Of Note

'Different Kind of Stem Cell" Possesses Attributes Favoring Regenerative Medicine

A research team at Georgetown Lombardi Comprehensive Cancer Center said the powerful cells they first created in the laboratory a year ago constitute a new stem-like state of adult epithelial cells which have attributes that could make regenerative medicine possible.

In the Nov. 19 online edition of the *Proceedings of the National Academy of Sciences*, the researchers reported that the new stem-like cells do not express the same genes as embryonic stem and induced pluripotent stem cells. That explains why they don't produce tumors when they grow in the laboratory, as other stem cells do, and why they are stable, producing the kind of cells researchers want them to. (Karen Mallet, Georgetown University Medical Center, Nov. 19, 2012)

Evidence about Whether Retail Medical Clinics Disrupt Doctor-Patient Relationships Is Mixed

A new RAND Corporation study examining the impact of retail medical clinics on the receipt of primary medical care finds mixed evidence about whether the clinics may disrupt doctor-patient relationships.

The study found that people who visit retail medical clinics are less likely to

return to a primary care physician for future illnesses and have less continuity of care. However, there was no evidence retail medical clinics disrupted preventive medical care or management of diabetes, two important measures of quality of primary care. (RAND Corporation news release, Oct. 31, 2012.)

Health Rankings: USA Is Living Longer, But Sicker

Americans are living longer, with fewer deaths from heart disease and cancer, but more chronic illnesses, according to the 2012 America's Health Rankings by the United Health Foundation.

The rankings highlight troubling levels of obesity, diabetes, high blood pressure and sedentary behavior. Medical advances are allowing more people to live with those conditions.

For the sixth consecutive year, Vermont tops the list of healthiest states, says the report which uses data from the Centers for Disease Control and Prevention, the American Medical Association, Census Bureau and FBI. It looked at 24 measures of health, including tobacco and alcohol abuse, exercise, infectious diseases, crime rates, public health funding, access to immunizations, premature birth rates, and cancer and heart disease rates. After Vermont, Hawaii, New Hampshire, Massachusetts and Minnesota ranked in the top five. States at the bottom of the

Copyright © 2013 CHA. Permission granted to CHA-member organizations and Saint Louis University to copy and distribute for educational purposes.

list were South Carolina, West Virginia, Arkansas, Louisiana and Mississippi. (Michelle Healy, *USA Today*, Dec. 11, 2012.)

Drug Shortages Persist in U.S., Harming Care

From rural ambulance squads to prestigious hospitals, health care workers are struggling to keep vital medicines in stock because of a drug shortage crisis that is proving stubbornly difficult to fix. Rationing is just one example of the extraordinary lengths being taken to address the shortage, which health care workers say has ceased to be a temporary emergency and is now a fact of life. In desperation, they are resorting to treating patients with less effective alternative medicines and are using expired drugs.

Caused largely by an array of manufacturing problems, the shortage has prompted congressional hearings, presidential orders and pledges by generic drug makers to communicate better with federal agencies. The list of hard-to-find medicines ranges from basic drugs like the heart medicine nitroglycerin to a lidocaine injection to numb tissue before surgery. (Katie Thomas, *New York Times,* Nov. 17, 2012.)

A Duty of Health Care Workers

Health care workers should know better than anyone about the importance to get vaccinated against the flu virus to protect their own health and prevent the possibility of infecting patients. A survey

by the Centers for Disease Control and Prevention found that 67 percent of all health care workers were vaccinated during the 2011-12 flu season, up slightly from 64 percent the prior season. Over the past three flu seasons, physicians getting the flu vaccine rose from 81 to 86 percent and the rates for nurses climbed from 69 to 80 percent. However, vaccination rates for other health care personnel such as nurse practitioners, physician assistants and nonprofessional aides and assistants, were in the low-60 percent range. Reasons cited for not getting vaccinated included a belief it is not needed, concern that the vaccine is not effective and worries about side effects. Vaccinations of health care workers should be required, either by state laws or by employers. (Editorial, New York Times, Sept. 28, 2012.)

A student from the Center for Health Law Studies at Saint Louis University School of Law contributed the following items to this column. Amy N. Sanders, assistant director, Center for Health Law Studies, supervised the contributions of health law student Lindsey Weinberg (JD anticipated '13).

Insurers Prod Doctors, Hospitals to Stop Elective Early Deliveries

Every year, approximately 10 to 15 percent of expecting mothers elect to deliver their babies by C-section early. Reasons range from busy schedules to fatigue from being pregnant, or even a desire to choose the child's birth date. However, no reasons on the list have to do with medical need. Now, research shows

Copyright S 2013 CHA. Permission granted to CHA-member organizations and Saint Louis University to copy and distribute for educational purposes.

that if patients elect to give birth before 39 weeks, risks of complications for the newborns skyrocket.

