

Question: *Sexual predators are the most common source of online sexual offenses against teenagers? True or false?*

Maternal Mortality in the US

Since my last newsletter, I have become the grandfather of a 5th little person. He was born on October 13th in an excellent hospital in Houston. Baby and mother are doing quite well. Sadly, this is not always the case. New data from the CDC show that 80% of pregnancy-related deaths are preventable.¹ There are many shortcomings in our healthcare delivery system, but this is one of the most tragic. Two findings of interest to me were that 53 % of maternal deaths occurred from 7 to 365 days after delivery and that 82% occurred in women living in an urban environment. We have got to place a higher priority on mitigating this stain on our country.



Updated Ranking for Nursing Homes

There is a good chance that most of us will end up in a nursing home in the last months of our lives. It is also likely that the generation born before us will need our wisdom in helping to select a suitable nursing home. It is well established that staffing levels of nurses and the turnover rate of nurses in a nursing home directly affect the quality of care received by residents. As of July, this year, the Centers for Medicare and Medicaid Services

(CMS) has added nursing staffing levels on weekends and the rate of nurse turnover into their 5-star rating system.² The CMS knows its rating system is imperfect, so looking at caveats is a good idea. There are also practical considerations, such as whether the location of a home is convenient for visits of family and friends.

Online Sexual Offenses against Children

While the internet offers many valued attributes, it also opens the door for sexual predators to take advantage of children. Three experts surveyed about 2600 young adults ages 18-28 years, asking about their abuse experiences before turning 18 years old.³ The researchers employed a collection of types of abuse. Those types and the rate of abuses were as follows: online child sexual abuse (16%), image-based sexual abuse (11%), self-produced child sexual abuse images (7%), nonconsensual sexting (7%), online grooming by adults (5%), and revenge pornography (3%). Most of the abuse came when the children were 13-17 years old and came from people known to the victim, not internet predators.

The authors call for education of potential victims so they can avoid online sexual offenses. They further opine that teens need to set their own boundaries. In my opinion, the solutions are complicated and require parental vigilance, something that is too often lacking in American families.

Abortion and Teratogenic Drugs

The abortion debate rages on with both extreme ends of the debate lost in their respective, unethical swamps. An important consideration has appeared that makes the 'ban abortions' end of the debate spectrum

¹ <https://www.cdc.gov/reproductivehealth/maternal-mortality/erase-mm/data-mmrc.html>

² <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/FSQRS>

³ <https://pubmed.ncbi.nlm.nih.gov/36239942/>

less humane than it may presumed to be. Many drugs are teratogenic; that is, they have the potential to seriously harm a developing fetus. Thalidomide is the most well-known of these, leaving newborns of mothers taking the drug for nausea, with extremely stunted limbs. An editor for the *JAMA* surveyed the conflict between a woman's need for a potentially teratogenic drug and the possibility that she may become pregnant.⁴ That conflict is magnified in the 13 states that have essentially banned abortions.

The article cites a study of 3.5 million women in the US, of which 1 in 16 were taking a definite or potentially teratogenic drug, when they became pregnant. The same study identified 141 drugs with definite and 65 with potential teratogenic effects. Dermatologists, neurologists, and rheumatologists often prescribe teratogenic drugs for effective treatment of young women. They face a serious ethical dilemma in states that have banned abortion because no birth-control method is 100% effective. The woman will be faced with a difficult choice in any case, but it is made even more tragic if she decides not to risk a seriously deformed child and must leave her state for an abortion.

My opinion: There is a sensible solution, which is to disallow an abortion after 15 weeks of gestation. This allows the pregnant woman plenty of time to decide if she wishes to continue her pregnancy, yet it prevents destruction of a sentient life, which few experts believe happens before 15 weeks of gestation. The heart-beat-based abortion laws are unreasonable in view of the reality that a dying person is considered dead when they are brain dead, not heart dead.

Chronic Disease Burden and Financial Woes

A team of investigators sought the relationship between chronic disease burden and adverse financial outcomes.⁵ They examined 2 ½ million insurance claims records from 2019-2021 in Michigan, linking these to commercial credit data of adults with commercial health insurance. They considered thirteen common chronic conditions and several measures of adverse financial outcomes. For example, they found that those with 7-13 chronic conditions had a much higher amount of medical debt in collections than those with no chronic conditions. Respectively, the average amounts were \$1250 vs. \$784.

There was an incremental increase in debt with the increasing number of chronic conditions.

The authors were cautious not to claim a cause-and-effect relationship; I would suggest that such a relationship seems reasonable. Those with many chronic conditions may be less able to work at a high-paying job, yet their burden of medical debt is likely to be high. Being burdened by medical debt is one of the awful attributes of the American medical industry. This does not happen in other developed countries.

