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IS THIS MEDICAL TEST NECESSARY? A CAMPAIGN TO CHOOSE WISELY

- Is every medical test you receive at your annual physical a necessary one?
- Should all children with minor head injuries be evaluated with CT scans?
- Should women without symptoms, at average risk, be screened for ovarian cancer?
- Should low risk adults be screened for pancreatic cancer?

A number of doctors, and the professional medical societies they belong to, are asking these questions.

The new “Choosing Wisely” campaign at http://www.choosingwisely.org/, initiated by the American Board of Internal Medicine Foundation, has labeled nearly 90 familiar medical tests and procedures as likely to be unnecessary.

Twenty-five specialty medical societies (http://www.choosingwisely.org/partners/), including the American College of Obstetricians and Gynecologists, the American Academy of Family Physicians, and the American Academy of Ophthalmology, have designated more than 130 medical tests and therapies as questionable. These organizations represent “more than 350,000 physicians.” These are tests for all ages, from children to the elderly.

Among additional medical society partners participating in the “Choosing Wisely” campaign are the American Academy of Dermatology, the American Academy of Orthopaedic Surgeons, the American College of Cardiology, and the North American Spine Society.

The Campaign warns that “more is not necessarily better.” The “Choosing Wisely” campaign is trying to help patients and their doctors avoid unneeded tests and select medical tests and treatments that are supported by medical research, do not repeat other tests or therapies, do not cause harm to the patient, and are “truly necessary.”
As the leader of the “Choosing Wisely” campaign, the American Board of Internal Medicine Foundation asked each participating medical specialty society to designate “Five Things Physicians and Patients Should Question.” Some of these medical societies will release additional lists of questionable tests later in 2013.

Consumer Reports, AARP, and other consumer organizations are publicizing the “Choosing Wisely” campaign to health consumers.

The lists of tests to question are written in two formats, one for physicians, in technical language, and another for patients, in consumer-friendly language. http://www.choosingwisely.org/doctor-patient-lists/

Among the comments for patients about specific tests are, “It can pose risks.” “It can be a waste of money.” “The tests rarely help diagnose the problem.”

The consumer-friendly online documents are designed to help you learn when you, as a patient, should “think twice about testing” and why you should question specific tests. Among them are explanations in Spanish and Easy-to-Read (“Plain English”) language. http://consumerhealthchoices.org/campaigns/free-reports/


ARE CHILDREN USING COMPLEMENTARY AND ALTERNATIVE MEDICINE?

“Did you know that nearly 40 percent of Americans age 18 or older reported using some form of complementary health practice?” asks the National Center for Complementary and Alternative Medicine on its website. (http://nccam.nih.gov/timetotalk/forpatients.htm)

Adults are not the only age group using complementary and alternative medicine.

A study published in the February 2013 issue of the medical journal Pediatrics (“Complementary and Alternative Medicine Use by Pediatric Specialty Outpatients”) concluded that an increasing number of children are being treated with complementary and alternative medicine.

Among the types of complementary and alternative medicine being used by children are massage, herbs and dietary supplements, acupuncture, and homeopathy. Many used complementary and alternative medicine in addition to prescription medications and other standard medical care.

The KidsHealth website http://kidshealth.org/parent/general/sick/alternative_medicine.html reminds parents considering alternative medicine for their children that “there is no strict definition of alternative medicine” and “the boundaries of alternative medicine in the United States are constantly changing.” Medical therapies formerly considered “alternative” may now be practiced by “mainstream” physicians.

No U.S. national organization monitors or disciplines all alternative medicine practitioners. Some states license certain types of alternative medicine practitioners. In Connecticut, acupuncturists, hypnotists, naturopathic physicians, massage therapists, and practitioners of homeopathy are licensed.

