From the Epidemic Intelligence Service (C.W., T.M.V., J.A.) and the Student Epidemiology Elective Program (A.H.-B., C.H., S.E.), Office of Workforce and Career Development, and the Division of Viral Hepatitis, National Center for Infectious Diseases (C.W., T.M.V., G.L.A., G.V., O.V.N., G.X., J.A., T.M.L., I.T.W., A.E.F., B.P.B.) — all at the Centers for Disease Control and Prevention, Atlanta; the Pennsylvania Department of Health, Harrisburg (A.W., V.D., K.W.); and Carroll, Columbiana, and Tuscarawas Counties, Ohio Department of Health, Columbus (M.A.R.). Address reprint requests to Dr. Fiore at the Division of Viral Hepatitis, Mailstop G37, Centers for Disease Control and Prevention, 1600 Clifton Rd., Atlanta, GA 30333, or at afiore@cdc.gov.

ORIGINAL ARTICLE

An Outbreak of Hepatitis A Associated with Green Onions

Charlotte Wheeler, M.D., M.P.H., Tara M. Vogt, Ph.D., M.P.H., Gregory L. Armstrong, M.D., Gilberto Vaughan, B.S., Andre Weltman, M.D., M.Sc., Omana V. Nainan, Ph.D., Virginia Dato, M.D., M.P.H., Guoliang Xia, M.D., Ph.D., Kirsten Waller, M.D., M.P.H., Joseph Amon, Ph.D., M.S.P.H., Teresa M. Lee, M.P.H., Angela Highbaugh-Battle, M.D., Cambria Hembree, M.D., Stephanie Evenson, D.V.M., Michael A. Ruta, B.A., Ian T. Williams, Ph.D., Anthony E. Fiore, M.D., M.P.H., and Beth P. Bell, M.D., M.P.H.
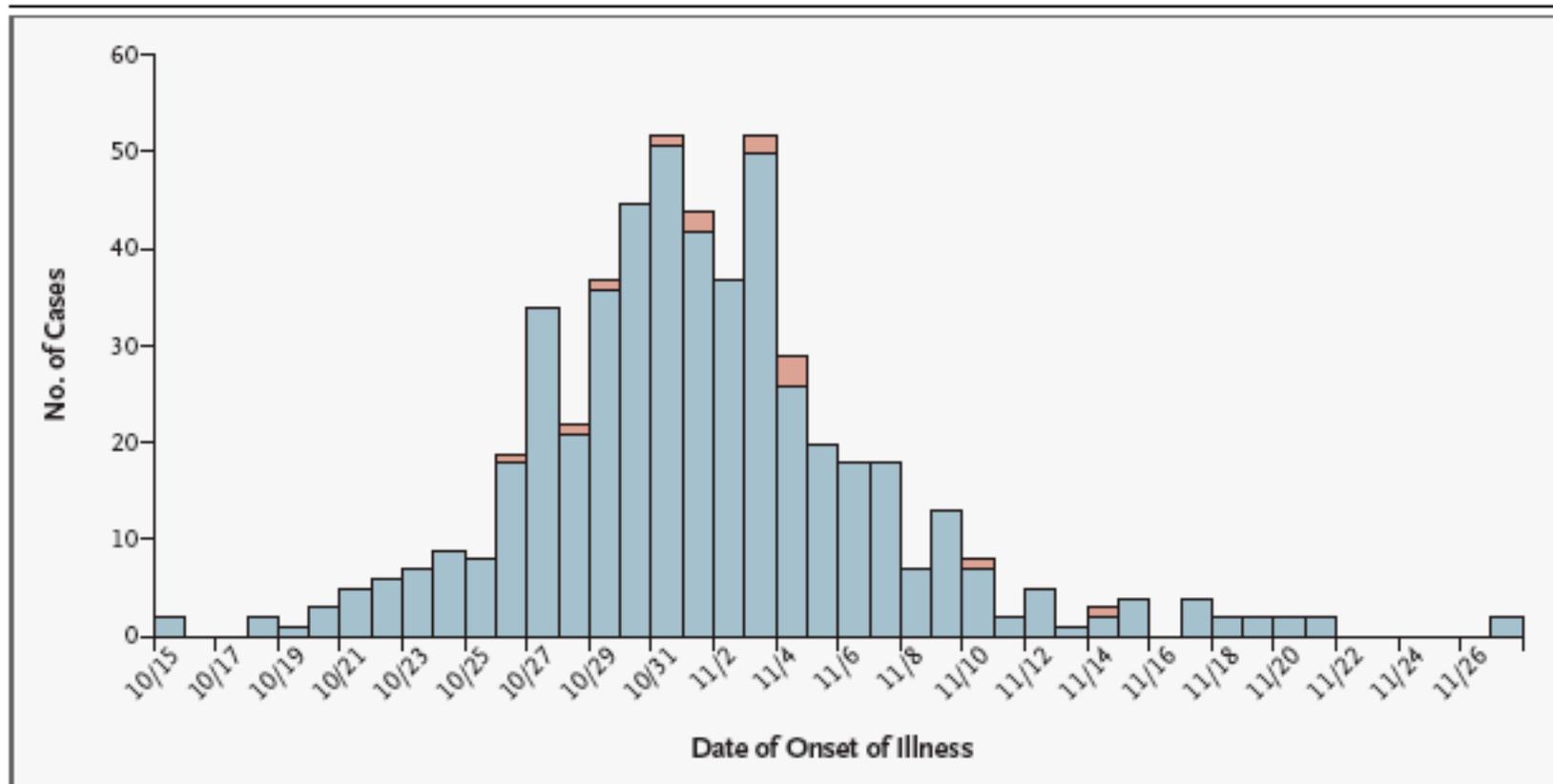
Figure 1. Cases of Hepatitis A Associated with a Restaurant in Pennsylvania in 2003, According to Date of Onset.

