Making Headlines – Examining the News Media Supply Chain

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May 16, 2016
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The JAMA Network
The JAMA Network

- JAMA
- Archives of Dermatology
- Archives of Facial Plastic Surgery
- Archives of General Psychiatry
- Archives of Internal Medicine
- Archives of Neurology
- Archives of Ophthalmology
- Archives of Otolaryngology—Head & Neck Surgery
- Archives of Pediatrics & Adolescent Medicine
- Archives of Surgery

- JAMA
- JAMA Dermatology
- JAMA Facial Plastic Surgery
- JAMA Psychiatry
- JAMA Internal Medicine
- JAMA Neurology
- JAMA Ophthalmology
- JAMA Otolaryngology—Head & Neck Surgery
- JAMA Pediatrics
- JAMA of Surgery
- JAMA Oncology (2015)
- JAMA Cardiology (2016)
# 2015 Media “Hits”* for JAMA/JAMA Network

<table>
<thead>
<tr>
<th>Journal</th>
<th>2015</th>
<th>2014</th>
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<tr>
<td><strong>JAMA</strong></td>
<td>66,935</td>
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<td>JAMA Internal Medicine</td>
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<tr>
<td>JAMA Facial Plastic Surgery</td>
<td>1,370</td>
<td>752</td>
</tr>
</tbody>
</table>

**Cision: mention of the journal names in print, online and broadcast**

JAMA: New York Times – 79; WSJ – 43; USA Today – 22

JAMA Internal Medicine: New York Times – 26; WSJ – 14; USA Today - 8
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“Doctors in practice need to have research reports available in full detail before they can advise patients about the reports’ conclusions…. For the media, the embargo creates a ‘level playing field,’ which most reporters and writers appreciate since it minimizes the pressure on them to publish stories before competitors when they have not had time to prepare carefully. Consistency in the timing of public release of biomedical information is also important in minimizing economic chaos, since some articles contain information that has potential to influence financial markets.”

In addition to the PDF of the full article scheduled for publication, The JAMA Network provides a News Release and may provide video, audio and/or images. All of this material is subject to the embargo and is furnished exclusively for use in coverage of JAMA Network articles, and for no other purpose.

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Representatives of industry including pharmaceutical companies or device manufacturers
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Publications or websites supported by industry, including patient advocacy groups
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**JAMA**

**NEWS RELEASE**

**Individual-Risk-Based Model to Select Smokers For CT Lung Cancer Screening May Prevent More Deaths**

**JAMA**  Embargoed Until May 15, 2016 (11:00 am CT)

- [News Release](#)
- [Article PDF (Original Investigation)](#)
- [Article PDF (Editorial)](#)

**NEWS RELEASE**

**Endobronchial Coils Provide Modest Improvement in Exercise Tolerance for Patients With Severe Emphysema**

**JAMA**  Embargoed Until May 15, 2016 (11:00 am CT)

- [News Release](#)
- [Article PDF (Original Investigation)](#)

**NEWS RELEASE**

**Use of Aspirin Does Not Reduce Development of ARDS Among At-Risk Patients**

**JAMA**  Embargoed Until May 15, 2016 (4:15 pm CT)

- [News Release](#)
- [Article PDF (Original Investigation)](#)
- [Article PDF (Editorial)](#)
Individual-Risk-Based Model to Select Smokers For CT Lung Cancer Screening May Prevent More Deaths

EMBARGOED FOR RELEASE: 12:00 P.M. (ET) SUNDAY, MAY 15, 2016

Media Advisory: To contact Hormuzd A. Katki, Ph.D., or Anil K. Chaturvedi, Ph.D., call the NCI Press Office at 301-496-6641 or email ncipressofficers@mail.nih.gov. To contact editorial author Michael K. Gould, M.D., M.S., email Sandra Hernandez-Millet at sandra.d.hernandez-millet@kp.org.

To place electronic embedded links to these papers in your story. These links will be live at the embargo time:

Among a group of U.S. ever-smokers age 50 to 80 years, application of an individual-risk-based model for computed tomography (CT) screening for lung cancer compared with selecting risk-factor-based subgroups for screening (such as current U.S. Preventive Services Task Force recommendations) was estimated to be associated with a greater number of lung cancer deaths prevented over 5 years, according to a study published online by JAMA. The study is being released to coincide with its presentation at the American Thoracic Society International Conference.