Suggestions for “Selecting a Complementary and Alternative Medicine Practitioner” appear on the National Center for Complementary and Alternative Medicine (NCCAM) website at http://nccam.nih.gov/health/decisions/practitioner.htm This article discusses how to locate a practitioner, guidelines for making a selection, questions to ask on the first visit, and questions to ask yourself after the visit in order to evaluate a new practitioner.
The Kidshealth website alerts parents that “unlike prescription and over-the-counter (OTC) medicines, herbal remedies are not rigorously regulated [or tested] by the FDA.”

Alternative medicines and therapies may have different effects on children than on adults. The American Academy of Child and Adolescent Psychiatry expresses concern that there have been “few high quality studies” on children and alternative medicines. (http://www.aacap.org/cs/root/facts_for_families/complementary_and_integrative_medicine)

An individual’s personal success story with a medical treatment may be encouraging but it is not the same as the results of a medical research report.

Physicians may be concerned that parents will treat their children with alternative therapies instead of essential conventional treatments for diabetes or other illnesses.

**Are parents sharing information about their children's alternative medicine use with pediatricians?**

The National Center for Complementary and Alternative Medicine (NCCAM) http://nccam.nih.gov/, a federal government agency that conducts research on alternative and complementary medicine, advises parents to “tell all your health care providers about any complementary approaches you [or your family] use.” (http://nccam.nih.gov/health/decisions/consideringcam.htm)

Making a child’s pediatrician aware of a child’s use of dietary supplements, for example, will allow the pediatrician to alert the parent to possible drug interactions between medications the doctor has prescribed and dietary supplements that the child may be taking.

The National Center for Complementary and Alternative Medicine (NCCAM) offers suggestions about how to initiate a conversation with your doctor about use of complementary and alternative medicine. (http://nccam.nih.gov/health/tips/ttt)

**Information Sources about Complementary and Alternative Medicine....**

Healthnet’s Alternative Medicine Resource List at http://library.uchc.edu/departm/hnet/altmedres.html includes print and online resources.

The MedlinePlus website has descriptions of herbs and supplements at http://www.nlm.nih.gov/medlineplus/druginformation.html There is information about “their effectiveness, usual dosage, and drug interactions.”


The NCCAM website also includes an alphabetical topic list with information on specific herbs and complementary medicine topics such as Light Therapy, Massage, Ayurvedic Medicine, Music Therapy, Colds and Flu therapies, and Yoga.

The Office of Dietary Supplements, a part of the National Institutes of Health, at http://ods.od.nih.gov/HealthInformation/ offers Dietary Supplement Fact Sheets, tips especially for older dietary supplement users, information about dietary supplements in Spanish, and guidelines for evaluating information on dietary supplements.
Searchers may restrict their medical research literature search on the National Library of Medicine’s PubMed database to articles related to complementary and alternative medicine by selecting “CAM on PubMed.” A graphic link for this choice appears on the National Center for Complementary and Alternative Medicine (NCCAM) website at http://nccam.nih.gov/research/camonpubmed

A NEW VIDEO TO REASSURE CHILDREN BEFORE HOSPITAL STAYS FOR CANCER

A young child facing a hospital stay for cancer treatment has many fears and apprehensions. What will happen to him? Who will take care of him? When will he see his parents?

How can a parent help his child understand what to expect during an upcoming hospital stay for cancer treatment?

A new video, especially for children about to undergo hospitalization for cancer treatment, is designed to help prepare children for this difficult experience and to provide reassurance.


The animated video includes puppets, music, and live action. It includes portrayals of Finn singing, joking, and dancing.

Finn, a puppet portraying a young boy about four years old, admits to fears and concerns before his hospital stay for cancer treatment. He is especially worried about being away from home, being separated from his parents, and facing the unknown world of the hospital.

Speaking to the audience from his bedroom after he has returned home, Finn remembers that the hospital is “a big place” and that he “spent a lot of time there” and was cared for by “friends [nurses and doctors] at the hospital.”