Blue bars represent the 514 patrons and brown bars the 13 employees of Restaurant A who were given a diagnosis of hepatitis A between October 15 and November 27, 2003.

From the Respiratory Epidemiology Unit, Montreal Chest Institute (K.S., O.O., D.M.), and the Department of Economics (F.G.), McGill University, Montreal; the Departments of Medicine and Epidemiology, Columbia University Medical Center, New York (R.G.B.); the National Tuberculosis Control Program, Santo Domingo, Dominican Republic (I.A., R.E.M.); Centro Nacional de Investigaciones en Salud Materno Infantil, Santo Domingo, Dominican Republic (J.B.); the National Tuberculosis Action Program, Mexico City, Mexico (E.F., A.C.S.); the National Tuberculosis Control Program, Port-au-Prince, Haiti (W.M., V.J.); the Divisions of Global Migration and Quarantine (S.M.) and Tuberculosis Elimination (K.L.), Centers for Disease Control and Prevention, Atlanta; and the World Health Organization, Geneva (A.P.M.). Address reprint requests to Dr. Menzies at the Respiratory Epidemiology Unit, Montreal Chest Institute, 3650 St. Urbain, Rm. K1.24, Montreal, QC H2X 2P4, Canada, or at dick.menzies@mcgill.ca.

SPECIAL ARTICLE

Domestic Returns from Investment in the Control of Tuberculosis in Other Countries

