



# Health Watch USA<sup>sm</sup> Newsletter

[www.healthwatchusa.org](http://www.healthwatchusa.org) Nov. 20, 2013

Member of the National Quality Forum and a designated "Community Leader" for Value-Driven Healthcare by the U.S. Dept. of Health and Human Services



## **The Lancet Infections Disease Commission - Antibiotic Resistance-- The need for global solutions.**

"A global system for surveillance of antibiotic use and resistance and its health and economic burden is urgently needed."

"Studies in the EU and USA provide some data, but need to be scaled up worldwide, and the results from such data collection and analysis should be communicated to decision makers, prescribers, dispensers, and the general public. Likewise, a global surveillance system for antibiotic resistance, including outbreak reporting and an early warning system to detect new resistance mechanisms and their global spread, is still lacking, despite the obvious need of such a system and several proposals for potential models.<sup>384,385</sup> Absence of essential local epidemiological data also leads to delayed or suboptimum revisions of treatment guidelines, thereby driving the vicious circle of injudicious empirical use of antibiotics by prescribers based on anecdotal evidence or experience without a firm evidence base."

Read Full Report: [http://www.cddep.org/sites/cddep.org/files/publication\\_files/antibioticresistance.pdf](http://www.cddep.org/sites/cddep.org/files/publication_files/antibioticresistance.pdf)

## **HW USA Commentary (Antimicrobial Agents and Chemotherapy): A Perspective on How the United States Fell Behind Northern Europe in the Battle Against Methicillin Resistant Staphylococcus Aureus -- Journal of Antimicrobial Agents and Chemotherapy.**

This commentary reviews the major papers regarding MRSA Surveillance published over the last decade and the decision making which led to the abandonment of surveillance as an essential component to control the MRSA epidemic. "In view of the severity of the multi-resistant drug organism epidemic in the United States, a reevaluation of setting standards of care for the expanded and uniform use of MRSA active surveillance testing should be undertaken."

<http://aac.asm.org/content/57/12/5789.full.pdf>

## **Blog Posting by the American Council on Science and Health on HW USA's Commentary on the History of MRSA**

ACSH: "Our (United States) MRSA rates are 30-65%. While it remains controversial as to whether this particular approach is responsible for the low rates in Northern Europe and our more relaxed approach resulted in the higher rates here, it is clear that it was easier and cheaper to ignore the European approach. Sometimes you get what you pay for."

<http://acsh.org/2013/11/antibiotic-crisis-government-possibly-screw-worse/>

# House Bill 2285 on "the Strategies to Address Antimicrobial Resistance (STAAR) Act

The bill will provide authority for the for the Federal Government To:

- "Reauthorizing the Antimicrobial Resistance Task Force, establishing an Advisory Board of outside experts and designating an Antimicrobial Resistance Office in the Department of Health and Human Services whose director will coordinate government efforts to combat antimicrobial resistance;
- Building upon existing National Institutes of Health (NIH) efforts by creating an antimicrobial resistance strategic research plan and codifying the Clinical Trials Network on Antibacterial Resistance;
- Enhancing CDC's intramural and extramural programs by authorizing the, Antimicrobial Resistance Surveillance and Laboratory Network and additional efforts to intensify, strengthen, and expand the national capacity to prevent the transmission of resistant infections and the development of resistance;
- Intensifying and expanding current efforts to collect antimicrobial resistance and use data;
- Focusing existing demonstration authority to encourage more appropriate use of existing antibiotics; and
- Developing and testing quality measures on antimicrobial use."

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## Tort Reform is Not A Substitute for Healthcare Reform

Read the HW USA Study in the Journal of Patients Safety which presents data on Tort Reform and Medicare Expenditures.  
[http://www.healthwatchusa.org/HWUSA-Publications/PDF-Downloads/20131009The\\_Relationship\\_Between\\_Tort\\_Reform\\_and\\_Medical.99809.pdf](http://www.healthwatchusa.org/HWUSA-Publications/PDF-Downloads/20131009The_Relationship_Between_Tort_Reform_and_Medical.99809.pdf)

## New Guidelines Dramatically Increase the Number of Recommended Individuals to Receive Statins to Lower Cholesterol

The recommendations are from the American Heart Association and the American College of Cardiology. (Be sure to read the next reference on possible flaws in Methodology)

Washington Post: "The new recommendations call for prescribing statins to an estimated 33 million Americans who don't have cardiovascular disease but who have a 7.5 percent or higher risk for a heart attack or stroke over the next decade."



