?
- Epilepsy surgery: Effective, underused
- Contraception update
- **Genetic discrimination:** The coming dilemma
- Are we winning the war on cancer?

