

# AFP Clinical Answers

## Hemorrhoids, Tremor, *C. difficile* Infection, Migraine, Vitamin D Screening

### What are some recommended therapies for managing hemorrhoids?

Increasing fiber intake is an effective first-line, non-surgical treatment for hemorrhoids. Rubber band ligation is considered the preferred choice in the office-based treatment of grades I to III internal hemorrhoids because of effectiveness compared with other office-based procedures. Excisional (conventional) hemorrhoidectomy is effective for the treatment of grade III or IV, recurrent, or highly symptomatic hemorrhoids.

<https://www.aafp.org/afp/2018/0201/p172.html>

### What are some diagnostic considerations when evaluating tremors?

Patients with new-onset tremor should have a comprehensive review of medications (prescribed and over-the-counter), with specific attention to medications started before the onset of tremor. A resting tremor is usually caused by parkinsonism. Tremor in children is potentially serious; patients should be promptly referred to a neurologist.

<https://www.aafp.org/afp/2018/0201/p180.html>

### How effective are interventions to prevent and treat *C. difficile* infection?

Antibiotic stewardship and handwashing campaigns reduce *Clostridium difficile* infection without reported harms. Vancomycin has a higher initial cure rate than metronidazole, although the recurrence rate is equal between the two drugs. Fidaxomicin has a lower recurrence rate than vancomycin, although there is no difference in the initial cure rate. There is low strength, but consistent evidence that *Lactobacillus*, multiorganism probiotics, and fecal microbiota transplantation are effective in reducing *C. difficile* infection recurrence.

<https://www.aafp.org/afp/2018/0201/p196.html>

### How should acute migraine be treated?

Nonsteroidal anti-inflammatory drugs are a first-line treatment for mild to moderate migraine. The choice of medication should be based on availability and adverse effect profile. Triptans are a first-line treatment for moderate to severe migraine. Dopamine antagonist antiemetics are second-line treatments for migraine. Parenteral dihydroergotamine (DHE 45), magnesium sulfate, valproate (Depacon), and opioids should be reserved for refractory migraine because of adverse effects, weaker evidence of effectiveness, and/or abuse potential.

<https://www.aafp.org/afp/2018/0215/p243.html>

### Is vitamin D screening and supplementation recommended in asymptomatic adults?

There is insufficient evidence to recommend screening the general population for vitamin D deficiency. Routine vitamin D supplementation in community-dwelling adults is not recommended. Treating asymptomatic individuals with identified deficiency has not been shown to improve health. Potential harms of excessive vitamin D include nephrolithiasis, soft tissue calcification, and renal and cardiovascular damage.

<https://www.aafp.org/afp/2018/0215/p254.html>

#### Tip for Using AFP at the Point of Care

Looking for more information about vitamins and nutrients? You can find more in AFP's "Nutrition" collection at <https://www.aafp.org/afp/nutrition>. Check out more than 60 other collections in AFP By Topic at <https://www.aafp.org/afp/topics>. When you find your favorite topics click "Add to Favorites" to add them to your personal Favorites list.