Health! Opportunity and Your Neighborhood

It's no secret that the American healthcare industry emphasizes medical repair over healthy living to avoid the need for medical care. More attention is being given to healthy living in the wake of a focus on inequities in health delivery. An invited commentary on this subject made several important observations.⁶ Data show that there is a 7-year difference in life expectancy between communities with high-measured opportunities and ones with the lowest measure of opportunity. Racially, 66% of black children, 58% of Latino children, and 18% of white children live in communities with low opportunity scores.

The ideal opportunity measure targets modifiable factors within low opportunity communities. The hope is that community healthcare systems will recognize the need to improve modifiable opportunities in the community they serve. Food insecurity has been found in some situations to be associated with much lower life expectancies when compared to those with no food insecurity. It seems to me that *if we care about neighborhoods with low opportunities*, we must act to expand opportunities. Obviously, one key factor is the quality of education provided to children.

Emergency Abortions

A lawyer wrote in *JAMA Forum* about the quandary physicians face in emergency departments in some states when a patient arrives who needs to have an abortion to protect her life.⁷ The author compared the laws in Texas and Idaho, the latter being the most severe with abortion restrictions. Judges have ruled in various directions as the Biden Administration seeks to protect a woman's right to an abortion in selected situations.

⁶<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2797350>

⁷<https://jamanetwork.com/journals/jama-health-forum/fullarticle/2796297>

⁴ <https://jamanetwork.com/journals/jama/fullarticle/2797484>

⁵ <https://pubmed.ncbi.nlm.nih.gov/35994265/>

Certainly, one to save her life should be a protected right. Who decides that a woman's life is at stake and to what extent may it be challenged later by legal second-guessers?

Physicians are required to treat patients according to 'the standard of care.' So, if an abortion is necessary by the standard of care to protect the woman's life, does that protect the physician from violating the law? Not necessarily. I might point out that the standard of care is nebulous at best. That aside, these are the author's concluding words: "Until physicians feel secure practicing emergency care according to their clinical judgment, a new and pernicious form of defensive medicine is likely to predominate, and delays and denials of emergency care will exact a bitter human toll." I have already written my opinion above, defending a 15-week gestation limit for abortions as reasonable.

Hunger, Nutrition, and Health

A news article in *JAMA Forum* noted that the Biden Administration has issued a plan to end hunger in the U.S. by 2030 and improve nutrition.⁸ The release preceded a conference on hunger, nutrition, and health, the first in five decades. The estimate is that in 2021 about 10% of households were food insecure. With the rise in prices since then, food insecurity has also risen. One estimate from the Urban Institute claimed that about 30% of black and Hispanic adults are insecure vs. about 17 % of white adults. The author notes a vicious cycle between cardiovascular disease and food insecurity. Treatment of the illness may deplete resources that are needed to keep food secure.

Much of the overall approach involves school age children and expanding the availability of nutritious food through school programs. Additional attention will be given to food labelling accuracy so consumers can make informed decisions about the best choices. Improving exercise is also part of the agenda for building better health.

On a personal note: If I never got out of my suburban community, I would suppose that food insecurity is a myth. I see no homeless people and I know of no one who is food insecure. But I do get out. Once a week, I go to a food distribution site in urban Houston. There people wait for up to two hours to receive a box of food we prepared from Houston Food Bank sources. The

recipients of our food are not easily identified as 'food insecure,' but the fact that they wait so long for our free food says to me that they may be on the edge. Lately, I have noticed that the food we give is more nutritious than it used to be.

Changes in Obesity in Children

A research letter in *JAMA Pediatrics* reported the changes in obesity prevalence in 15,000 US children and youth aged 2-19 years old that had been formally selected to represent the U.S. population.⁹ They looked at data from 2011 to 2020. The average age was 9.8 years and 51% were boys. The prevalence of obesity increased from 17.7% in the 2011-to -2012 interval to 21.5% in the 2017-to-2020 interval. Obviously, we need to do something about this trend. In my opinion, we need to educate parents to *intentionally* guide their children into eating healthy foods and not eating 'junk' food. My on-the-street observation is that obese children often have obese parents accompanying them. Pediatricians also have a key role in improving childhood nutrition, although this may be a challenge when parents have not practiced healthy eating habits.

Gun Violence Continues Unabated in the US

Two experts on gun violence wrote their viewpoint on what needs to be done if we are ever able to overcome mass shootings in the U.S.¹⁰ They point out that such shootings grab public attention, yet they are a small fraction of the total gun-facilitated deaths in the U.S. They are not conflicted about their opinion that we need 'stringent regulation of assault weapons and large capacity magazines for ammunition.'

