

absence of effective treatments, according to Heymann. Measures include instituting infection control practices (including isolation of patients and protection of health workers and other patients), placing all contacts under fever surveillance and isolating those with a fever until a diagnosis is made, and ensuring that those in the community understand the risks of infection and how they can be minimized.

"These practices must be adhered to at all times, even when treatments with vaccines, monoclonals, and antivirals are under way," Heymann said.

After the current outbreak is contained, Heymann says that efforts are

needed to devise effective plans for testing and administering therapies when the virus makes another resurgence.

"Governments in areas with outbreaks or where outbreaks could occur should work with the developers of new products, experts in research and development, and international organizations, especially the World Health Organization, now and between outbreaks, to set up risk-benefit frameworks for testing or using Ebola vaccines and drugs in humans," he said. "And if these countries participate in research and development, they should have unimpeded access to the benefits of this research, including any products developed." ■

Routine Cancer Screening in Older Adults May Offer Few Benefits

Joan Stephenson, PhD

Many older adults may receive cancer screening that is unlikely to offer much benefit, suggest 2 new studies appearing in *JAMA Internal Medicine*.

In one study, researchers used data for 27 404 participants aged 65 years or older in the National Health Interview Survey from 2000 through 2010 to probe patterns of routine screening of prostate, breast, cervical, and colorectal cancer in the United States (Royce T et al. *JAMA Intern Med*. doi:10.1001/jamainternmed.2014.3895 [published online August 18, 2014]). Participants were grouped into those with low, intermediate, high, and very high risks of 9-year mortality, based on a validated mortality index.

Although screening rates generally declined as life expectancy decreased, a substantial number of individuals classified at very high risk (75% risk or greater) of dying within 9 years were screened. Of those with a very high 9-year mortality risk, about 31% of women received a Papanicolaou test for cervical cancer within 3 years, 38% of women had a mammogram within 2 years, 41% of men and women had colorectal screening within 5 years, and 55% of men had received a prostate-specific antigen test for prostate cancer within 5 years.

The researchers found similar trends when they analyzed the data by patient age (some clinical guidelines use age rather than life expectancy), with a substantial proportion of individuals undergoing screening not recommended by guidelines.

"These results raise concerns about overscreening in these individuals [with limited life expectancy], which not only increases health care expenditure but can lead to patient net harm," the authors wrote.

In the second study, researchers used a modeling approach to simulate screening colonoscopy according to guidelines (at 10-year intervals, at age 65 or 75 years) vs more intensive screening (every 3 to 5 years) in average-risk 65-year-old Medicare beneficiaries previously screened at age 55 years with negative results (Van Hees F et al. *JAMA Intern Med*. doi:10.1001/jamainternmed.2014.3889 [published online August 18, 2014]). They found that more intensive screening was associated with only small increases in preventing colorectal cancer deaths and quality-adjusted life-years gained.

Compared with screening at 10-year intervals, decreasing the screening interval to 5 years was not cost-effective. Screening every 3 years or beyond age 75 years resulted in net harm. ■

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Guideline on Diagnosing Sleep Apnea

People who are unusually sleepy during the day for no apparent reason should be evaluated for obstructive sleep apnea and, if needed, undergo a diagnostic sleep study, according to a new clinical guideline.

The guideline, from the American College of Physicians (ACP), is based on reviews of peer-reviewed studies published from 1966 through May 2013. The ACP's review of the medical literature evaluated how effectively different types of sleep tests can diagnose sleep apnea.

Clinical symptoms include unintentionally falling asleep, daytime sleepiness, unrefreshed sleep, fatigue, insomnia, and snoring. For patients with these signs and no other potential causes of obstructive sleep apnea—thyroid disease, gastroesophageal reflux, or other respiratory conditions, for example—the guideline recommends a sleep study, preferably polysomnography conducted overnight with observation in a sleep laboratory.

<http://jama.md/1pYKMb6>

Women Physicians a Growing Political Force

Despite the common assumption that politically speaking, US physicians lean Republican, growing ranks of women in the profession are shifting the profession's political leanings toward the left, according to research published in *JAMA Internal Medicine*.

Women account for roughly one-third of the US physician workforce, and that proportion is growing. Although many have speculated how this trend would change the way medicine is practiced, the researchers were surprised to find that the growing ranks of women in medicine are also shifting the profession's political allegiances.

The new study involved an analysis of donations from physicians to national political campaigns between the 1991-1992 election cycle through the 2011-2012 election cycle. Although physician campaign contributions increased during this period, contributions to Republicans mostly declined between the mid-1990s and 2012. The majority of male physician contributors still backed Republicans, but only 31% of female physician contributors supported that party.

<http://jama.md/VEghg3>

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