
**COVID-19 pandemic led to global surge in anxiety, major depressive disorders, study finds**

Reuters (10/8, Smout) reported, “The COVID-19 pandemic led to a surge in anxiety and major depressive disorders across the world, particularly among women and young people, a study published in the Lancet on Friday found.” The researchers found that “young people suffered as school closures kept them away from friends, and many women found themselves bearing the brunt of household work and facing an increased risk of domestic violence.” The study “recorded 76 million additional cases of anxiety disorders and 53 million of major depressive disorder as COVID-19 spread in 2020.”

**Arthritis reported by nearly one in four U.S. adults, research finds**

HealthDay (10/8) reported, “Almost one-quarter of U.S. adults report arthritis, according to research published in the Oct. 8 issue of the U.S. Centers for Disease Control and Prevention Morbidity and Mortality Weekly Report.” Investigators “found that arthritis was reported by an estimated 58.5 million adults aged 18 years or older (23.7%), while [arthritis-attributable activity limitation] AAAL was reported by 25.7 million (10.4% overall; 43.9% among those with arthritis).” Furthermore, investigators found that those “with physical limitations, few economic opportunities, and poor overall health had the highest prevalence of both arthritis and AAAL.”
USPSTF issues draft guidance recommending against use of low-dose aspirin to prevent first heart attack, stroke

The Washington Post (10/12, A1, Chiu) reports that “after years of recommending that middle-aged and older Americans consider taking low-dose aspirin to prevent a first heart attack or stroke,” the U.S. Preventive Services Task Force (USPSTF) “is planning to overhaul its guidelines, based on new studies that show that the risks may greatly reduce or cancel out the benefits.” According to draft USPSTF recommendation (PDF), “a review of the latest scientific evidence found that regularly taking low-dose aspirin—81 milligrams to 100 milligrams—to prevent a first heart attack or stroke may have only a ‘small net benefit’ for people ages 40 to 59 who are at risk for cardiovascular disease.”

USA Today (10/12, Rodriguez) reports that “people over the age of 60 should no longer consider taking a daily low-dose or baby aspirin to prevent a first heart attack or stroke, according to” the task force’s draft recommendation. This “announcement marks a change in the 2016 Task Force guidance that recommended aspirin therapy in certain men and women to lower cardiovascular risk.” However, “more recent evidence suggests it also could cause harm, including bleeding in the stomach, intestines, and brain.”

The New York Times (10/12, A1, Rabin) reports USPSTF “also plans to retreat from its 2016 recommendation to take baby aspirin for the prevention of colorectal cancer.”

According to The Hill (10/12, Breslin), “This draft recommendation does not apply to people who have already suffered a heart attack or stroke. The task force still recommends that those people take aspirin preventatively.”

FDA releases guidance aimed at reducing amount of salt in food

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The New York Times (10/13, Jacobs) reports that amid “an epidemic of diet-related illnesses,” the FDA on Wednesday released novel guidance “aimed at reducing the amount of salt that Americans consume at restaurants, school cafeterias and food trucks, or when they are eating packaged and prepared foods at home.” The recommendations “seek to reduce the average daily sodium intake by 12% over the next two and a half years by encouraging food manufacturers, restaurants and food service companies to scale back their use of salt.” The Times adds, “That goal translates into 3,000 milligrams of salt—slightly more than a teaspoon—compared to the 3,400 milligrams that Americans typically consume in a day.”

CNN (10/13, Langmaid) says the guidance “concerns voluntary targets for foods produced by food manufacturers, restaurants, and food service operators.”

Editor’s Note: Read the AMA’s statement on the reduced sodium guidance.

FDA panel recommends Moderna coronavirus booster for people 65 and older, adults at high risk

The Washington Post (10/14, A1, Johnson, Abutaleb) reports the FDA’s Vaccines and Related Biological Products Advisory Committee (VRBPAC) “on Thursday unanimously recommended a booster dose of the Moderna coronavirus vaccine for people 65 and older and for adults who are at high risk of severe illness because of underlying conditions or exposure on the job,” a recommendation mirroring eligibility criteria for the Pfizer coronavirus booster. FDA officials now will consider the recommendation, and a CDC advisory committee is scheduled to meet on Wednesday on the data. About 70 million U.S. residents “have been fully vaccinated with the Moderna vaccine, and millions of them would be eligible for a follow-up dose six months after vaccination if the [FDA] authorizes the extra shot, which would be half the dose initially given.”

CNN (10/14, Gumbrecht) says all 19 members of the VRBPAC “supported authorizing a 50-microgram booster dose – half the size of the 100-microgram doses used in the primary series of the two-dose vaccine – at least six months after the second dose.”

The AP (10/14, Neergaard, Perrone) reports, “There’s no evidence that it’s time to open booster doses of either the Moderna or Pfizer vaccine to everybody, the panel stressed.”

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