Kevin Schwartzman, M.D., M.P.H., Olivia Oxlade, M.Sc.,
R. Graham Barr, M.D., Dr.P.H., Franque Grimard, Ph.D., Ivelisse Acosta, M.D.,
Jeannette Baez, M.D., Elizabeth Ferreira, M.D., Ricardo Elías Melgen, M.D.,
Willy Morose, M.D., Arturo Cruz Salgado, D.D., M.P.H., Vary Jacquet, M.D.,
Susan Maloney, M.D., Kayla Laserson, Sc.D., Ariel Pablos Mendez, M.D., M.P.H.,
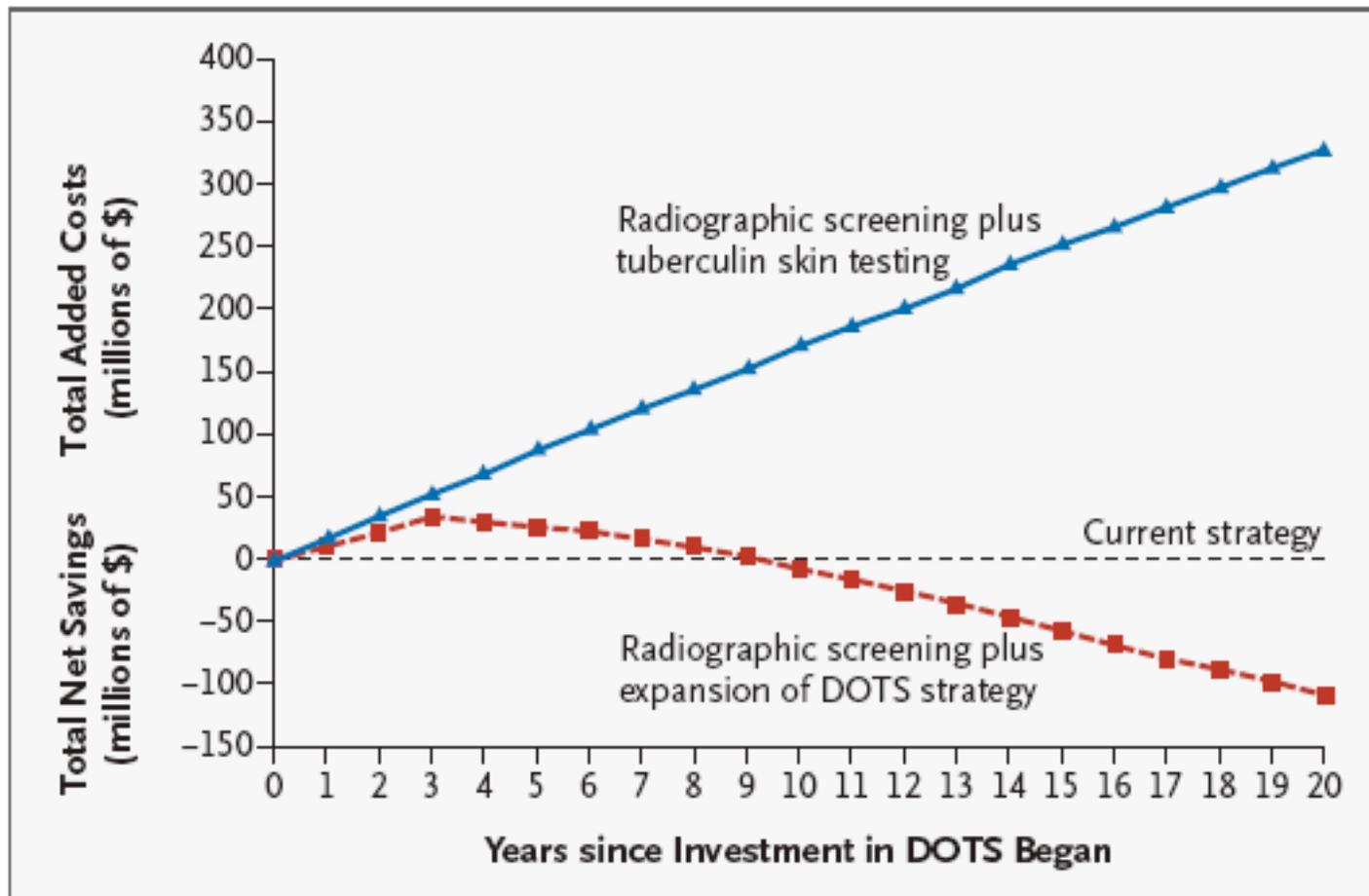and Dick Menzies, M.D.

Figure 1. Net Savings or Added Costs of Implementing a Strategy of Radiographic Screening plus Either Expansion of the DOTS Program or Tuberculin Skin Testing over a 20-Year Period among Migrants from Mexico to the United States.

