Disseminated and necrotising mpox as an AIDS-defining condition

A landmark case series in the *Lancet* shows the deadly effects of mpox (monkeypox) and establishes the necrotising form of illness as an AIDS-defining condition. The collaboration between clinicians in 19 countries gathered data on 382 cases of mpox presenting in people with HIV infection and a CD4 cell count of <350×10^6/L. Severe complications included necrotising skin lesions, lung involvement, sepsis, and death—all more common in those with CD4 cell counts of less than 200×10^6/L. The study also reported 12 deaths in the 21 people who were started on or reinitiated antiretroviral treatment after mpox diagnosis—suspected to be due to an immune reconstitution inflammatory syndrome.

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Dying for a pay rise

Sustained low-wages in middle age in the US is associated with elevated mortality risk and excess deaths. These findings, from a longitudinal study of 4002 people over the age of 50 years, are hardly a surprise: we see the health consequences of socioeconomic inequalities every day in clinical practice. Will putting some numbers on a problem that’s visible to anyone who cares to look be of any help? Probably not, but here goes: after adjusting for socioeconomic variables, the hazard ratio of death for sustained low wage earning was 1.35 (95% confidence interval 1.07 to 1.71), rising to 2.12 for those who also had a period of unemployment during the 12 year exposure period.


Present and future of Parkinson’s disease treatment

The charity Parkinson’s UK estimates that there is a shortfall of 100 Parkinson’s disease specialist nurses in the UK, the usual “accessible point of contact with specialist services” that NICE recommends should be available for all people with Parkinson’s disease. Although we may not be able to get the treatments we have out to patients when they need them, the search for more effective treatments goes on. A cohort of 94 patients with Parkinson’s disease and dyskinesias or motor fluctuations and motor impairment were allocated 3:1 to receive either focused ultrasound ablation of the globus pallidus on the opposite side to the most symptomatic side of the body or a sham procedure. More patients reported the pre-specified improvement in motor symptoms at three months in those who had the procedure, but they also had more side effects, and the long term benefits and risks are still unknown.


PARP for prostate cancer

Inhibitors of poly(ADP-ribose) polymerase (PARP) create breaks in double stranded DNA that can’t be repaired accurately, killing cancer cells with DNA repair defects. A phase 3 randomised trial enrolled men with metastatic, castration-resistant prostate cancer with a BRCA1, BRCA2, or ATM alteration and who had disease progression after treatment with a second generation androgen receptor pathway inhibitor (ARPI). Although the primary outcome of progression-free survival favoured the PARP inhibitor rucaparib over the control group of physician’s choice of treatment, there was no significant difference in the secondary outcome of median overall survival at 62 months.


Twists and turns in colonoscopy drama

Another week, another instalment of the long running colorectal cancer screening drama. This week’s episode set in northeastern Italy—streaming now on the *Annals of Internal Medicine* website—might seem like a bit of a filler, but it does have some twists and turns thanks to the focus on the accuracy of endoscopy. It looked at the link between the rate of detection of adenomas by endoscopists, in those with positive faecal immunochemical test (FIT) screening, and the risk of developing colorectal cancer in the 10 years that followed. They found an inverse relationship: the more adenomas spotted, the less likely the person is to develop colorectal cancer over the next 10 years.

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