Top news stories from AMA Morning Rounds®: Week of Feb. 21, 2022

Read AMA Morning Rounds®’ most popular stories in medicine and public health from the week of Feb. 21, 2022–Feb. 25, 2022.

Research: Excess sodium from soluble or effervescent acetaminophen may increase risk for CVD, all-cause death

Healio (2/24, Buzby) reports, “Excess daily intake of sodium from soluble or effervescent acetaminophen may increase risk for CVD and all-cause death, regardless of baseline hypertension status,” researchers concluded in a study that “utilized the Health Improvement Network to perform two cohort studies evaluating the effects of sodium-containing (effervescent or soluble formulation) compared with non-sodium-containing acetaminophen (tablet, oral suspension or capsule) on one-year CVD outcomes and all-cause mortality among individuals with...and without hypertension.”

MedPage Today (2/24, Lou) reports, “Similar risks were observed for the subgroups of patients also using sodium-containing ibuprofen or ranitidine,” investigators concluded. The findings were published online in the European Heart Journal.

Study: Firearms surpass motor vehicle crashes as leading cause of death by trauma

CNN (2/23, Ahmed, Elamroussi) reports “firearm deaths have overtaken car crashes” as “the leading cause of death by trauma in the U.S., according to a...study” that found “in 2017, there were 1.44 million years of potential life lost due to firearm deaths, edging out that of motor vehicle crashes (1.37 million years).” The trend “continued in 2018,” the findings published in Trauma Surgery and Acute Care Open revealed.
Also, The Hill (2/23, Choi) reports that according to the findings, “the majority of the nearly 40,000 firearms deaths— 85.4%—occurred among men.” For the study, researchers reviewed data from the CDC’s National Vital Statistics Reports between 2009 and 2018.

**Study: Women who experience sexual assault, harassment have higher long-term risk of hypertension**

CNN (2/22, LaMotte) reports “women who experience sexual violence, workplace sexual harassment or both have a higher long-term risk of developing high blood pressure than women with no such trauma, according to” a study that “analyzed data from a 2008 report from the ongoing Nurses’ Health Study II.” The study published in the Journal of the American Heart Association found that “women who reported having experienced both sexual assault and workplace sexual harassment had a 21% increased risk of hypertension.”

Moreover, HealthDay (2/22, Preidt) reports, “Compared to those with no history of sexual assault or harassment, the risk of high blood pressure was...15% higher among those who experienced workplace sexual harassment; and 11% higher among sexual assault victims.” Separately, the investigators “found no increased risk of high blood pressure among women who had a history of other types of trauma and not sexual violence.”

**Report explores how virtual care, other digital tools can accelerate adoption of integrated behavioral health care**

Healthcare IT News (2/21, Jercich) reports, “The American Medical Association, in conjunction with Manatt Health, published a report this week exploring the ways that virtual care and other digital tools can accelerate the adoption of the integrated delivery of behavioral and physical health care.” In this “report, the organizations note that behavioral health integration is essential for solving the country’s dire need for access to services.” In a statement, AMA President Gerald E. Harmon, M.D., said, “The demand for behavioral health services is significant and rising, but so is the potential for digital technology to support the integrated delivery of physical and behavioral health services.”


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Study: Ivermectin does not prevent patients with COVID-19 from becoming severely ill

Reuters (2/18) reported “researchers found that treatment with the anti-parasite drug ivermectin did not prevent patients with COVID-19 from becoming severely ill in a randomized clinical trial.” Investigators “enrolled 490 patients with mild to moderate illness at 20 hospitals and a COVID-19 quarantine center in Malaysia.” All participants “received standard care,” while “half the group also received ivermectin.”

CNN (2/18, Goodman) reported the researchers found that “there was no difference in outcomes between the groups.” The data indicated that “slightly more patients in the ivermectin group went on to need extra oxygen compared with those who took a placebo, though the difference was not statistically significant.” The findings were published in JAMA Internal Medicine.

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