



Health Watch USAsm Newsletter

www.healthwatchusa.org Mar. 22, 2014

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

Study Designed to Control MRSA had Important Changes in Metrics:

"We feel that if the practice of not reporting, eliminating or adding metrics after trial initiation by researchers stating that they did not analyze or look at the data became widespread, the effectiveness and utility of trial registration would be negated and the system would become next to useless."

(Click on Picture To Enlarge)

Reply to "Planned Analyses of the REDUCE MRSA Trial" Kevin T. Kavanagh, Daniel M. Saman and Yanling Yu Antimicrob.

Agents Chemother. 2014, 58(4):2486. DOI: 10.1128/AAC.02821-13.

[http://www.healthwatchusa.org/HWUSA-Publications/PDF-Downloads/20140318-Antimicrob Agents Chemother-2014-Kavanagh-2486-7.pdf](http://www.healthwatchusa.org/HWUSA-Publications/PDF-Downloads/20140318-Antimicrob%20Agents%20Chemother-2014-Kavanagh-2486-7.pdf)

The screenshot shows a table comparing 'Before' (Updated 2011-05-20) and 'After' (Updated 2012-06-19) study details. Key changes include the addition of 'ESKA-emulsified Al-quinapril (Brodurex)' as a treatment and updates to the inclusion and exclusion criteria.

Before (Updated 2011-05-20)	After (Updated 2012-06-19)
Inclusion	Inclusion
Exclusion	MRSA Bloodstream infection
Outcome	Outcome
Sample	Sample
Results	Results
Published	Published
Study type	ESKA-emulsified Al-quinapril (Brodurex)
Allocation	Allocation
Interventions	Interventions
Design	Design
Recruitment	Recruitment
First received	First received
Last updated	Last updated
Postmarket	Postmarket
Published date	Published date
Study ID	Study ID
URL	URL

Kentucky step closer to requiring hospitals to report superbugs

A health watchdog group fighting to reduce superbug infections is in talks with Kentucky health officials, hoping to hammer out rules that would require hospitals and nursing homes to report cases of the dangerous bacteria CRE to the state.

<http://www.courier-journal.com/article/20140314/BUSINESS/303140096/Kentucky-step-closer-requiring-hospitals-report-superbugs>

Bloodstream Infections in Community Hospitals

The mortality rate for these infections is 35%, and this study found that one in three were treated with inappropriate empiric antibiotics. Here are some more statistics: The three most common pathogens were Staph Aureus 28%, E. Coli 24% and Coagulase-Negative Staphylococci 10%.

Healthcare Associated 71%
-- Community Onset 56%
-- Hospital Onset 15%
Community Acquired 29%

<http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0091713>

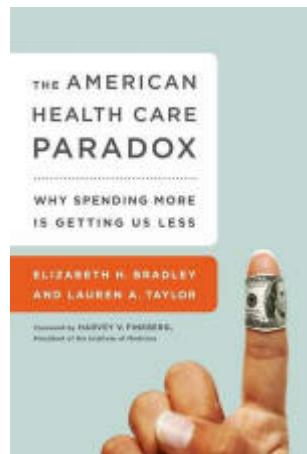
CRE Can Survive Weeks to Months on Dry Surfaces

<http://www.micro-blog.info/2014/03/cre-can-survive-on-dry-surfaces-for-longer-than-you-may-expect/>

Routine Cleaning of Stethoscope Needed After Each Clinical Use.

MRSA and total bacterial count high on diaphragm of the stethoscope, which is higher than anywhere else on the physician's hands except the fingertips.

<https://www.youtube.com/watch?v=l7glVHaTo2c>



The Healthcare Paradox -- Book Review

"The Institute of Medicine estimates that one in three dollars (\$750 billion) spent in the U.S. is on unnecessary treatment. The issue of overutilization is so pervasive that, the American Board of Internal Medicine and over 50 medical specialty societies have established a Choosing Wisely Campaign which is designed to lower unnecessary tests and procedures."

<http://www.courier-journal.com/article/20140313/FEATURES06/303130092/Book-review-American-Health-Paradox->

A Very Interesting Quote With Implications On Medical Overuse

" Citing studies of waste in the healthcare system, Kennedy said as much as 50% of the care delivered by healthcare providers is not backed by evidence of whether the drug or treatment administered will help or hurt the patient. Given that, the best way to make healthcare affordable is "by eliminating the care that has no value," Kennedy said. "The question is, how do you do that in a way that allows delivery systems to be financially stable?" "

From: Carr DF. Aetna's Accountable Care Chief: Tough Transition Ahead. InformationWeek HealthCare. Mar. 18, 2014. <http://www.informationweek.com/healthcare/electronic-health-records/aetnas-accountable-care-chief-tough-transition-ahead/d/d-id/1127765>

Reducing Early Elective Deliveries

"Delivery at 37 or 38 weeks was widely considered benign — but it is not. Infant mortality is at least 50 percent higher for babies at 37 or 38 weeks than at 39 or 40 (at 41 weeks the rate rises again). These babies are also more likely to suffer breathing, feeding and developmental problems. "

<http://opinionator.blogs.nytimes.com/2014/03/12/reducing-early-elective-deliveries/>

Obamacare Still Isn't Failing, But It's Not Succeeding

"The exchanges have enrolled some 4.2 million people (though it's unclear how many have paid their premiums, and how many will do so by March 31)." "There are serious reforms that need to be made to the law – they'll either happen now or later."

<http://www.forbes.com/sites/theapothecary/2014/03/12/obamacare-still-isnt-failing-but-its-not-succeeding/>

\$178,900 for Outpatient Surgery to Remove Two Bunions This was billed by a podiatrist and paid by an insurance company. <http://nypost.com/2014/03/16/180k-bill-for-simple-foot-procedure-sparks-payment-fight/>

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