

Technology & Information

Docs Often Neglect to Give Lifestyle Modification Advice

According to researchers at the University of North Carolina, physicians are less likely to give people with hypertension who are older than 60 advice about lifestyle modifications to manage their disease. For example, 53.7% of patients aged 60 or older reported receiving eating habit advice, compared to 71.2% of those aged 40 to 59 and 64.9% of those aged 18 to 39. Advice to reduce alcohol intake was received by 35.1% of those 60 or older compared to 48.9% of those aged 40 to 59 and 43.4% of those aged 18 to 39. The full study is available at: www.lejacq.com/Search_article_Detail.cfm?aid=jch%5F7350%2Epdf.

Arterial Vascular Disease Undertreated in Older Women

A study by the Columbia University Medical Center and Weill Cornell Medical College campuses of New York-Presbyterian Hospital, reports that older women with vascular disease are not on physicians' radar and thus are undertreated for these disorders. The reason is that most clinical trials in cardiovascular disease have focused on men, and the prevalence of the disorders in women is unknown. For the full report, see: www.jvascsurg.org/article/PIIS0741521407012906/abstract.

Diabetes Education Imperative

Some 54 million Americans may develop diabetes within the next 10 years, according to a report in the *Mayo Clinic Women's HealthSource*. Physicians should discuss prediabetes monitoring with patients older than 45 who have a family history

of diabetes, a body mass index of 25 or higher, low levels of high-density lipoprotein (HDL) cholesterol and high levels of triglycerides, high blood pressure, a history of gestational diabetes or giving birth to a baby weighing more than 9 pounds, or polycystic ovary syndrome. African-Americans, American Indians, Hispanics, and Asian-Americans are also at higher risk.

On the Road to Better Diabetes Care

Two major initiatives designed to improve primary care treatment of type 2 diabetes have yielded significant benefits in largely minority, disadvantaged populations, as reported in the December issue of *Medical Care*. Patients treated at clinics that follow the "Chronic Care Model" have lower rates of diabetes-related coronary artery disease. Similarly, the "Health Disparities Collaboratives" initiative has improved diabetes care at US community health centers. Visit www.lww-medicalcare.com to read the full articles: one by Parchman, et al, and the other by Chin, et al.

Alzheimer's Drugs May Slow Progression of Disease

Several disease-modifying drugs currently in Phase III trials hold promise for slowing the progression of Alzheimer's. Most of these drugs target early biological abnormalities, especially those involved in creating amyloid plaques. But experts question whether the drugs will be efficacious in blocking Alzheimer's or safe enough for long-term use or use with other medications. The October issue of the *Harvard Mental Health Letter* explores this issue further. See: www.health.harvard.edu/newsletters/Harvard_Mental_Health_Letter.htm.

Fish and Omega 3 Oils May Improve Memory

Alzheimer's disease and dementia may be held at bay by a diet rich in fish, omega 3 oils, vegetables,

and fruits, according to a study in the November 13, 2007, issue of *Neurology*. Researchers found that people who regularly consumed omega-3 rich oils (eg, canola oil, flaxseed oil, and walnut oil) reduced their risk of dementia by 60% compared to those whose diets did not include these oils. Fruits and vegetables reduced risk of dementia by 30%. For the full article by Barberger-Gateau et al, see: www.neurology.org/cotent/vol69/issue20/.

Exercises Can Improve Balance in Older Adults

The November issue of the *Mayo Clinic Health Letter* reports that walking and other types of exercise, balancing on one foot and then the other, and possibly using an exercise ball (with exercises provided by a physical therapist or trainer) can help improve balance as we age. Strength training and Tai Chi are also helpful. For more information, see: healthletter.mayoclinic.com/index.cfm.

Support for a Single-Payer Health System

In contrast to the endorsement of the American Medical Association, which does not support a single-payer healthcare system, the nation's second largest physicians' group, the American College of Physicians (ACP), recently backed such a system, noting that universal healthcare coverage has been successfully achieved in other countries through single-payer and pluralistic systems. The ACP stopped short of saying single-payer systems are the *best* approach. For more information, see: www.acponline.org/college/pressroom/access.htm?hp.

Capped Rx Plans Cause Medication Discontinuation

According to a team of RAND researchers, the rate of medication discontinuation is higher among high-cost enrollees in capped prescriptions plans than patients in uncapped plans. Fifteen percent to 28% lower use of antihypertensives, antidepressants, antidiabetics, and cholesterol-lowering drugs was found among members of capped plans. The study suggests that pre-

scription-benefit limits, like those of Medicare Part D plans, can disrupt drug therapy for high-cost prescription users, including chronically ill patients. See www.rand.org/health/feature/2007/071001_shang.html for more information.

AARP Supports Pay for Performance

"AARP strongly supports efforts to change Medicare's payment system from one that rewards quantity to one that rewards quality," stated AARP director of Public Policy John Rother, in an endorsement of the Centers for Medicare and Medicaid Systems' (CMS) pay-for-performance movement. "This is both common sense and necessary to ensure that health care does not continue to become increasingly unaffordable for Medicare beneficiaries over time. It is also a way to make a good program like Medicare even better," continued Rother. "Medicare and those who rely on the program should be getting more for their health care dollar." To read the full endorsement, see: www.aarp.org/research/press-center/presscurrent-news/aarp_supports_cms_move_toward_payforperformance.html

Three Common Drugs Trigger Most ED Visits by Seniors

A third of all ED visits in the US by seniors occur because of adverse reactions to 3 common medications—warfarin, insulin, and digoxin. The main reason is the difficulty physicians have in determining the correct dose for these medications. Physicians and patients need to work more closely on monitoring of drug levels through simple blood tests.

PCMA Advertises Its Support of e-Prescribing

A new round of TV advertising in support of e-prescribing has been launched by the Pharmaceutical Care Management Association (PCMA). Featured is J. Lyle Bootman, PhD, ScD, co-chair last year of an Institute of Medicine (IOM) committee that recommended that all physicians begin using e-prescribing by 2010. View the ads at www.pcmanet.org. *MPM*