The video follows Finn and his parents on his initial stay at the hospital encountering new people in a large building, as well as experiencing unfamiliar sights and sounds. His nurse and doctor are kind, friendly, and soft-spoken. The video emphasizes the constant support of his parents.

A variety of resources related to the video are online at http://kidshealth.org/parent/medical/cancer/finn.html#cat20538 These include coloring pages, a sing-along with Finn, and a lively, upbeat video of Finn dancing.

Especially for parents...

A guide to direct parents using this video with their children appears online at http://kidshealth.org/parent/kh_misc/use-finnstory.html#cat20538 Specialists in treating children with cancer, the “pediatric oncologists, nurses, social workers, child life professionals, and child psychologists” who assisted in the creation of this video about “Finn’s Cancer Story” advise parents to watch the video themselves before showing it to their child. They suggest having a hospital social worker watch it with a parent and child the first time the child views it. Having the child watch the show more than one time will help him absorb the information.

Also for parents, there is a “Cancer Center” area of the website at http://kidshealth.org/parent/medical/cancer/cancer_center.html#cat136 that includes Cancer Basics, information on diagnostic tests, details on treatments and home health care, personal stories of families, a cancer glossary (“Words to Know”), and recommendations about dealing with emotions.
The articles are available in Spanish


In an insightful video, four sets of parents who have children who are cancer survivors speak about their challenging family experiences.

*Videos about older children with cancer...*

The Kidshealth website also offers first-person videos from older children and teenagers who have experienced cancer. These are brief documentaries showing the children and teens living an active life.

Among them are the stories of a teenage boy who had leukemia as a child, and an active ten-year-old boy who felt “nervous and sad” when he first learned of his diagnosis. Ten-year-old Franklen advises other children with cancer to “let the doctors and nurses take care of you” and “remember to laugh.”

There are also videos of a sixteen-year-old girl currently receiving treatment for non-Hodgkin’s lymphoma and an eight-year-old girl who survived cancer after being diagnosed in kindergarten. She speaks about the excitement of resuming ballet lessons and swimming with friends.

There is an audio story, with text, that presents the perspective of a woman, now a nurse and mother, who experienced cancer as a young teenager.

The KidsHealth.org website at http://kidshealth.org/ is an authoritative consumer health resource, with separate areas for parents, teens, and children. It is published by the Nemours Foundation’s Center for Children's Health Media.”

Pediatricians and other medical experts (http://kidshealth.org/parent/misc/reviewers.html#cat20665) review each of the website’s articles and update them.

**NEW GUIDELINES FOR TREATING CHILDREN WITH DIABETES**

A new challenge is facing pediatricians.

They have experienced young patients diagnosed with Type 1 Diabetes, an autoimmune disease in which the pancreas does not produce insulin, a hormone necessary to transport glucose into cells to create energy. Children with Type 1 Diabetes need life-long blood sugar monitoring and injections of insulin to replace the insulin the body lacks.

But now pediatricians are seeing many young children who are diagnosed with a different form of diabetes…Type 2 Diabetes, a medical condition encountered frequently in adults and, up until recently, rarely in children. The U.S. Centers for Disease Control and Prevention has estimated that approximately 3,600 children receive a diagnosis of type 2 Diabetes each year.

Being overweight or obese increases the chances that children will develop Type 2 Diabetes. The increased prevalence of Type 2 Diabetes in children is occurring as more children in the U.S. are categorized as overweight or obese.

To help physicians less familiar with treating Type 2 Diabetes in children, the American Academy of Pediatrics, for the first time, has established guidelines for the treatment of children aged 10 to 18 with Type 2 diabetes. The Guidelines were published in the February 2013 issue of the medical journal Pediatrics.
The Guidelines include recommendations for monitoring glycemic control, diet, exercise, and medications.

Based on research-based evidence, the Guidelines are designed to provide a structured approach to Type 2 Diabetes treatment in children. While formulating the Guidelines, the American Academy of Pediatrics consulted the American Diabetes Association, the Pediatric Endocrine Society, the American Academy of Family Physicians, and the Academy of Nutrition and Dietetics.

