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*Question: As of April 27, 2022, how many COVID vaccines have been administered in the US.  
A) 400 million B) 500 million C) 600 million D) 700 million E) 800 million*

### Therapeutic Value of Newly Approved Drugs

Just because the Food and Drug Administration (FDA) approves a drug for marketing does not mean that it is highly effective. A team of investigators noted that the FDA's rate of approval of new drugs has increased, in part due to accelerated approval (AA).<sup>1</sup> The team used criteria developed in Germany and France that discerned the therapeutic value of approved drugs in the 2018–2019-time frame. In the final group of 67 drugs, they found that 26 were oncological, 10 were

study included a parallel evaluation of drugs approved by the European Medicine Agency. Drugs in its approval collection fared no better than those in the FDA's collection. If your clinician offers you a newly approved drug, find out all you can about its benefits and risks. Is it 'highly effective' or marginally effective?

### Oncologists Awareness of the Cost of Drugs

A team of investigators, most from Memorial Sloan Kettering Cancer Center, surveyed oncologists to determine their awareness of the high cost of cancer treatment.<sup>2</sup> The authors noted a report that 40% of US cancer patients have depleted their life savings after 2 years. The survey was taken at a single academic treatment center and had a 41% response rate from the 851 surveys sent. Most of the oncologists (83%) that responded to the survey believed that there were ways to mitigate 'financial toxicity' of cancer treatment. Only 22% of the responders reported receiving training on cost control. The authors note that in most cases neither the patient nor oncologist know much about the cost of cancer treatment. Two-thirds of the responders were willing to change their behavior when there is a high risk of 'financial toxicity.' One third were not willing to change. A cancer diagnosis may be emotionally devastating, but only in America can it become financially devastating. If you or a loved one is facing a battle with cancer, make sure there is a plan to manage costs as well as fight the cancer.



neurological, and 9 were anti-infection. Only one-third of the drugs evaluated were found to have high therapeutic value. None of the drugs given AA were found to have high added therapeutic value. The

<sup>1</sup><https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2790746?msclkid=a9a7ec9fc4dd11ec805485b5ec58f8ce>

<sup>2</sup><https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2791298?msclkid=a23c832cc4f411ecb4b58f02fca3e198>

## Capturing Your Opinion of the Quality of Your Medical Care

Four experts from Australia wrote in *JAMA Health Forum* about patient reported experience measures (PREMs) and patient reported outcome measures (PROMS).<sup>3</sup> These are considered critical to the assessment of quality of care across systems. The authors give a guide for healthcare administrators to understand the options in selecting and implementing PREMs and PROMs. Those are well beyond the scope of what patients need to know. PROMs measure a patient's health and well-being. PREMs center on the patient's experience of receiving healthcare. There are two important concepts at work: validity and reliability. The first has to do with the extent to which the measure captures what it was intended to capture, and the second has to do with consistency and predictability. In the US, the major PREM is the Consumer Assessment of Healthcare Providers and Services (CAHPS). This has been implemented for Medicare and Medicaid patients. There are several barriers to implementation of such programs, including the cost of starting one and the clinician time consumed in dealing with the patient responses. If you wish to learn more about CAHPS, here is a link: <https://www.cms.gov/research-statistics-data-and-systems/research/cahps?msclkid=e86565b8c4f811ec9731a559d306f440>. If you are asked to evaluate your recent medical care, please do not ignore the request. It makes your voice part of the grand collection of patient voices.

## Air Quality and Health

Two articles caught my eye this month, each pertaining to the adverse effects of air pollution on health. The first was about plaque psoriasis that tends to flare from infection, emotional stress, or certain drugs.<sup>4</sup> The Italian investigators asked whether episodes of high air pollution in the 60 days preceding a psoriasis flare were associated with air pollution levels compared to those preceding physician visits for routine care (no flare). Pollution levels were compiled as areas under the curve of

measured levels. The air pollutants they compiled from a standard database were carbon monoxide, nitrogen oxide, benzene, coarse particulate matter, and fine particulate matter. From their database of patients with average age 61 years, they included 369 patients with a psoriasis flare. The air pollution index prior to a flare was 12 units, whereas it was only 1 unit in the 60 days prior to no flare. The authors note that this is an association, not a cause-and-effect finding. They suggested that particulate matter seemed most closely associated with acute flare. They call for more research to determine the generalizability of their findings and discern what the mechanism might be. It is not difficult to envision particle matter, bearing all sorts of fungi, bacteria and non-volatile pollutants causing an acute plaque psoriasis flare on one's skin.