Lung cancer is the most common cause of cancer death in the United States. The U.S. Preventive Services Task Force (USPSTF) recommends CT lung cancer screening for ever-smokers age 55 to 80 years who have smoked at least 30 pack-years with no more than 15 years since quitting. Selecting individuals at highest lung cancer risk, as determined by individual risk calculations (i.e., risk-based selection) may be more effective than using risk factors alone to identify those most likely to benefit from screening, according to researchers from the University of California, Los Angeles, and the University of California, Irvine.

JAMA
Original Investigation
Development and Validation of Risk Models to Select Ever-Smokers for CT Lung Cancer Screening
 расположен на странице 1 из 1
JAMA Report Videos

The following are JAMA Report videos made publicly available once the related article in JAMA has published.

2016

May 17, 2016
Surrogate Decision Makers for Critically Ill Patients Often Have Overly Optimistic Expectations

Video Script | Related News Release

May 09, 2016
Lowering Prescription Drug Costs Using Similar, Cheaper Alternatives

Video Script | Related News Release
Download This Video | Watch on Youtube

May 04, 2016
Better Telephone C-P-R Instruction Improves Outcomes after Cardiac Arrest

Video Script | Related News Release
Download This Video | Watch on Youtube

2015

2014
Therapeutic substitution is a practice that replaces chemically different compounds within the same class of medications for one another. A new study examined how using this practice could save money on prescription drug costs.

Researchers from the Ohio State University reviewed records of more than 107,000 patients between 2010 and 2012 and looked at their prescription drug use and estimated how much money could be saved using therapeutic substitution.
http://broadcast.jamanetwork.com/

Concussion JAMA Report
Altmetric Score – Top 100 of 2015

Autism Occurrence by MMR Vaccine Status Among US Children With Older Siblings With and Without Autism

Published in JAMA – April 2015

WHAT'S THE STORY?
This study was covered by several news outlets and science blogs, most of which featured headlines such as "No link between MMR and autism, major study concludes." The Guardian wrote that this research involving a cohort of 95,000 children is "the latest research to contradict findings of discredited gastroenterologist Andrew Wakefield." Read more on the Altmetric blog.

AUTHORS
Anjali Jain, Jaclyn Marshall, Ami Buxkova, Tim Bancroft, Jonathan P. Kelly, (more)

INSTITUTIONS
Drexel University, Optum (United States), The Lewin Group

COUNTRIES
United States

SUBJECT AREA
Medical & Health Sciences
Caring for the Critically Ill Patient

The Third International Consensus Definitions for Sepsis and Septic Shock (Sepsis-3) [FREE]

Mervyn Singer, MD, FRCP1; Clifford S. Deutschman, MD, MS2; Christopher Warren Seymour, MD, MSc3; Manu Shankar-Hari, MSc, MD, FFICM4; Djillali Annane, MD, PhD5; Michael Bauer, MD6; Rinaldo Bellomo, MD7; Gordon R. Bernard, MD8; Jean-Daniel Chiche, MD, PhD9; Craig M. Coopersmith, MD10; Richard S. Hotchkiss, MD11; Mitchell M. Levy, MD12; John C. Marshall, MD13; Greg S. Martin, MD, MSc14; Steven M. Opal, MD15; Gordon D. Rubenfeld, MD, MS15,16; Tom van der Poll, MD, PhD17; Jean-Louis Vincent, MD, PhD18; Derek C. Angus, MD, MPH19,20

[+] Author Affiliations


ABSTRACT

ABSTRACT | INTRODUCTION | THE PROCESS OF DEVELOPING NEW DEFINITIONS | ISSUES ADDRESSED BY THE TASK FORCE | IDENTIFIED CHALLENGES AND OPPORTUNITIES | A NEED FOR SEPSIS DEFINITIONS FOR THE PUBLIC AND FOR HEALTH CARE PRACTITIONERS | RESULTS/RECOMMENDATIONS | RECOMMENDATIONS FOR ICD CODING AND FOR LAY DEFINITIONS | CONTROVERSIES AND LIMITATIONS | IMPLICATIONS | CONCLUSIONS | ARTICLE INFORMATION | REFERENCES

