

AFP Clinical Answers

Cardiovascular Disease, Fracture Healing, Anxiety in Children, Antibiotic Duration, Cervical Spine Injuries

Should primary care clinicians recommend low-dose aspirin for the primary prevention of cardiovascular disease in adults 60 years or older?

The U.S. Preventive Services Task Force (USPSTF) recommends against initiating low-dose aspirin (81 mg per day) for the primary prevention of cardiovascular disease in adults 60 years or older (D recommendation). The USPSTF recommends shared decision-making for the initiation of low-dose aspirin for the primary prevention of cardiovascular disease in adults 40 to 59 years of age with a 10% or greater risk of cardiovascular disease and without an increased risk of bleeding (C recommendation).

POEMS; November 2022

Do nonsteroidal anti-inflammatory drugs prevent or delay fracture healing when used for pain management?

The use of nonsteroidal anti-inflammatory drugs for more than three days at higher doses during the postoperative or acute phase of fracture healing may lead to increased rates of nonunion, delayed union, and pseudarthrosis in adults, based on multiple systematic reviews of randomized controlled trials, cohort studies, and case-control trials.

FPIN: NSAID Use and Effects on Bone Healing; November 2022

What is the preferred treatment for anxiety in children?

Cognitive behavior therapy and selective serotonin reuptake inhibitors are both effective therapies for anxiety in children. Combination treatment could be offered preferentially over cognitive behavior therapy or a selective serotonin reuptake inhibitor alone to patients six

to 18 years of age diagnosed with social anxiety disorder, generalized anxiety disorder, separation anxiety disorder, specific phobia, or panic disorder.

Anxiety Disorder in Children and Adolescents; December 2022

Does the use of procalcitonin and C-reactive protein levels to guide antibiotic use decrease antibiotic duration in hospitalized patients?

A meta-analysis showed a decreased duration of antibiotic use in hospitalized patients with sepsis or respiratory tract infections with the use of procalcitonin for guidance. Less research is available on the use of C-reactive protein for the same purpose.

POEMS; November 2022

When should a cervical spine injury be suspected in an athlete?

Any athlete who is not moving, whether conscious, unconscious, or with decreased consciousness, should be assumed to have a cervical spine injury until proven otherwise. While maintaining cervical spine stabilization, the log roll or lift and slide maneuver can be used to transfer an injured athlete onto a spine board.

Head and Neck Injuries; November 2022

Tip for Using AFP at the Point of Care

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