The second article attempted to link air pollution to brain health. It was a 'News & Analysis' piece in the *JAMA*.<sup>5</sup> The author surveyed recent data linking air pollution with more rapid mental decline in older folks. About a half dozen studies conducted in diverse parts of the world have found associations between air pollution and mental decline. The writer surveyed three possible mechanisms. In the meantime, the WHO has declared that it sees no threshold for safe exposures to particles below 2.5 microns. It recommended a standard of 5 micrograms/m<sup>3</sup>. An EPA expert panel recommended a standard of 8-10 micrograms/m<sup>3</sup>. The EPA left the standard at 12 micrograms/m<sup>3</sup>. My advice to folks is to remain cognizant of air pollution concentrations in your area. If they are reported to be at an unhealthy level, then curtail your vigorous outdoor activity. You will never know if this practice extends your life, but just maybe you will get to see one more wedding or greatgrandchild born. For my readers in the Houston area, there is a link to near-real-time measurements of air quality.<sup>6</sup> Check for a similar link in your city.

<sup>3</sup> <https://jamanetwork.com/journals/jama-health-forum/fullarticle/2790756?msclkid=a5099011c4f811ec95e266a97d43b839>

<sup>4</sup> <https://pubmed.ncbi.nlm.nih.gov/35171203/>

<https://jamanetwork.com/journals/jama-health-forum/fullarticle/2790811?msclkid=b6fbce32c71011ec923270ac573fe78a>

<sup>5</sup> Slomski A. Air Quality and brain health. *JAMA* 2022, 327(15):1430-1

<sup>6</sup> <https://aqicn.org/map/houston/?msclkid=b91e12d7c71211ec99893d136e917839>

## **Social Determinants of Health**

It is no secret that social determinants of health eclipse medical determinants in importance. Social determinants of health include economic security, housing, transportation, environment, education, and nutrition. A couple of experts from the Department of Health and Human Services (DHHS) wrote about what is being done at the federal level to improve social determinants of health.<sup>7</sup> One of the DHHS priorities is maternal health where the US lags other developed countries. That agency also is partnering with other federal agencies such as Agriculture, Housing & Urban Development, and Transportation to improve social wellness. This is not easy and will require attention to up-stream causes and take time to show positive outcomes that may be best demonstrated by further research. Obviously, funding should go to efforts that work. Please look around for ways to support improved social determinants of health. One man I know is planning to convert land-sea shipping containers to small homes for those who have nowhere to live.

## **Should You Take Low Dose Aspirin?**

The (US Preventive Services Task Force) USPSTF just released its guidelines on [daily] aspirin therapy for prevention of atherosclerotic cardiovascular disease (ASCVD) in persons with no history of heart attack.<sup>8</sup> It changed dramatically from the 2016 recommendations. For people aged 40-59 the recommendation was ‘C.’ This applies to *select* patients that have a 10-year ASCVD risk of greater than 10 percent and are not at risk of unusual bleeding. For those 60-years-old or older, the recommendation is not to use aspirin. As for the use of aspirin to protect against colon cancer, the data were inconclusive, so the recommendation was ‘D,’ which means do not use aspirin for that purpose. If you wish to calculate your risk of ASCVD the American College of Cardiology offers this site.<sup>9</sup> I

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<sup>7</sup> <https://jamanetwork.com/journals/jama-health-forum/fullarticle/2790811?msckid=b6fbce32c71011ec923270ac573fe78a>

<sup>8</sup> <https://pubmed.ncbi.nlm.nih.gov/35471410/>

<sup>9</sup> <https://tools.acc.org/ascvd-risk-estimator-plus/?msckid=6cf1b0d4c72511eca22c0c1aba4eae2#!/calculate/estimate/>

know someone who takes low-dose aspirin only 3-days per week. You could talk to your cardiologist about aspirin use if you have one.

## **Political Elections and Cardiovascular Disease**

Many of us Americans were quite stressed after the 2020 election because the fate of our democracy was in the balance. A huge team of investigators asked whether there were more hospitalizations for cardiovascular disease (CVD) events in the 5 days after the election compared to a 5-day period two weeks earlier.<sup>10</sup> CVDs included were heart attack, stroke, or heart failure. They looked at admission rates in the huge Kaiser Permanente systems in California. The rate of admission for CVDs before the election was 648/100,000, whereas in the 5 days after the election, the rate was 760/100,000. This represents a 17% increase in the rate of hospitalizations.

