Racial Disparities in Pain Management for Appendicitis

Appendicitis is the most common surgical cause of abdominal pain seen in the emergency department, and the provision of analgesia to patients with appendicitis is encouraged. Goyal and colleagues used a national sample to evaluate racial differences in analgesia administration, and particularly opioid administration, among children diagnosed as having appendicitis. Black children were 80% less likely to receive opioid analgesia than white patients. In their editorial, Fleegler and Schechter discuss the available strategies to address this disparity in health care.

Traditional Cigarette Use After e-Cigarette Use in Young People

Adolescents and young adults who have never smoked traditional cigarettes are now using electronic cigarettes (e-cigarettes). Primack and colleagues seek to determine whether baseline use of e-cigarettes among a national sample of nonsmoking and nonsusceptible adolescents and young adults was associated with progression to cigarette smoking. Use of e-cigarettes at baseline was associated with progression to traditional cigarette smoking over the 1-year follow-up period. Klein’s accompanying editorial discusses the evidence that e-cigarettes are harmful and should be regulated.

Metformin Use and Child and Adolescent Height

In addition to improving glycemic control, metformin use can cause modest weight reductions in adults with type 2 diabetes mellitus or prediabetes and is gaining increasing use among adolescents. In this meta-analysis of 10 randomized clinical trials, Kuzik and colleagues examine the effects of metformin use on the height of participants younger than 19 years. Stratified analyses according to the cumulative metformin dose showed a greater increase in height with metformin use in the 5 studies providing the largest cumulative metformin doses but not in the 5 studies providing the lowest doses compared with the control group. Compared with control treatment, metformin use also has a modest effect of decreasing body mass index, which should be interpreted to reflect not only decreased body mass or adiposity, but also increased height.

Adolescent SBIRT Implementation in Primary Care

Multiple national and international organizations endorse Screening, Brief Intervention, and Referral to Treatment (SBIRT) delivered in primary care as an effective approach for substance abuse; however, it has not been widely implemented in pediatric primary care. Sterling and colleagues conduct a cluster, randomized trial in which pediatricians were randomized to either a pediatrician-delivered SBIRT, a behavioral health clinician embedded in the practice, or care as usual. Both intervention arms had better screening, assessment, and brief intervention rates than usual care. Patients in the pediatrician-only and usual care arms had higher odds of being referred to specialty treatment than those in the embedded behavioral health clinician arm, suggesting lingering barriers to having pediatricians fully address substance use in primary care.