Top news stories from AMA Morning Rounds®: Week of April 18, 2022

Read AMA Morning Rounds®' most popular stories in medicine and public health from the week of April 18, 2022–April 22, 2022.

Risk for major adverse CV events may be increased in patients with T2D, cognitive impairment

MedPage Today (4/21, Minerd) reports, “Cognitive impairment predicted risk for major cardiovascular events, stroke, and death in patients with type 2 diabetes [T2D],” investigators concluded in a study that followed “8,772 patients from the REWIND trial...for approximately five years.” The study revealed that patients “with substantive cognitive impairment had a greater risk for major cardiovascular events such as myocardial infarction...as well as the composite of stroke or death.”

Healio (4/21) reports, “The participants who scored 1.5 standard deviations below their country’s geometric mean on the Montreal Cognitive Assessment and the Digit Symbol Substitution Test were more likely to experience major adverse CV events, making cognitive impairment a potential predictor for CV health outcomes,” investigators concluded. The findings were published in the Journal of Clinical Endocrinology & Metabolism.

Research reveals no benefit to time-restricted eating

The New York Times (4/20, Kolata) reports research indicates that “a rigorous one-year study in which people followed a low-calorie diet between the hours of 8 a.m. and 4 p.m. or consumed the same number of calories anytime during the day has failed to find an effect.”

MedPage Today (4/20, Monaco) reports, “Condensing a calorie-restricted diet into an eight-hour window during the day didn’t do much to bolster weight loss,” investigators concluded in a study that “recruited 139 Chinese adults (ages 18 to 75) in free living conditions and randomized them to either the time/calorie-restricted diet or the calorie-restricted diet alone.” The study revealed that “participants
with obesity who followed a time-restricted diet in addition to calorie restriction didn’t lose a significantly greater amount of weight compared with individuals who adhered to a calorie-restricted diet alone.” The findings were published in the New England Journal of Medicine.

**Hospitalization rates for unvaccinated children twice as high during Omicron surge**

The New York Times (4/19, Mueller) reports, “Unvaccinated children from 5 to 11 years old were hospitalized with COVID at twice the rate of vaccinated children during the winter Omicron variant surge, the Centers for Disease Control and Prevention reported on Tuesday.” Furthermore, the study, “based on data from hospitals serving about 10% of the U.S. population across 14 states, also offered some of the strongest evidence to date that racial disparities in childhood vaccination might be leaving Black children more exposed to severe illness from COVID.”

Reuters (4/19, Khandekar) reports the study found that “for every 100,000 unvaccinated children in the age group, 19.1 per were hospitalized with COVID-19 between mid-December and late February, compared with 9.2 per 100,000 vaccinated kids.”

**Research: MS severity may be tied to geographic latitude**

MedPage Today (4/18, George) reports, “Severity of multiple sclerosis (MS) was linked with geographic latitude,” investigators concluded. The observational study revealed that “among 46,000 MS patients living in temperate zones, more severe disease was seen in those who lived above 40° latitude,” with the “association...driven mainly, but not exclusively, by ultraviolet B (UVB) radiation exposure contributing to both MS susceptibility and severity.” The findings were published online in the journal Neurology.

**Many Americans reportedly lack access to test-to-treat program**

Kaiser Health News (4/15, Recht) reported the Biden administration’s “‘test-to-treat’ program, announced in March, is meant to reduce [COVID-19] hospitalizations and deaths by quickly getting antiviral pills to people who test positive,” yet, “even as cases rise again, many Americans don’t have access to the program.” Large swaths of the U.S. “had no test-to-treat pharmacies or health centers listed as of April 14. And the website of the largest participant, CVS, has significant technical issues.
that make booking an appointment difficult.”

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