Admissions for heart attack were 42% higher, the admission rates for heart failure and stroke were not statistically different from the control period. The investigators note that a similar phenomenon was observed after the 2016 election. Awareness of this effect of major political events on CVD risk should be known to healthcare providers. I would opine that the public should be made aware of this effect so family and friends may more closely watch someone at higher risk for CVD.

## **NASEM Report Calls for Immediate Action on Nursing Homes**

An editor of *JAMA Health Forum* wrote a summary of a new report from the National Academies Science, Engineering, and of Medicine (NASEM) on the poor state of US nursing homes.<sup>11</sup> The author offered this quote: The way in which care in US nursing homes is funded, delivered, and regulated “is ineffective, inefficient, fragmented, and unsustainable” and requires immediate action to make comprehensive changes. The COVID-19 pandemic has exposed many of the shortcomings of nursing homes. There is long standing neglect of quality of care and accountability for use of funds.

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<sup>10</sup> <https://pubmed.ncbi.nlm.nih.gov/35442454/>

<sup>11</sup> <https://jamanetwork.com/journals/jama-health-forum/fullarticle/2791539?msckid=2a037dfcc81d11eca9da33ac53eea5ad>

Infection control is poor in many nursing homes and the staff is not well trained, is underpaid, and inadequate in number to ensure safe care.

Given this panorama of deficiencies, the solutions are self-evident: better accountability for the quality of care, transparency on how resources are used, increasing the number and training of staff to meet standards, improving oversight by federal and state agencies, and more robust response to those owners whose facilities are habitually demonstrating poor quality care. Given all this angst, how does one select a nursing home for a loved one? You could start with Nursing Home Compare' from the federal government.<sup>12</sup> When I entered my zip code, I quickly discovered nursing homes near me that scored only one star and others that scored 5 stars.

### Links of Interest

The Big Sick – Canada and the US healthcare in the pandemic:

<https://globe2go.pressreader.com/article/281500754768384>

Doctors, well paid by Pharma, that do not like CMS's decision on Aduhelm:

<https://www.statnews.com/2022/04/09/cms-made-the-wrong-decision-on-aduhelm/>

Heartbreaker on unnecessary death of 2-year old placed in a dangerous hospital:

<https://drive.google.com/file/d/1Z2Ctee4M8VEzsPQFpuCPOuvLeYrsSMxa/view>

Why do we keep letting dangerous doctors treat patients? <https://www.patrickmalonelaw.com/why-do-we-keep-letting-dangerous-doctors-put-patients-at-risk/>

The Atlantic on COVID deaths and loss of US life expectancy:

<https://www.theatlantic.com/health/archive/2022/03/covid-us-death-rate/626972/>

<sup>12</sup> <https://www.medicare.gov/care-compare/?guidedSearch=NursingHome>

Electronic health records as a catalyst for improving patient safety:

[https://www.youtube.com/watch?v=Vb5zfSY\\_ink](https://www.youtube.com/watch?v=Vb5zfSY_ink)

Women of reproductive age in the US fare far worse than in other developed countries:

<https://www.commonwealthfund.org/publications/issue-briefs/2022/apr/health-and-health-care-women-reproductive-age>

WHO recommends 'highly successful' new drug for COVID-19: <https://www.who.int/news/item/22-04-2022-who-recommends-highly-successful-covid-19-therapy-and-calls-for-wide-geographical-distribution-and-transparency-from-originator>

Leapfrog's guide on being safe while hospitalized:

<https://www.hospitalsafetygrade.org/what-you-can-do-to-stay-safe/preparing-for-your-hospital-stay>

Leapfrog's detailed report on healthy mom's and healthy babies:

[https://www.leapfroggroup.org/sites/default/files/Files/2021%20Maternity%20Report\\_Final\\_1.pdf](https://www.leapfroggroup.org/sites/default/files/Files/2021%20Maternity%20Report_Final_1.pdf)

Patient safety threatened by hospital-associated pneumonia:

[https://www.healthaffairs.org/doi/10.1377/forefront.20220418.65994?utm\\_medium=email&utm\\_source=newsletter&utm\\_campaign=hasu&utm\\_content=forefront&utm\\_term=baker&vgo\\_ee=Io0wPyiaJHyBP68voK92sdKB%2B8tLtp2CHT%2BRqbvouAM%3D](https://www.healthaffairs.org/doi/10.1377/forefront.20220418.65994?utm_medium=email&utm_source=newsletter&utm_campaign=hasu&utm_content=forefront&utm_term=baker&vgo_ee=Io0wPyiaJHyBP68voK92sdKB%2B8tLtp2CHT%2BRqbvouAM%3D)

Answer to question: best answer is C, 574 million.

<https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/index.html>



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