The values are relative to the cost of the current strategy of radiographic screening plus current tuberculosis-control efforts.
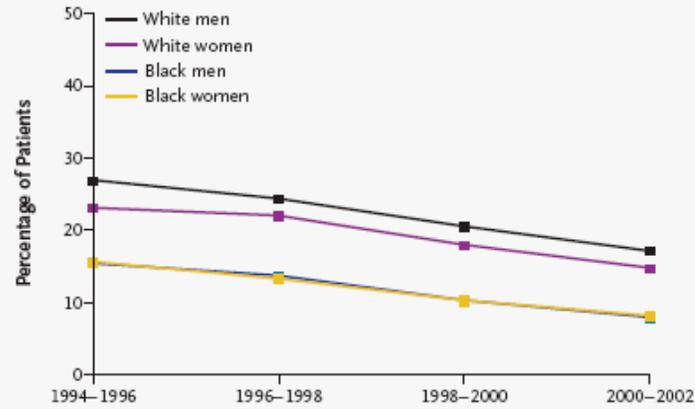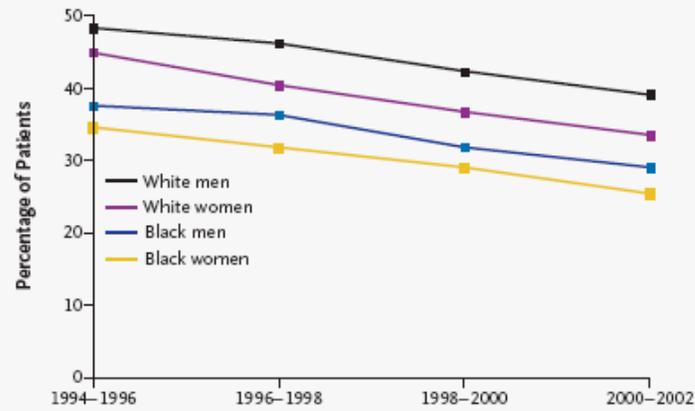

Sex and Racial Differences in the Management of Acute Myocardial Infarction, 1994 through 2002

Viola Vaccarino, M.D., Ph.D., Saif S. Rathore, M.P.H., Nanette K. Wenger, M.D.,
Paul D. Frederick, M.P.H., M.B.A., Jerome L. Abramson, Ph.D.,
Hal V. Barron, M.D., Ajay Manhapra, M.D., Susmita Mallik, M.D.,
and Harlan M. Krumholz, M.D., for the National Registry
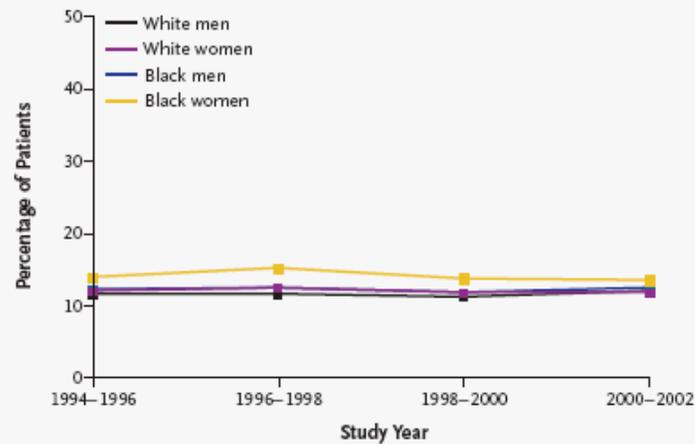of Myocardial Infarction Investigators

Figure 1. Proportions of Patients Considered Ideally Suited for Treatments and Procedures after Acute Myocardial Infarction, According to Sex and Race by Study Year.

A year was defined in this study as the period from June through May.

Paper

Skin biopsy rates and incidence of melanoma: population based ecological study

H Gilbert Welch, *professor of medicine*[1], **Steven Woloshin**, *associate professor of medicine*[1], **Lisa M Schwartz**, *associate professor of medicine*[1]

[1] VA Outcomes Group, Department of Veterans Affairs Medical Center, White River Junction, VT 05009, USA

Correspondence to: H Gilbert Welch, Center for the Evaluative Clinical Sciences, Dartmouth Medical School, Hanover, NH 03755-1404, USA H.Gilbert.Welch@dartmouth.edu

