

IN BRIEF

DIABETES

Evolution of percutaneous coronary intervention in patients with diabetes mellitus: a report from the National Heart, Lung and Blood Institute-sponsored PTCA (1985–86) and Dynamic (1997–2006) Registries

Rana, J. S. *et al. Diabetes Care* doi:10.2337/dc10-0247

Drug-eluting stents are the percutaneous coronary intervention modality associated with the lowest risk of death or myocardial infarction and repeat revascularization in patients with diabetes mellitus who undergo this intervention. The researchers estimated the adjusted risk over 1 year in 1,846 patients in the USA. The use of drug-eluting stents is associated with a lower need for repeat revascularization compared with balloon angioplasty or bare metal stents. Patients treated with drug-eluting stents also had a slightly lower risk of death or myocardial infarction than patients treated with balloon angioplasty, which might be attributable to the greater use of pharmacotherapy in patients with drug-eluting stents.

NEUROENDOCRINOLOGY

Molecular markers associated with response to chemotherapy in gastro-entero-pancreatic neuroendocrine tumors (GEP)

O'Toole, D. *et al. Endocr. Relat. Cancer* doi:10.1677/ERC-09-0204

Several new prognostic biomarkers in patients with gastroenteropancreatic neuroendocrine tumors have been identified. Using immunohistochemistry, the investigators analyzed selected markers that are known, or suspected, to be able to predict tumor progression or response to cytotoxics. These markers were then correlated with prognosis in 60 treatment-naïve patients who received chemotherapy or chemoembolization for inoperable advanced and/or metastatic tumors. The response to chemotherapy was correlated with a panel of markers: CA9, AKT, PTEN, TS and hLMH1.

NUTRITION

Vitamin D and risk of cognitive decline in elderly persons

Llewellyn, D. J. *et al. Arch. Intern. Med.* 170, 1135–1141 (2010)

Low levels of vitamin D are associated with cognitive decline in an elderly population in Italy. A cohort of 858 adults aged ≥ 65 years were assessed at 3-year intervals between 1998 and 2006. The mini-mental state examination and the trail-making tests A and B were used to evaluate cognitive decline. Those participants who were severely deficient in levels of serum 25-hydroxyvitamin D (< 25 nmol/l) had a higher risk of a cognitive decline than participants with sufficient levels of serum 25-hydroxyvitamin D (> 75 nmol/l). The researchers speculate that their findings could lead to new treatments and strategies to prevent cognitive decline in elderly patients.