



## Top news stories from AMA Morning Rounds®: Week of June 2, 2025



Read *AMA Morning Rounds®*' most popular stories in medicine and public health from the week of June 2, 2025–June 6, 2025.

### Exercise improves survival rates in patients with colon cancer, study finds

The AP (6/1, Johnson) reports a “first-of-its-kind international experiment showed” that a “three-year exercise program improved survival in colon cancer patients and kept disease at bay.” Researchers “followed 889 patients with treatable colon cancer who had completed chemotherapy.” Half of study participants received information promoting fitness and nutrition, while half “worked with a coach, meeting every two weeks for a year, then monthly for the next two years,” to discuss ways to increase their physical activity. Researchers observed that “after eight years, the people in the structured exercise program not only became more active than those in the control group but also had 28% fewer cancers and 37% fewer deaths from any cause. There were more muscle strains and other similar problems in the exercise group.” The study was featured Sunday at the American Society of Clinical Oncology’s annual meeting and published In The New England Journal of Medicine.

The New York Times (6/1, Agrawal) reports the study found that 80% “of patients in the exercise group remained disease-free after five years, compared to 74% of patients in the control group. After eight years, the exercise program had prevented one death for every 14 people who participated in the exercise arm of the study.” It is unclear “how exactly exercise reduces the new onset or recurrence of cancer,” especially considering “weight loss was the same between the two trial groups.” However, “researchers have long shown that exercise improves insulin sensitivity and reduces inflammation. The researchers collected blood samples and will analyze them to shed light on whether these factors might be driving the improved survival.”

*You may also be interested in: FIT test or colonoscopy? Catching colon cancer earlier.*

### Studies highlight increasing health risks for older patients who use cannabis

The New York Times (6/2, Span) reports that a “wave of recent research points to reasons for concern for older users, with cannabis-related emergency room visits and hospitalizations rising.” An analysis of national survey data published Monday in JAMA found that cannabis use within the past 30 days “jumped among adults over age 65, to 7% of respondents in 2023 from 4.8% in 2021.” Studies also show “climbing rates of older people seeking medical treatment for cannabis-related issues, both in outpatient settings and in hospitals.” For example, “cannabis-related emergency room visits in California by those over 65 rose, to about 395 per 100,000 visits in 2019, from 21 in 2005.” Meanwhile, a recent study published in JAMA Neurology found that older patients with cannabis-related conditions seeking care at emergency departments or being admitted to hospitals “had 1.5 times the risk of a dementia diagnosis within five years, and 3.9 times the risk for the general population.”

*You may also be interested in: Cannabis use and health: What physicians should know.*

## **Patient-led intervention may help adults with obesity maintain weight loss, study finds**

Healio (6/3, Monotra) reports a study found that “enrollment in a patient-delivered intervention allowed adults with overweight or obesity to better maintain weight loss than those receiving standard of care.” Researchers observed that “at 18 months, adults in the patient-provided intervention regained less body weight than those in the standard of care group (weight regain, 0.77 kg vs. 2.37 kg). Participants in the patient-provided intervention also had lower diastolic blood pressure at 18 months vs. standard of care (79.52 mm Hg vs. 80.5 mm Hg). Adults in the patient intervention group walked more steps per day (5,894.1 steps vs. 4,424.4 steps) and spent less time in sedentary behavior (9.14 hours per day vs. 9.89 hours per day) than those receiving standard of care.” Researchers concluded, “The patient-provided intervention model for sustained behavior change could also be effective for the maintenance of other health behaviors such as smoking cessation or physical activity for cardiac rehabilitation patients.” The study was published in JAMA Internal Medicine.

## **Calorie-restricted diets may be linked with depressive symptoms**

HealthDay (6/4, Gotkine) reports a study published in BMJ Nutrition, Prevention & Health found that “dietary patterns seem to be associated with depressive symptoms.” Researchers examined “National Health and Nutrition Examination Survey 2007 to 2018 data to examine the association between



restrictive dietary patterns and depressive symptoms stratified by sex and body mass index.” They observed that patients “adhering to calorie-restrictive diets had a 0.29-point increase in Patient Health Questionnaire-9 (PHQ-9) for depressive symptom severity scores compared with individuals not following a specific diet. Among individuals with overweight, calorie-restricted diets and nutrient-restricted diets were associated with a 0.46- and 0.61-point increase in PHQ-9 scores, respectively.” Furthermore, “compared with women not following a diet, men on a nutrient-restrictive diet had a 0.40-point increase in cognitive-affective symptom scores.”

## **Napping behaviors linked to increased mortality risk in middle-to-older age patients**

HealthDay (6/5, Thompson) reports a study presented at the American Academy of Sleep Medicine annual meeting suggests middle-aged people and seniors “with certain types of napping patterns have a greater risk of an early death.” Researchers analyzed data on more than 86,500 people with a median age of 63. These individuals “had their sleep habits monitored for a week using wrist devices, and researchers compared those habits to death records.” Researchers observed “an increased risk of premature death for: people who tended to take longer daytime naps, people whose napping patterns fluctuated frequently, and people who napped between 11 a.m. and 3 p.m.” The study was published in *Sleep*.

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