"Roger Blumenthal, director of the Ciccarone Preventive Cardiology Center at Johns Hopkins University, said about 50 or 60 percent of African American men and a third of white men in their 50s probably will qualify for treatment under the new regime."

[http://www.washingtonpost.com/national/health-science/new-guidelines-could-have-far-more-americans-taking-statin-drugs-for-cholesterol/2013/11/12/7f249318-4be4-11e3-be6b-d3d28122e6d4\\_story.html](http://www.washingtonpost.com/national/health-science/new-guidelines-could-have-far-more-americans-taking-statin-drugs-for-cholesterol/2013/11/12/7f249318-4be4-11e3-be6b-d3d28122e6d4_story.html)

## **However The Risk/Statin Calculator Recommendation's Methodology May Be Flawed.**

New York Times: "But, in a major embarrassment to the health groups, the calculator appears to greatly overestimate risk, so much so that it could mistakenly suggest that millions more people are candidates for statin drugs. "

[www.nytimes.com/2013/11/18/health/risk-calculator-for-cholesterol-appears-flawed.html](http://www.nytimes.com/2013/11/18/health/risk-calculator-for-cholesterol-appears-flawed.html)

## **Johnson and Johnson Said to Agree to Settlement Which Could Reach 4 Billion Dollars on Hip Implants**

[http://www.nytimes.com/2013/11/13/business/johnson-and-johnson-said-to-agree-to-4-billion-settlement-over-hip-implants.html?emc=edit\\_tnt\\_20131113](http://www.nytimes.com/2013/11/13/business/johnson-and-johnson-said-to-agree-to-4-billion-settlement-over-hip-implants.html?emc=edit_tnt_20131113)

## **Univ. of Iowa medical official ordered to pay for error**

SFGATE: "A senior University of Iowa medical official has been ordered to pay \$183,000 for unfairly revoking the clinical privileges of a subordinate doctor — and taxpayers will have to foot the bill."

<http://www.sfgate.com/business/energy/article/U-iowa-medical-official-ordered-to-pay-for-error-4985436.php>

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## **Medicare Announces Payment Reductions for 1451 Hospitals and Rate Increases to 1231 Hospitals**

Fierce Healthcare: <http://www.fiercehealthcare.com/story/more-losers-winners-medicares-value-based-purchasing-program/2013-11-15>

NPR: <http://www.npr.org/blogs/health/2013/11/15/245254951/medicare-penalizes-nearly-1-500-hospitals-for-poor-quality-scores>

## **Medicare Value Based Payment System is Explained**

Kaiser Health News: <http://www.kaiserhealthnews.org/Stories/2013/November/14/value-based-purchasing-medicare-methodology.aspx#>

## **Hospital Sticker Prices Are Driving Up Outlier Medicare Payments**

Fierce Healthcare: "The vast majority of hospitals received outlier payments--supplemental payments meant to offset unusually high-cost patient-care cases--and some received a much larger proportion of

their Medicare Inpatient Prospective Payment System (IPPS) reimbursements from these payments..."  
<http://www.fiercehealthcare.com/story/oig-hospital-prices-driving-outlier-payments/2013-11-14>

### **Americans More Likely To Put Off Healthcare Due To Costs**

Commonwealth Fund: [http://www.cbsnews.com/8301-204\\_162-57612233/health-care-money-woes-more-common-in-u.s-than-other-high-income-nations/](http://www.cbsnews.com/8301-204_162-57612233/health-care-money-woes-more-common-in-u.s-than-other-high-income-nations/)

### **Value-Based Health Care Is Inevitable and That's Good**

Harvard Business Review: "We all know that U.S. health care is too expensive, too inefficient, and the quality is too varied. The goal of value-based care is to fix that."

<http://blogs.hbr.org/2013/09/value-based-health-care-is-inevitable-and-thats-good/>

### **US Healthcare Outcomes are Down, Spending is Up**

"US health care employed 15.7% of the workforce, with expenditures of \$2.7 trillion, doubling since 1980 as a percentage of US gross domestic product (GDP) to 17.9%."

<http://jama.jamanetwork.com/article.aspx?articleid=1769890>

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