

## December 2008 Newsletter

**5<sup>th</sup> District Lowest US Life Expectancy:** Reported in the December 8<sup>th</sup> issue of Time Magazine (figure on page 43) is the sobering fact that the 5<sup>th</sup> Congressional district has the lowest life expectancy in the United States. This was also reported by the Washington Times, but missed by most newsmedia in Kentucky.

<http://www.washingtontimes.com/news/2008/jul/17/new-study-ranks-us-well-being/>

Kentucky ranks highest in smoking ( <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5542a2.htm> , <http://www.statehealthfacts.org/comparetable.jsp?ind=81&cat=2> ) and deaths from lung cancer in the United States with ( <http://www.cancer.org/downloads/STT/2008CAFFfinalsecured.pdf> ). According to a 2004 CDC report (Smoking-Attributable Mortality, Morbidity, and Economic Costs (SAMMEC)), the average number of deaths per year over the preceding five years attributed to smoking in Kentucky was 7848. [https://apps.nccd.cdc.gov/sammec/five\\_yr\\_sam.asp?year=2004&state=KY](https://apps.nccd.cdc.gov/sammec/five_yr_sam.asp?year=2004&state=KY)

In addition, Kentucky has a very high obesity rate and a physician shortage in many rural areas.

All of these factors combine to give the fifth congressional district a life expectancy below Mexico and China.

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**GAO Report on Medicare Advantage Organizations:** A GAO audit report released 12/8/2008 found that “profits and non-medical expenses were higher while medical expenses were lower than projected, on average”. “CMS further noted that MA organizations’ higher-than-projected profits were due primarily to higher-than-projected revenues from Medicare, and that the increase in revenues was at least partially due to higher-than-projected risk scores, reflecting enrollees who were deemed potentially more costly because of their health status.”

To view report <http://www.gao.gov/new.items/d09132r.pdf>

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**New Prophylactic Antibiotics for Surgery Initiative:** As many of you know there are standards for the delivery of preoperative antibiotics prior to surgery. However, not all surgeries require preoperative antibiotics. Some institutions are encouraging doctors to give blanket coverage of antibiotics to all surgical patients. Case in point was a 22 month old, 10 kg, child who was undergoing an adenotonsillectomy for severe upper airway obstruction. The child was allergic to Cephalosporins and had a possible cross reactivity to penicillin. The surgeon was encouraged to substitute either Clindamycin or Gentamycin. These antibiotics could also be used for head and neck surgery prophylaxis. The surgeon refused citing risks being too great for the child. The surgeon was reminded that compliance to this protocol was tracked for both the hospital and the doctor and is available online. Some patients are using these compliance rates to choose providers. After the case, further research found that not all head and necks cases require preoperative antibiotics. Table 6.6 of the Specifications Manual for Hospital Outpatient Department Quality Measures only lists jaw fractures and removal of esophagus pouch as qualifying head and neck surgeries.

One needs to remember that patients can develop complications from antibiotics and they should only be used when indicated. Blanket use of antibiotics may be successful in the prevention of infections in the short term but may foster greater antibiotic resistance in the future. This was observed in the mid 1990 with the use of prophylactic antibiotics for the treatment of refractory middle ear infections.

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**Health Watch USA 2009 Conference:** The Conference for Health Care Transparency and Patient Advocacy has been scheduled for Nov 13, 2009 at the Four Points Sheraton. The Conference Theme will be Health Care Reform. (Single Payer System—Universal Health Care vs. Consumer Driven – Free Enterprise System and other solutions.) Confirmed Speakers include:

Joycelyn Elders - Past US Surgeon General to present on Healthcare Reform.

Nadeem Esmail - The director of health-system performance studies at the Fraser Institute, an independent international research and educational organization with offices in the US and Canada. The Frazier Institute has published critical analysis of the Canadian Health care system and has generated data regarding access problems in the Canadian Healthcare System. <http://www.fraserinstitute.org/>

Garrett Adams, MD, MPH - Will provide a speaker from the Physicians for a National Health Program to make the case for a single-payer system.

Please reserve this date,

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