Related Content

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Editorial
New Definitions for Sepsis and Septic Shock:
Continuing Evolution but With Much Still to Be Done
The Association Between Income and Life Expectancy in the United States, 2001-2014

Raj Chetty, PhD; Michael Stepner, BA2; Sarah Abraham, BA2; Shelby Lin, MPhil3; Benjamin Scuder, BA4; Nicholas Turner, PhD3; Augustin Bergeron, MA4; David Cutler, PhD4

Abstract

Importance  The relationship between income and life expectancy is well established but remains poorly understood.

Objectives  To measure the level, time trend, and geographic variability in the association between income and life expectancy and to identify factors related to small area variation.

Design and Setting  Income data for the US population were obtained from 1.4 billion deidentified tax records between 1999 and 2014. Mortality data were obtained from Social Security Administration death records. These data were used to estimate race- and ethnicity-adjusted life expectancy at 40 years of age by household income percentile, sex, and geographic area, and to evaluate factors associated with differences
Prevalence of Inappropriate Antibiotic Prescriptions Among US Ambulatory Care Visits, 2010-2011

Katherine E. Fleming-Dutra, MD1; Adam L. Hersh, MD, PhD2; Daniel J. Shapiro3; Monina Bartoces, PhD1; Eva A. Enns, PhD1; Thomas M. File Jr, MD2; Jonathan A. Finkelstein, MD, MPH1; Jeffrey S. Gerber, MD, PhD2,4; David Y. Hyun, MD2; Jeffrey A. Linder, MD, MPH1; Ruth Lynfield, MD1; David J. Margolis, MD, PhD2; Larissa S. May, MD, MSPH2; Daniel Merenstein, MD3; Joshua P. Metlay, MD, PhD1; Jason G. Newland, MD, MED15; Jay F. Piccirillo, MD16; Rebecca M. Roberts, MS1; Guillermo V. Sanchez, MPH, PA-C1; Katie J. Suda, PharmD, MS17; Ann Thomas, MD, MPH16; Teri Moser Woo, PhD18; Rachel M. Zetts5; Lauri A. Hicks, DO1

ABSTRACT

Importance The National Action Plan for Combating Antibiotic-Resistant Bacteria set a goal of reducing inappropriate outpatient antibiotic use by 50% by 2020, but the extent of inappropriate outpatient antibiotic use is unknown.

Prevalence of Inappropriate Antibiotic Prescriptions Among US Ambulatory Care Visits, 2010-2011

Overview of attention for article published in JAMA: Journal of the American Medical Association, May 2016

Title: Prevalence of Inappropriate Antibiotic Prescriptions Among US Ambulatory Care Visits, 2010-2011
Published in: JAMA: Journal of the American Medical Association, May 2016
DOI: 10.1001/jama.2016.4151
Pubmed ID: 27139059
Authors: Katherine E. Fleming-Dutra, Adam L. Hersh, Daniel J. Shapiro, Monina Bartoces, Eva A. Enns, Thomas...
Abstract: The National Action Plan for Combating Antibiotic-Resistant Bacteria set a goal of reducing...

Twitter Demographics: The data shown below were collected from the profiles of 533 tweeters who shared this research output. Click here to find out more about how the information was compiled.
AHCJ Chicago: JAMA Editor-in-Chief Dr. Howard Bauchner

Join the Chicago chapter of AHCJ on Thursday, Nov. 15, to meet JAMA Editor-in-Chief Dr. Howard Bauchner. He'll be ready to talk with us about the election and what the voting outcome means for health care, the path of health care reform, changes ahead for The JAMA Network and the state of medical journals.

WHEN: Nov. 15
6 to 8 p.m.
(6 p.m. refreshments, 6:30 p.m. program start)

WHERE: JAMA editorial office
American Medical Association
515 N State St.
Chicago
(CTA Red Line to Grand)

Thanks to Jann Ingmire and The JAMA Network for helping organize and host this event!