

## Research

## LESS IS MORE

**Antibiotics and Community-Acquired Pneumonia**

1257

The duration of antibiotic treatment for community-acquired pneumonia (CAP) is controversial. In this multicenter, noninferiority randomized clinical trial performed at 4 teaching hospitals in Spain, Uranga and colleagues studied a total of 312 hospitalized patients diagnosed with CAP to validate the Infectious Diseases Society of America/American Thoracic Society guidelines. This study found that the Infectious Diseases Society of America/American Thoracic Society recommendations for duration of antibiotic treatment based on clinical stability criteria can be safely implemented in hospitalized patients with CAP.

🔍 Editorial 1254

**Deconstructing the Ventilator Bundle**

1277

Klompas and colleagues retrospectively analyzed day-by-day performance patterns for 6 different ventilator bundle components during 5539 episodes of mechanical ventilation in a single hospital. They found that sedative interruptions and spontaneous breathing trials were associated with less risk for ventilator-associated events, less time to extubation, and lower hazards for ventilator death. Head-of-bed elevation and thromboprophylaxis were associated with less time to extubation but no effect on ventilator death. Oral care with chlorhexidine was associated with less risk of infection-related ventilator-associated complications but higher risk for ventilator death. Stress ulcer prophylaxis was associated with higher risk of ventilator-associated pneumonia. These findings suggest that ventilator bundles may need modification to optimize outcomes for ventilated patients.

🔍 Invited Commentary 1284

➕ Continuing Medical Education [jamanetworkcme.com](http://jamanetworkcme.com)

**Physician Medical School Salaries by Sex**

1294

In this study, Jena and colleagues undertook an analysis of sex differences in academic physician salary by assembling a database of salary information of academic physicians employed in 24 public medical schools in 12 states and combined these data with information on clinical and research productivity of physicians. Accounting for sex differences in physician age, years of experience, faculty rank, specialty, scientific authorship, National Institutes of Health funding, clinical trial participation, and Medicare reimbursements (proxy for clinical volume), female physicians earned less than males.

🔍 Invited Commentary 1305

**Blood Donor Characteristics and Recipient Survival**

1307

In this study, Chassé and colleagues analyzed a large longitudinal cohort of patients to evaluate associations between outcomes in red blood cell transfusion recipients and the age and sex of blood donors. The researchers collected data relating to blood transfusions in 4 academic hospitals in the Ottawa area. Blood donors' sex and age data collected at time of blood donation were obtained from Canadian Blood Services and found that receiving a transfusion from a female donor was associated with statistically significant increased risk of death compared with receiving a transfusion from a male donor. Similarly, transfusions from donors younger than 30 years increased the risk of death compared with receiving a transfusion from older donors.

🔍 Invited Commentary 1315

➕ Continuing Medical Education [jamanetworkcme.com](http://jamanetworkcme.com)

## Opinion

## Editorial

1256 Notice of Retraction  
H Bauchner and RF Redberg

## Perspective

1247 | **LESS IS MORE** Tithonus Syndrome  
N Skolnik

1248 | **LESS IS MORE** A Grateful But Not Passive Patient  
E Rifkin and A Lazris

1249 Choosing Our Words Wisely  
M Lowenstein

## Teachable Moment

1251 Access to Prescription Opioids—*Primum Non Nocere*: A Teachable Moment  
PD Tyler and Coauthors

1253 | **LESS IS MORE** Insomnia in the Hospital—Not Just a Bad Dream  
P Desforges and Coauthors

## Editor's Note

1332 Health Insurance for Emergency Hospitalization—Isn't the Point to Pay the Bill?  
MH Katz

1352 Health Care for Lesbian, Gay, and Bisexual People Comes Out of the Closet  
MH Katz

## LETTERS

## Research Letter

1390 | **LESS IS MORE** Off-label Use of Quetiapine in Medical Inpatients and Postdischarge  
TC Lee and Coauthors

1391 Generic Drug Approvals Since the 1984 Hatch-Waxman Act  
R Gupta and Coauthors

1394 Race and Poverty Status as a Risk for Overall Mortality in Community-Dwelling Middle-aged Adults  
AB Zonderman and Coauthors

1395 Medical Student Use of Electronic Health Records to Track Former Patients  
GE Brisson and PD Tyler

1397 | **LESS IS MORE** Use of Antibiotics Among Patients Hospitalized for Exacerbations of Asthma  
PK Lindenauer and Coauthors