*Information for Parents* ....

The Kidshealth website offers an overview of Type 2 Diabetes for parents at http://kidshealth.org/parent/medical/endocrine/type2.html The article is in Spanish as well as English.

The article is enhanced by an animated video, for children as well as adults, that clearly explains the process whereby “glucose gets locked out” of cells in Type 2 Diabetes.

The Kidshealth website also provides recipes and guidelines for eating at restaurants for children with Diabetes. (http://kidshealth.org/parent/diabetes_center/diet_nutrition/eating_out_diabetes.html)

The American Academy of Nutrition and Dietetics, national professional organization of dietitians, offers nutrition advice for parents dealing with their children’s obesity. (http://tinyurl.com/c7lf4sg)

The federal government’s Weight-control Information Network website (http://www.win.niddk.nih.gov/publications/index.htm#public) includes online publications on weight loss, healthy eating, and exercise.

Let’s Move! (http://www.letsmove.gov/) is a federal government initiative to encourage families to eat nutritious foods and exercise more in order to lessen the prevalence of obesity.

NEW INFANT MENTAL HEALTH FEATURE.....WEBSITE FOR PARENTS

A happy, healthy baby…every parent’s dream…especially when a parent is awakened by a loud cry at 2 a.m.

When should parents begin to help their children develop emotionally and socially? Two expert Connecticut resources on children’s development have an answer: “Healthy socio-emotional development begins at (and even before) birth.”

To provide guidance to parents who want their young children to grow into emotionally strong and healthy adults, the Connecticut Association for Infant Mental Health (http://www.ct-aimh.org/index.shtml) and the Child Health and Development Institute of Connecticut (CHDI) (http://www.chdi.org/about.php) have cooperatively added a special area to the KidsMentalHealthInfo.com website at www.kidsmentalhealthinfo.com

The KidsMentalHealthInfo.com website, written especially for parents and caregivers, is a “free, comprehensive resource on children's mental health issues” from the Child Health and Development Institute of Connecticut (CHDI). The website also includes special sections on Childhood Trauma and Mental Health in Schools.

The website is written in English and Spanish (http://www.kidsmentalhealthinfo.com/espanol/index.php).
The new, searchable Infant and Early Childhood Mental Health section of the website (http://www.kidsmentalhealthinfo.com/infant-early-childhood.php) focuses on parenting children from birth to age five, an important time in a child’s development.

The Infant and Early Childhood Mental Health website section reminds parents that, while babies and toddlers rely on parents for physical care, they also need their parents’ “emotional care.” This is a need they will not outgrow.

The website offers specific suggestions for developing a warm, “caring relationship” with a child in order to foster mental health (“talk often with your children…listen carefully…learn to read your babies’ cues….hug them, hold them….read aloud to your children every day….set limits on their behavior and guide them calmly.”).

The website discusses “social and emotional” milestones, maternal depression, and the effect of stress on very young children.

It links to Connecticut and national resources that provide support and services to parents of young children. (http://www.kidsmentalhealthinfo.com/infant-early-childhood-services-and-supports.php)

The Frequently Asked Questions area of the Infant and Early Childhood Mental Health section responds to questions such as, “What are the signs of healthy development in my young child?” “Why do I feel sad and overwhelmed by taking care of my young child?” “What are the early warning signs of mental health problems?” “Where do I go for help when I have concerns?”


In addition, there are links (http://www.kidsmentalhealthinfo.com/infant-early-childhood-links.php) to a number of organizations and agencies that provide services to parents and their children. These include Birth to 3-Connecticut, Child Development Infoline, Connecticut Parent Advocacy Center, Help Me Grow-Connecticut, and the Nurturing Families Network.