Fig 1 Incidence of melanoma and mortality in population aged 65 and older residing in one of nine US areas participating in Surveillance Epidemiology and End Results programme, 1986-2001. Early stage refers to in situ and local disease; late stage refers to regional and distant disease
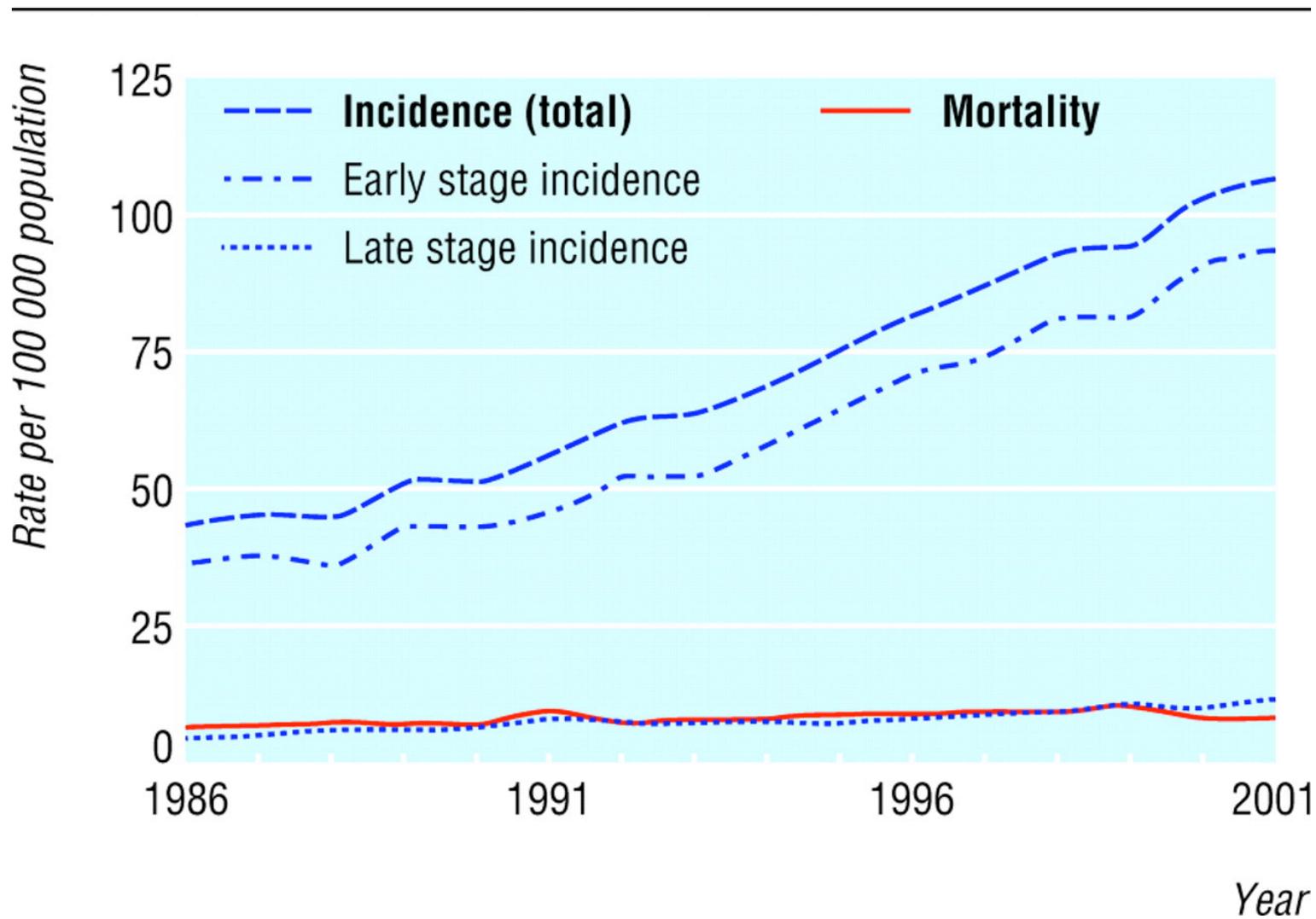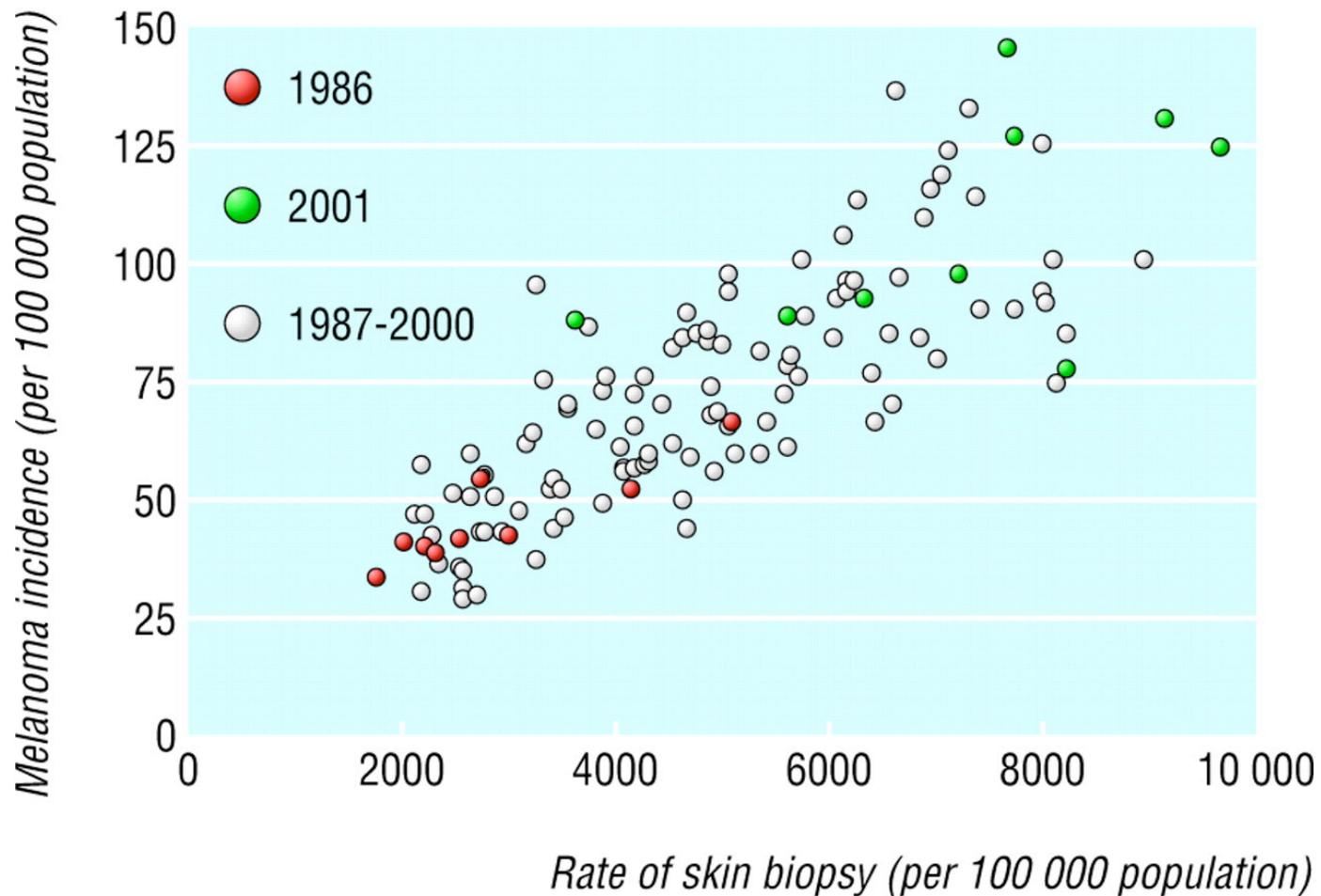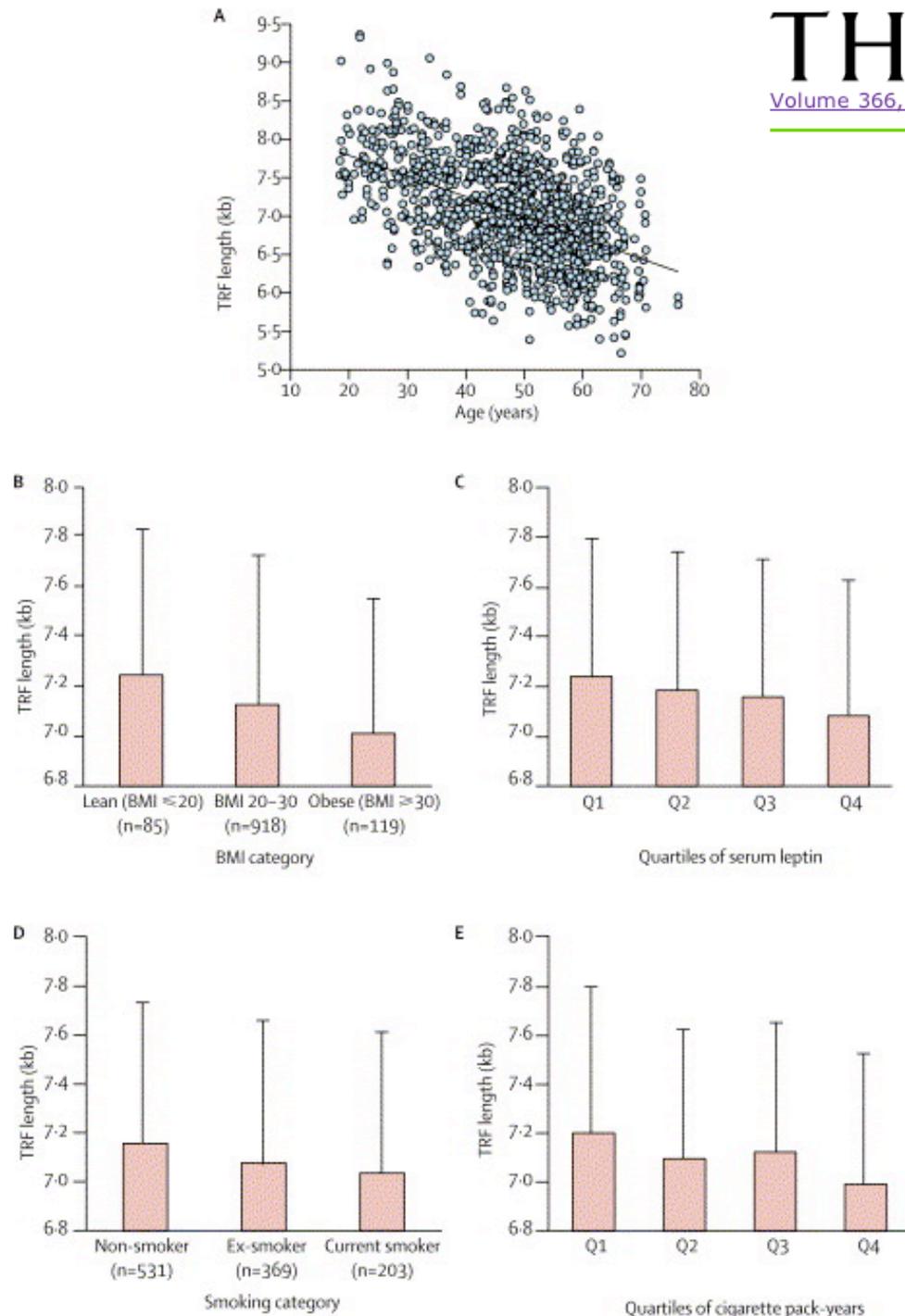
Fig 2 Scatterplot of annual rate of skin biopsy and incidence of melanoma for residents age 65 and older in each of nine US areas participating in Surveillance Epidemiology and End Results programme, 1986-2001

