

Association of fried food consumption with all-cause, cardiovascular and cancer mortality

The objective of this study was to examine the prospective association of total and individual fried food consumption with all-cause and cause-specific mortality in women in the US.

Data was obtained from the Woman's Health Initiative conducted in 40 clinical centres in the US. Over 100,000 postmenopausal women aged 50–79 were enrolled and followed for over 20 years.

Frequent consumption of fried foods, especially fried chicken and fried fish/shellfish, was associated with a higher risk of all-cause and cardiovascular mortality in women in the US.

No association with cancer mortality was discovered.

BMJ 2019; 364:5420

Chlorhexidine versus routine bathing to prevent multidrug-resistant organisms and all-cause bloodstream infections in general medical and surgical units

Universal skin and nasal decolonisation reduces multidrug-resistant pathogens and bloodstream infections in intensive care units. The effect of universal decolonisation on pathogens and infections in non-critical care units is unknown.

This trial involved patients in 194 non-critical care units in 53 hospitals in the US. The hospitals were randomised to either routine care or daily chlorhexidine bathing for all patients plus mupirocin for known MRSA carriers.

The researchers report that decolonisation with universal chlorhexidine bathing and targeted mupirocin for MRSA carriers did not significantly reduce multidrug-resistant organisms in non-critical care patients.

Lancet 2019; 393:1205–15

A randomised trial of e-cigarettes versus nicotine-replacement therapy

E-cigarettes are commonly used in attempts to stop smoking, but evidence is limited regarding their effectiveness as compared with that of nicotine products approved as smoking-cessation treatments.

In this trial 886 participants were randomised to either e-cigarettes or nicotine-replacements of their choice. The latter included patch, gum, lozenge, nasal spray, inhalator, mouth spray, mouth strip and microtabs. Both groups received weekly behavioural support for at least four weeks during the three-month trial. The one-year abstinence rate was 18% in the e-cigarette group and 9.9% in the nicotine-replacement group.

The conclusion reached was that e-cigarettes were more effective for smoking cessation than nicotine-replacement therapy, when both products were accompanied by behavioural support.

An editorial commentary on this paper suggests that research on the health consequences of long-term e-cigarette use is needed.

N Engl J Med 2019; 380:629–37 and *NEJM* 2019; 380:678–9

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<http://www.nzma.org.nz/journal/read-the-journal/all-issues/2010-2019/2019/vol-132-no-1497-21-june-2019/7921>