FOR YOUR CONSIDERATION

The following title is recommended to public libraries and other libraries providing consumer health information services. It is not part of the UCONN Health Center Library collection.


When your doctor is unable to diagnose your illness, who will help him determine the correct diagnosis?

Who knows more about your symptoms, medical history, and lifestyle than anyone else?

You, of course!

And you are the essential person who can help your physician gather clues about your health and symptoms and arrive at a logical diagnosis…

-7-
Therefore, this book, while offering insights into the education and thought process of physicians, offers a “patient-centered, individualized approach” (p. 277) that encourages you to be your doctor’s guide.

**Importance of the patient’s story...**

Despite the increased use of medical tests to determine a patient’s illness, it is the patient’s story that is often the key to helping a doctor accurately determine a patient’s illness.

Renowned medical professor Sir William Osler is said to have encouraged medical students to remember, “It is much more important to know what sort of a patient has a disease,” ... “than what sort of disease a patient has.”

According to the authors, “tests only show what the disease is not.” In addition, “unnecessary testing [can lead to] unwanted anxiety, [and sometimes] real harm because of the delayed diagnosis.”

The goal remains determining a working diagnosis. The authors “believe that diagnosis is the key to good healthcare.” (p. 268)

They admonish patients, “Do not leave your doctor’s office without at least a working diagnosis,” even though this initial diagnosis may need to be modified as new symptoms develop or new information is gathered.

Because of missed or misdirected diagnoses, patients’ outcomes are not always positive ones. A study published in the journal JAMA Internal Medicine March 18, 2013 found that errors in diagnosis may lead to serious harm to patients.

**Emergency Room experiences....**

The authors of this patient guide are emergency room physicians at Brigham and Women’s Hospital in Boston, affiliated with Harvard Medical School.

They are keenly aware of the misunderstandings and misdirection that can occur in the midst of rushed, urgent situations.

The patient stories they use to illustrate the importance of patient-physician communication are “based on [their] true experiences as doctors in the Emergency Room.” This book is a “combination of [anonymous] patient stories and [the] authors’ experiences as emergency room physicians.” The authors have created case histories to illustrate guiding points for effective interaction with your physician.

Although Drs. Wen and Kosowsky are experienced physicians, they are still young enough to vividly remember their medical school and residency days. They can clearly describe the current process of educating physicians...its strengths and pitfalls. Their book, directed to patients, presents a physician’s behind-the-scenes view of hospital care.

**Communicating with your doctor.......**

The authors assert that a doctor needs to be, not only a scientist, but also a skilled detective. But the patient needs to provide important information to help the doctor in this investigation process.

The book emphasizes the importance of “being an active participant every step along the way” since being an ill patient is not “a passive process.” (p. 195)

In order to be involved in the diagnostic process, patients can ask the doctor, “What are we looking for on this test? What are the alternatives? What diagnosis are we working toward?” (p. 13)
The book’s advice focuses on “8 Pillars to Better Diagnosis” including “Tell your whole story,” “Assert yourself in the doctor’s thought process,” and “Make the differential diagnosis together,” that can help you interact effectively with your doctor when you are ill.

Throughout the text, key advice to patients is highlighted in brief boxed “911 Action Tips.” The book concludes with a glossary of medical terms (Do you know what an “attending” is? Why is a “review of systems” important?) and worksheets to guide you in preparing questions before your doctor’s appointment. There are also exercises to help you gain skills in applying the “8 Pillars to Better Diagnosis.”

More resources…..

The Healthnet website offers print and online suggestions for communicating with your doctor at http://uchc.libguides.com/content.php?pid=45726&sid=337685. These suggestions are part of the Navigating the Health Care System Resource Guide.


Hooray! Spring is finally here!

Healthnet News is written by Judith Kronick and Alberta Richetelle
If you have questions about anything in the newsletter or about Healthnet services for Connecticut public libraries, please call 860/679-4055; e-mail address: richetelle@nso.uchc.edu

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