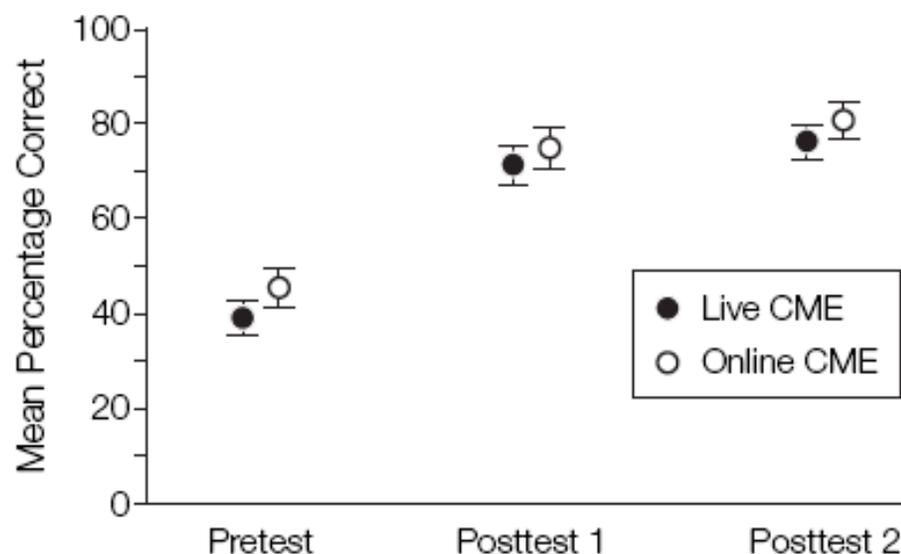bmj.com

Research Letters

Obesity, cigarette smoking, and telomere length in women

AM Valdes, et al., ,

Figure. Relation between telomere length and (A) age, (B) BMI, (C) leptin, (D) smoking history, and (E) cigarette pack-years

Data for B-E are age-adjusted mean TRF with SD.

Figure 2. Knowledge Test Mean Estimates

Error bars represent the 95% confidence interval (CI) for mean percentage correct on a 39-item knowledge test. A repeated-measures analysis of variance revealed a significant increase in percentage correct between groups ($P=.03$) and across time ($P<.001$), but no interaction between group and performance across time ($P=.70$). CME indicates continuing medical education.

Comparison of the Instructional Efficacy of Internet-Based CME With Live Interactive CME Workshops

A Randomized Controlled Trial

JNCI

- Current Issue
- Past Issues
- Monographs
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  Information
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Highlights

Grade Inflation in Prostate Cancer
The Gleason score shift over the last decade
may be the result of a statistical artifact.
FREE: Stage Migration and Grade Inflation in
Prostate Cancer: Will Rogers Meets Garrison
Keillor

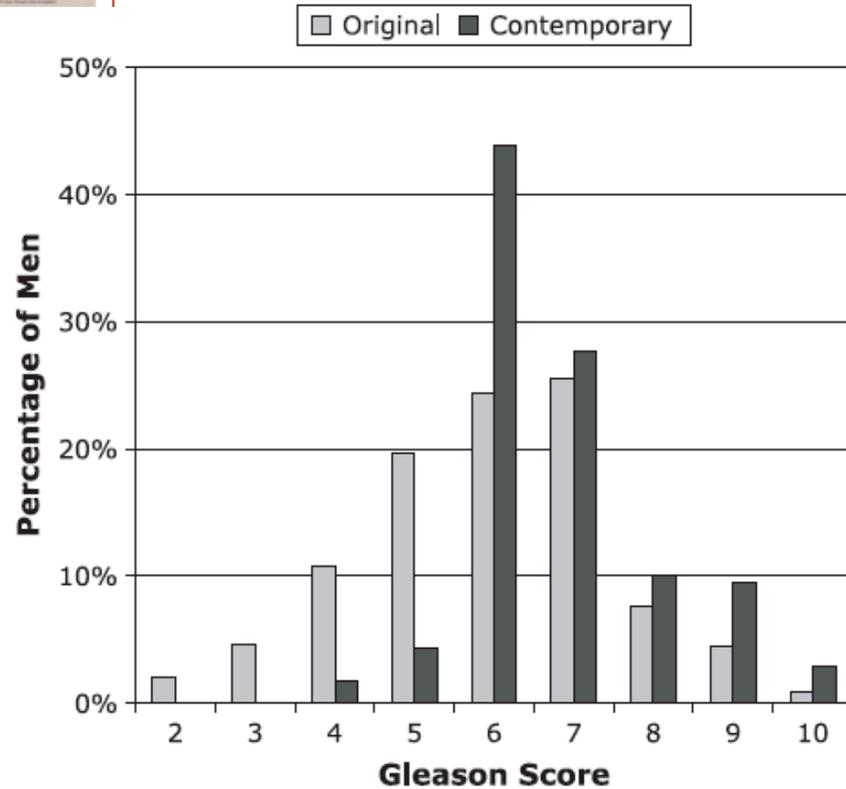**Distribution of Gleason scores**

Fig. 1. Distribution of the original and contemporary Gleason score readings for the 1858 men for whom both prostate biopsy specimen readings were available.