

Briefs: Heat, violence linked; new medical tools; safe city life

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RATINGS OF PLASTIC SURGERY PATIENTS NOT SO FLATTERING Patients who have facial plastic surgery often assume they will look younger and more appealing. But a new study, the first to try to quantify attractiveness after a facelift, brow-lift or eyelid surgery, suggests only a tiny increase in attractiveness.

The study, published online in *JAMA Facial Plastic Surgery*, found patients looked, on average, only three years younger to independent viewers who assessed photos. The findings are unlikely to provide much comfort to the more than 120,000 U.S. men and women who had a facelift last year.

For the study, 50 raters looked at randomly assigned binders containing photographs of 49 patients, ages 42 to 73, who had undergone cosmetic procedures. No raters saw both pre- and post-operative shots of the same person.

Before surgery, the raters estimated patients' ages to be about 2.1 years younger, on average, than their chronological age. After surgery, the average rating was 5.2 years younger, an overall difference of 3.1 years, with minimal changes in attractiveness.

Dr. A. Joshua Zimm, lead author of the study and a facial plastic surgeon at Lenox Hill Hospital, was surprised by the "insignificant finding for attractiveness." He suggested that future research would "show a difference in attractiveness, if we have a larger sample size and just analyze attractiveness alone."

– Catherine Saint Louis, *The New York Times*

STUDY FINDS LINK BETWEEN RISING HEAT AND VIOLENCE

As the world gets warmer, people are more likely to get hot under the collar, scientists say. A massive new study finds that aggressive acts like committing violent crimes and waging war become more likely with each added degree.

Researchers analyzed 60 studies on historic empire collapses, recent wars, violent crime rates in the United States, lab simulations that tested police decisions on when to shoot and even cases where pitchers threw

deliberately at batters in baseball. They found a common thread over centuries: Extreme weather — very hot or dry — means more violence.

“When the weather gets bad we tend to be more willing to hurt other people,” said economist Solomon Hsiang of the University of California, Berkeley, lead author of the study, published online by the journal *Science*.

— *Seth Borenstein, The Associated Press*

MANY NEW MEDICAL TOOLS FAIL TO SURPASS OLD ONES

We usually assume new medical procedures and drugs are adopted because they are better. But an analysis has found that many new techniques and medicines are either no more effective than the old ones, or worse.

Moreover, many doctors persist in practices that have been shown to be useless or harmful.

Scientists reviewed each issue of *The New England Journal of Medicine* from 2001 through 2010 and found 363 studies examining an established clinical practice. In 146 of them, the currently used drug or procedure was found to be no better, or even worse, than the one previously used. The report appeared in the August issue of *Mayo Clinic Proceedings*.

More than 40 percent of established practices studied were found to be ineffective or harmful, 38 percent beneficial, and the remaining 22 percent unknown. Among the practices found to be ineffective or harmful: routine use of hormone therapy in postmenopausal women; high-dose chemotherapy and stem cell transplant, a complex and expensive treatment for breast cancer no better than conventional chemotherapy; and intensive glucose-lowering in Type 2 diabetes patients in intensive care, which actually increased mortality.

Often doctors persist with procedures that lack evidence because they seem to make sense, said the lead author, Dr. Vinay Prasad, the chief fellow in medical oncology at the National Cancer Institute.

“They all sound good if you talk about the mechanisms,” Prasad said. Patients, too, “tend to gravitate toward the nuts and bolts — what does it do, how does it work?” he said. “But you shouldn’t ask how does it work but whether it works at all.”

— *Nicholas Bakalar, The New York Times*

YOUR SAFEST PLACE TO LIVE MIGHT BE THE BIG CITY

If you want to avoid death by injury, live in a large city: A new study has found that they are much safer than rural areas.

Researchers analyzed 1.3 million injury deaths in more than 3,000 counties nationwide from 1999 through 2006. They classified the counties on a 10-point urban-rural scale that distinguished counties both by population density and by proximity to metropolitan centers. The study was published online in *The Annals of Emergency Medicine*.

Injury death rates increased steadily as counties became more rural, to 73.76 per 100,000 population in the most rural counties compared with 49.72 in the most urban.

The most common causes of injury death overall were car crashes and gunshots, both of which increased as counties became more rural. But the risk for poisoning and fall-related injury death were lower in rural counties, and the risk for homicide was higher in urban centers.

“I hope that people begin to challenge the beliefs they hold about safety,” said the lead author, Dr. Sage R. Myers, an assistant professor of pediatrics at the University of Pennsylvania.

— *Nicholas Bakalar, The New York Times*
