AFP Clinical Answers

RSV, Testosterone Therapy, Prenatal Medication Risk, Obstructive Sialadenitis, Conjunctivitis, Gout

Does a single intramuscular injection of nirsevimab (Beyfortus) reduce the likelihood of hospitalization for respiratory syncytial virus (RSV) in infants who do not meet criteria for receiving palivizumab?

Palivizumab is a monoclonal antibody given as a monthly injection during the winter to infants at high risk of RSV complications. A large industry-sponsored, randomized controlled trial showed that a single intramuscular dose of nirsevimab administered to average-risk infants during the winter reduced the likelihood of hospitalization due to RSV. Nirsevimab is less expensive than palivizumab and requires only a single dose.

Read more: Single Intramuscular Dose of Nirsevimab Reduces Likelihood of Hospitalization Due to RSV in Average-Risk Infants During First Year of Life [POEMs]; May 2024

What are the main benefits of testosterone replacement therapy for male hypogonadism?

Testosterone replacement therapy for male hypogonadism leads to modest improvements in sexual function and depressive symptoms. Patients with heart disease or high cardiovascular risk should be counseled that, despite mixed evidence, recent data show that testosterone replacement therapy does not appear to increase the risk of myocardial infarction, stroke, or cardiovascular death.

Read more: Testosterone Replacement Therapy for Male Hypogonadism; June 2024

Does prenatal exposure to lamotrigine, topiramate, or valproate increase rates of autism?

In a cohort study of more than 28,000 pregnant patients with a seizure disorder, use of lamotrigine was not associated with an increase in the diagnosis of autism spectrum disorder among offspring compared with no treatment during pregnancy. Use of topiramate was associated with an increase of about 2 percentage points, and use of valproate was associated with an increase of more than 6 percentage points.

Read more: Similar Rates of Autism With Lamotrigine, Topiramate, and No Treatment; Rate With Valproate Is Higher [POEMs]; July 2024

What is the recommended treatment for obstructive sialadenitis?

Sialagogues, massage, heat, and hydration are part of the initial conservative management of obstructive sialadenitis.

Read more: Salivary Gland Disorders: Rapid Evidence Review; June 2024

Does delayed antibiotic prescribing for acute bacterial conjunctivitis lead to worse therapeutic outcomes?

For acute bacterial conjunctivitis, delayed antibiotic prescribing resulted in similar symptom control as immediate prescribing while reducing antibiotic use by 50%.

Read more: Conjunctivitis: Diagnosis and Management; August 2024

Is a baseline serum urate level in adults with a history of gout accurate for predicting the risk of subsequent gout flare-ups?

According to a retrospective study from the United Kingdom that included 3,613 adult patients, in those with a history of gout, higher baseline serum urate levels were associated with an increased risk of subsequent gout flare-ups and rates of hospitalization for recurrent gout. Rates of acute gout flare-ups per 1,000 person-years were 10.6 for patients with baseline urate levels less than 6 mg per dL; 40.1 for levels 6.0 to 6.9 mg per dL; 82.0 for levels 7.0 to 7.9 mg per dL; 101.3 for levels 8.0 to 8.9 mg per dL; 125.3 for levels 9.0 to 9.9 mg per dL; and 132.8 for levels 10 mg per dL or greater.

Read more: Baseline Urate Level in Adults With History of Acute Gout Is Associated With the Risk of Subsequent Gout Flare-ups [POEMs]; June 2024

Tip for Using AFP at the Point of Care

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