

News in brief - Feb. 13, 2012

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Highlight: 'Illicit drug use in middle age could increase risk of premature death' and other items

Body

Illicit drug use in middle age could increase risk of premature death

Healthy middle-age adults who use illicit drugs occasionally, such as on weekends, are more likely to die prematurely than people who never use the substances, said a study published online Jan. 25 in the *Journal of General Internal Medicine*.

The study looked at illicit drug use of amphetamines, cocaine and opioids. Researchers examined data on 4,301 healthy adults who were 18 to 30 when they enrolled in the **Coronary Artery Risk Development in Young Adults** study in 1985. That study followed participants from 1987 through 2008 and included physical exams in which individuals were asked about their use of amphetamines, cocaine and opioids. Individuals' drug use was assessed from 1987 to 2006.

The journal study found that 14% of all participants reported using at least one of the drugs in the past 30 days. Half of those people continued taking the substances into middle age (www.ncbi.nlm.nih.gov/pubmed/22274889).

By Dec. 31, 2008, 5% of participants had died. The percentage was greatest (8%) among people who were defined as persistent occasional drug users. Such individuals had infrequent drug use that persisted or increased in middle age.

The fewest deaths (3%) occurred among individuals who had not used the studied drugs in the past 30 days. The study's authors encourage primary care physicians to talk to their middle-age, drug-using patients about their elevated risk of premature death.

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Doctors often screen for ovarian cancer more frequently than advised

Many physicians continue to screen routinely for ovarian cancer despite clinical guidelines recommending against it, says a study in the Feb. 7 *Annals of Internal Medicine*.

Researchers surveyed 1,088 family physicians, internists and obstetrician-gynecologists 64 and younger on their cancer screening practices for women. They found that 65% of participants reported ovarian cancer screening practices that were not adherent with current recommendations. Twenty-four percent of doctors said they almost always would order or offer routine screening for medium-risk women, and 6% would do so for low-risk women.

Screening excessively for the disease can lead to false positives, unnecessary procedures and patient anxiety, the study says.

The U.S. Preventive Services Task Force recommends against routine screening for ovarian cancer. The American Cancer Society encourages physicians to give a Pap test every two to three years to women 30 and older who have had three consecutive normal Pap test results.

The *Annals* study is online (www.annals.org/content/156/3/182.abstract).

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