

Dear friends of clinical journal club - load the latest file down at <https://www.mdc-berlin.de/cjc>. This website also gives you access to my seminar on Wednesdays 16:00 English and 17:00 German. You need to click on *Besprechung beizutreten*. If it fails to work immediately, keep on clicking.

A 5-month-old full-term baby boy was brought to the outpatient clinic with a 3-week history of a rash. Physical examination is shown. His weight-for-age z score was  $-3.4$ , and his length-for-age z score was  $-5.6$ . Labs revealed a serum albumin level of 1.9 g per deciliter (reference range, 3.5 to 5.0). What is the most likely diagnosis? You are offered: Celiac disease, Kwashiorkor, Marasmus, Nephrotic syndrome, and Staphylococcal scalded skin syndrome. Helpful here is distinguishing between Kwashiorkor and Marasmus. Post-thrombotic syndrome is common after deep-vein thrombosis and can cause severe symptoms involving the limbs that impair patients' activity and quality of life. Endovascular therapy can eliminate chronic venous obstruction and is hypothesized to reduce the severity of post-thrombotic syndrome. Investigators randomly assigned 225 patients with moderate or severe post-thrombotic syndrome and imaging-confirmed iliac-vein obstruction to receive endovascular therapy (iliac-vein stent placement and enhanced antithrombotic therapy) plus standard post-thrombotic syndrome care or standard post-thrombotic syndrome care alone. The severity of post-thrombotic syndrome at 6 months (the primary outcome) was assessed with the validated Venous Clinical Severity Score. The intervention resulted in modest improvement at the cost of slightly more complications. Whole-blood transfusion has recently gained favor in the management of severe hemorrhage; however, data from large clinical trials evaluating its clinical effectiveness and safety are lacking. Investigators conducted a pragmatic, phase 3, multicenter, unblinded, randomized, superiority trial across 10 air ambulance services in England. Patients with major traumatic hemorrhage who were attended by a participating air ambulance service were randomly assigned to receive either whole-blood transfusion (up to 2 units) or standard care with blood components (up to 2 units each of red cells and plasma) before arrival at the hospital. The primary outcome was a composite of death from any cause or massive transfusion ( $\geq 10$  units of blood components or products) within 24 hours after randomization. No difference was shown in any outcome. No increase or decrease in complications were observed. In a second very similar study

the same hypothesis was tested with the same endpoints. Again, whole blood was not observed to be superior in any way. Staphylococcus aureus bacteremia is associated with high mortality. Whether cefazolin or an anti-staphylococcal penicillin should be preferred for the treatment of methicillin-susceptible S. aureus bacteremia is unclear. In an ongoing international Bayesian adaptive platform trial, investigators conducted an open-label, randomized comparison of cefazolin with an anti-staphylococcal penicillin (flucloxacillin or cloxacillin) in adult patients with penicillin-resistant, methicillin-susceptible S. aureus bacteremia. The primary outcome, which was evaluated with a hierarchical Bayesian logistic-regression model, was death from any cause within 90 days after enrollment in the platform. The investigators assessed the posterior probability of the noninferiority of cefazolin to flucloxacillin or cloxacillin. After 50 years since its introduction to clinical practice, cefazolin was “non-inferior” to the penicillin drugs and caused less renal failure. So much for the so-called inoculum effect. Modern risk-adapted management of thyroid cancer involves risk stratification as an active, dynamic process that begins with the detection of a thyroid nodule and continues throughout the clinical course of diagnosis, active surveillance or treatment, and follow-up. N Engl J Med reviews the topic. The weekly patient adventure involves a heart transplant patient with bone marrow failure. Remember the “fifth” disease? Lancet introduces us to the oral GLP-1 agonist from Astra Zeneca. In two randomized trials, elcoglipron beat placebo in obese (study one) and type-2 diabetic (study two) patients. Weight loss amounted to about 15% of baseline body weight at the highest dose in the studies. Tafasitamab is an Fc-enhanced antibody directed at CD19. In a randomized trial, tafasitamab plus lenalidomide beat placebo in R-CHOP-treated patients with large B-cell lymphoma. Next, Lancet inspects treatment of gastric cancer. Perioperative serplulimab (checkpoint inhibition) with neoadjuvant chemotherapy beat chemotherapy alone in a randomized phase-3 study. A Lancet Commission reviews the topic of migration and health. No good news here. Cardiometabolic diseases (CMDs) such as type 2 diabetes, dyslipidemia, and coronary artery disease (CAD) remain the leading causes of morbidity and mortality worldwide. Science Magazine suggests that rather than history, physical examination, and a few simple blood tests, an “omics” approach including polygenic risk scores is the way of the future. The Washington Post introduces us to the “sweet spot” of necessary resistance training

(weight-lifting etc.) to lower cardiovascular risk. Looks like you will have to sweat it out in the weight room for 120 minutes per week. The next presentation will be in English at 16:00, German at 17:00, and will take place will on Wednesday June 24, 2026.

Sincerely, Fred Luft

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