1400 Association of a Web-Based Handoff Tool With Rates of Medical Errors  
SK Mueller and Coauthors

## Research (continued)

**Out-of-Pocket Costs for Hospitalizations** 1325

In this study, Adrion and colleagues analyze health care claims for 7.3 million inpatient hospitalizations to assess changes in out-of-pocket spending among commercially insured nonelderly adults. Over the study period, total cost sharing per inpatient hospitalization increased by 37% after adjusting for inflation and case-mix differences. Growth in cost sharing was driven primarily by increases in the amount applied to patients' deductibles and increases in coinsurance over the study period rather than copayments. Increasing out-of-pocket spending coupled with the complexities of cost sharing mechanisms mean that many poorly informed patients may face substantial financial risk when they are hospitalized.

◀ Editorial 1332

**Impaired Health Among Lesbian, Gay, and Bisexual Americans** 1344

Using data from over 68 000 adults in the National Health Interview Survey—one of the nation's leading and most representative health surveys—Gonzales and colleagues found that lesbian, gay, and bisexual (LGB) adults reported substantially higher rates of severe psychological distress, heavy drinking and smoking, and impaired physical health than heterosexuals. While this study did not explore specific causes of LGB health disparities, previous studies have linked worse health outcomes in sexual minorities to minority stress, the chronic stress associated with being a member of a marginalized minority group. The results should serve as a call to health care professionals and public health practitioners to pay particular attention to this small, diverse, and vulnerable population.

◀ Editor's Note 1352

**Reference Pricing for Laboratory Tests** 1353

In this study, Robinson and colleagues measured the effect of reference pricing on patient choice of laboratory, test prices, and spending for 285 in vitro diagnostic tests. Implementation of reference pricing was associated with a 32% reduction in average price paid per test, with savings to patients of \$1.05 million and to the employer of \$1.70 million. When combined with access to price information, reference pricing is associated with patient choice of lower-cost facilities, leading to reductions in payments by both the employer and the employees.

◀ Invited Commentary 1359

**Continuity of Care in Dementia** 1371

In an observational study of over 1.4 million fee-for-service Medicare beneficiaries with a dementia diagnosis, Amjad and colleagues sought to understand the relationship between continuity of ambulatory care and health care utilization and spending. Over 1 year, the cohort had an average of 14 outpatient visits with 5 unique providers. About half of the beneficiaries experienced 1 hospitalization and 1 emergency department visit. The annual rate of hospitalization, emergency department visits, brain imaging and laboratory testing for acute illness, and health care spending was higher with lower continuity of care. Understanding this relationship and contributing clinical and provider factors may be important to improve medical care and spending in this complex, expensive disease.

◀ Invited Commentary 1378

## LETTERS (continued)

**Comment & Response**

1403 Appropriate Perspective and Context for Newly Approved Medications, Including Flibanserin

1405 Fish Oils and Bleeding—Where Is the Evidence?

1407 Not All High-Dose Opioid Users Are Addicts

1407 Further Misanalysis of Urinalysis

1408 Remaining Questions Concerning Wearable Devices

1410 Critical Flaws in the Validation of the Instant Blood Pressure Smartphone App—A Letter From the App Developers

1411 Guideline Update for Article on Pharmaceutical Industry-Sponsored Meals

**Invited Commentary**

1402 The Search for Better Patient Handoff Tools

AJ Schoenfeld and RM Wachter

**Editor's Note**

1397 Teaching Medical Students to Engage Meaningfully and Judiciously With Patient Data

RJ Stern

1411 Correction

✚ Online @  
jamainternalmedicine.com

**Author Interview**

**VIDEO** Interview with Eric C. Sun, MD, PhD, author of "Incidence of and Risk Factors for Chronic Opioid Use Among Opioid-Naive Patients in the Postoperative Period"

**Author Interview**

**AUDIO** Interview with Brian S. Schwartz, MD, MS, author of "Association Between Unconventional Natural Gas Development in the Marcellus Shale and Asthma Exacerbations"

**Departments**

1244 Staff Listing

1277, 1307 CME Articles

1413 Classified Advertising

1414 Journal Advertiser Index

1415 Contact Information

1416 CME Questions