In response to these early deliveries which, as they increase the likelihood that infants will suffer from medical complications, proportionally increase the cost of medical care, state governments and insurance companies are attempting to reduce the trend. Measures to effect change include assessing penalties to physicians and hospitals that proceed with elective births without medical necessity, awarding hospitals increased funds if they institute procedures to minimize these births, and refusing to pay for these early and unnecessary procedures. These steps may in fact be necessary as a study of 27 hospitals has shown that simply warning physicians of increased complications in newborns is not enough. This year, Medicare will join the movement by requiring hospitals to report how often elective deliveries occur in patients who are at less than 39 weeks gestation and by penalizing those hospitals for consistently high rates.

(Phil Galewitz, *Kaiser Health News*, Jan. 21, 2013

http://www.kaiserhealthnews.org/Stories/ 2013/January/22/elective-earlybirths.aspx)

Gun Law's Mental-Health Provisions Draw Ire

After the Newtown, Connecticut tragedy, many states throughout the nation are proposing or passing legislation in an effort to prevent its horrific reoccurrence. In New York, for instance, new legislation enacted for gun-control purposes will require reports from mental-health professionals to law enforcement should they believe a patient is likely to act in a manner that will seriously harm him or herself, or others. The result of such reports will include seizing the patient's firearms and adding the patient's name to a state database for criminal background checks which will prohibit them from legally purchasing firearms.

Although well-intentioned and designed to quell the fear that tragedies such as the Newtown tragedy will spread to other states, laws with provisions of this nature extend far beyond the already existing requirement that mental-health professionals warn those whom their patients have threatened. Concern exists that such legislation may freeze the mentally ill from pursuing treatment at all. Psychologists will no longer be the trusted listeners; they will be reduced to listeners who will police patients according to their own discretion. If the mentally ill refuse to seek treatment because of this, then such legislation may actually perpetuate the very harms which it was first designed to prevent. (Tamer El-Ghobashy, The Wall Street Journal, Jan. 15, 2013

http://online.wsj.com/article/SB10001424 127887324235104578244224056908126 .html?KEYWORDS=health+law)

Copyright @ 2013 CHA. Permission granted to CHA-member organizations and Saint Louis University to copy and distribute for educational purposes.

NYPD to Try GPS in 'Bait Bottles' to Track Drug Thieves

The Drug Enforcement Administration has reported that between 2006 and 2010, the occurrence of drug store armed robberies has increased 79 percent. This statistic stems from the fact that prescription pain-relievers have a significantly increased presence throughout society in recent decades. New York is one state which has seen a multitude of robberies, injuries, and murders, and it has formulated a plan to combat these crimes.

In response to these occurrences and the numerous deaths which have resulted, the New York police will install invisible GPS tracking devises in "bait bottles" filled with placebos purported to look like the much sought after pain-killers. A drug diversion task force, as well as thousands of licensed New York City pharmacists who will stock their shelves with the placebo-filled "bait bottles" are additional elements of the wider plan to halt the increase in pharmacy robberies. (Tina Susman, Los Angeles Times, Jan. 15, 2013 http://www.latimes.com/news/nation/nati onnow/la-na-nn-nypd-oxycodone-

<u>20130115,0,7432151.story)</u>

Why Does a Flu Shot Cost So Much?

Because of a reason as simple as uncertainty, flu shots year after year cost the American public approximately \$30 per shot, despite significant demand. Many believe the flu shot should be free, as modeled after Ontario's example in Canada which found free vaccines to significantly reduce the number of influenza cases as well as the cost of healthcare. However, little knowledge exists about the great effort and risk which pharmaceutical companies undertake to manufacture the vaccine.

Production of the next year's flu shots starts in February after researchers examine the strains of flu in the Southern Hemisphere during its winter season. The pharmaceutical companies must then estimate how many Americans will obtain a flu shot the next year before the flu season has begun; always a risky determination without any elements of certainty. The risk is that millions of doses will need to be thrown away if the companies grossly overestimate how many to manufacture, or on the other hand, gross underestimations may create a panic from shortages. Although the risky nature of the decisions contributes to the perceived high price, oddly enough, the flu vaccine costs less than any other vaccine that Americans obtain. (Alana Semuels, Los Angeles Times, Jan. 21, 2013 http://www.latimes.com/business/money/l a-fi-mo-cost-of-flu-vaccine-20130121,0,6209866.story)

Copyright @ 2013 CHA. Permission granted to CHA-member organizations and Saint Louis University to copy and distribute for educational purposes.