Between 1994 and 2004 there was some regulation of these; however, Congress let the law expire in 2004. They report that about 20 million assault weapons are in public hands now and millions more are manufactured in or imported to the US each year. Moreover, between 2015 and 2019 the number of mass killings per year was roughly double the number in the years when the ban was in effect (1994-2004). They cite the success the Australians had with a law passed after a mass shooting in Tasmania. In conclusion, a gathering of 32 experts on gun violence were asked what single measure would mitigate mass shootings. Their answer was that a ban on assault weapons would do the best.

⁸ <https://jamanetwork.com/journals/jama-health-forum/fullarticle/2797212>

⁹ <https://pubmed.ncbi.nlm.nih.gov/35877133/>

¹⁰ <https://pubmed.ncbi.nlm.nih.gov/36166010/>

The second amendment to the Constitution states, “A well regulated Militia, being necessary to the security of a free State, the right of the people to keep and bear Arms, shall not be infringed.”¹¹ I see no such thing as a “well-regulated militia,” anywhere. Is the NRA the regulator of the militia? How are assault weapons in the hands of a few individuals “necessary to the security of a free state?” Is the January 6th mob violence in Washington a model for how to ensure the security of a free state? It is far past time for we Americans to think hard about who we are. One of our major problems is our current Supreme Court, which recently decided (*Bruen*) to ignore the clause pertaining to “a well-ordered militia”¹² and let New York citizens bear arms for self-defense. I think we have gone back to the wild-west days.

Interesting links

Legacy of the pandemic is a warning for the U.S.
<https://www.theatlantic.com/health/archive/2022/09/covid-pandemic-exposes-americas-failing-systems-future-epidemics/671608/>

Water borne infections in hospital equipment:
<https://aricjournal.biomedcentral.com/articles/10.1186/s13756-021-00935-6>

Status of health insurance in the U.S.
<https://www.commonwealthfund.org/publications/issue-briefs/2022/sep/state-us-health-insurance-2022-biennial-survey>

Medicaid’s role in improving the mental of the young and vulnerable:
<https://www.commonwealthfund.org/blog/2022/medicaids-essential-role-improving-mental-health-americas-most-vulnerable-youth>

Hospitals raking in \$\$ while patients incur medical debt:
<https://www.npr.org/sections/health-shots/2022/09/28/1125176699/some-hospitals-rake-in-high-profits-while-their-patients-are-loaded-with-medical>

Answer to question: False. Ref. #3

¹¹<https://constitution.congress.gov/constitution/amendment-2/>

¹²<https://jamanetwork.com/journals/jama/article-abstract/2796684>

An old law about doctor investigations that CMS did not follow: <https://www.consumerwatchdog.org/doctor-investigations-must-be-disclosed>

Ranking of state medical boards 2017-19:
<https://www.citizen.org/wp-content/uploads/2574.pdf>

Health insurers are painting a false picture:
<https://www.statnews.com/2022/09/26/medicare-advantage-report-misleading-experts-say/>

Columbia University to pay \$165 M to 147 victims of doctor’s sexual abuse: [Columbia University to Pay \\$165 Million to Victims of Former Doctor - The New York Times \(nytimes.com\)](https://www.nytimes.com/2022/09/26/us/politics/columbia-university-pay-165-million-victims-former-doctor.html)

Ratings of Medicare Advantage Plans plunge with reset to pre-pandemic standards:
<https://www.statnews.com/2022/10/07/medicare-advantage-quality-ratings-plunge-as-government-resets-to-pre-pandemic-standards/>

Chemical imbalance is not the cause of depression, researcher says: <https://www.insider.com/ssris-mark-horowitz-antidepressants-serotonin-chemical-imbalance-false-2022-9>

Administration for Community Living reports on Program for Older Americans: <https://acl.gov/news-and-events/announcements/acl-releases-older-americans-act-program-highlights>

A friend’s article on the need for medical board reform:
<https://www.concordmonitor.com/My-Turn-Board-of-Medicine-Reform-Needed-for-Patient-Safety-48308706>

GAO Report on what’s wrong with maternal care in the rural areas of the U.S. https://www.gao.gov/products/gao-23-105515?utm_medium=social&utm_source=twitter&utm_campaign=usgao

GAO report on maternal health during the pandemic:
<https://www.gao.gov/products/gao-23-105871>

\$2.6 million payout to a son who lost his father from undiagnosed pneumonia:
<https://kfiam640.iheart.com/featured/la-local-news/content/2022-10-14-doctor-ordered-to-pay-26-million-to-son-of-man-who-died-of-pneumonia/>

Find past newsletters:
<http://patientsafetyamerica.com/e-newsletter/>



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