



POLICY & PRACTICE

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Youth Have Most Sports Concussions

More than 90% of emergency visits for sports-related concussions occur among children and young adults to age 23, according to the Agency for Healthcare Research and Quality. High-school-aged children, 14-18 years old, made up 58% of all such hospital emergency department visits in 2008, and middle-school-aged children, 11-13 years, made up another 17%. More than three-quarters of the patients treated for the condition were male. Only about 4% of the emergency cases led to hospital admissions.

AAD Affirms Sunscreen Message

Sunscreens are a safe and effective way to protect against the damaging effects of ultraviolet radiation, the American Academy of Dermatology reiterated in a public statement. "Scientific evidence supports the benefits of sunscreen usage to minimize short- and long-term damage to the skin from UV radiation and outweighs any unproven claims of toxicity or human health hazard," said academy President Ronald Moy. That places the AAD at odds with the Environmental Working Group, an advocacy organization that said in its annual report on sunscreens that consumers can trust only 20% of the 1,700 products it surveyed for the 2011 summer season. Most sunscreens on the market currently offer inadequate protection against UV-A type radiation, the group said, and many contain chemicals that can disrupt children's and teens' endocrine systems.

Antibiotics Prescribed for Asthma

Potentially unnecessary antibiotics are prescribed during nearly one out of six pediatric ambulatory care visits for asthma, a study of nationwide survey data shows. Prescriptions in asthma cases without a documented coexisting bacterial infection account for about 1 million extra prescriptions per year, the researchers asserted in Pediatrics. Physicians may be prescribing these extra antibiotics because of diagnostic uncertainty, undocumented comorbid conditions, or prophylaxis of secondary infections. Doctors also may be attempting to capitalize on the anti-inflammatory properties of macrolide antibiotics, which included about half of those prescribed without indications.

Teen Drinking, Surfing Linked

Teens who drink alcohol spend more recreational time on their computers than other teens, according to a survey of 264 children aged 13-17 years. Drinking correlated with more frequent social networking and listening to and downloading music, according to the report in the journal Addictive Behaviors. The researchers found no link between teen drinking and computer use for schoolwork. Author Dr. Jennifer

Epstein of Weill Cornell Medical College, New York, said in a statement that "it seems likely that adolescents are experimenting with drinking and activities on the Internet. In turn, exposure to online material such as alcohol advertising or alcohol-using peers on social networking sites could reinforce teens' drinking."

Fake Antibiotics Found

Several Texas children, mainly Hispanic, have been treated at an Austin hospital after being given medications falsely advertised as antibiotics and sold as dietary supplements under Spanish names similar to the names of real antibiotics, according to the Texas Department of State Health Services. The products have been sold as dietary supplements under names such as Amoxilina, Pentrexillina, Ampitrexyl, Citricillin, Amoximiel, and Pentreximil, and the products' labeling falsely suggests that they are antibiotics, the department said. The products – including capsules, ointments, and liquids – don't seem to have active drug ingredients and are not approved to treat health conditions, according to the department.

McDonald's: Ronald Is Golden

McDonald's Corp. will continue to use mascot Ronald McDonald to advertise Happy Meals to children, despite calls for the fast food giant to cut the clown to help reduce childhood obesity, company CEO Jim Skinner told a shareholders' meeting. Mr. Skinner spoke in answer to a challenge by Donald Zeigler, Ph.D., the American Medical Association's director of prevention and healthy lifestyles, in a statement presented at the meeting. "Changing course now and ending marketing to kids ... would have a profound impact on McDonald's reputation and the health and well-being of generations to come throughout the world," Dr. Zeigler said. Mr. Skinner countered that the marketing strategy has yielded profits. "This is about the personal and individual right to choose," he said.

You Too Can Fight Obesity

The nonprofit group National Initiative for Children's Healthcare Quality has begun recruiting community teams to fight obesity, a program funded by \$5 million from the Affordable Care Act's prevention fund. In the first phase, the group is recruiting 10 teams that can be made up of physicians and public health leaders. The second phase, to launch in December, will include about 40 more teams that are to help "develop practical approaches that link primary care, public health, and communities to prevent and treat obesity for children and families, according to the initiative's website.

—Jane Anderson

Teaching Residents How To Combat Obesity

BY DAMIAN McNAMARA

FROM THE ANNUAL MEETING OF THE PEDIATRIC ACADEMIC SOCIETIES

DENVER – Pediatric and family physician residents' knowledge about pediatric obesity significantly improved at five residency programs that adopted a new curriculum, a 1-year pilot study has shown.

Resident attitudes about prevention, management, referral, and advocacy



Resident knowledge about pediatric obesity did change significantly at the programs with the new curriculum.

DR. SLUSSER

improved as well, although the changes were not statistically significant.

The training made a difference clinically. Greater attention to interpretation of body mass index (BMI) measurements, nutrition, and physical activity was noted through periodic chart reviews for participants in the "Fit for Residents" training, Dr. Wendy Slusser said at the meeting.

In July 2009, for example, only 50% of charts at one site had percent BMI calculated. This figure grew to 85% by June 2010. "Luckily, once [residents] really started calculating BMI, they were doing it correctly as well. That was a nice thing to see," Dr. Slusser said.

The training was a mix of online, didactic, and experiential learning. "They did some teaching to the residents ... and then around midstudy, they developed a stamp that they included on their charts that triggered the resident to not only calculate and plot the BMI, but to interpret it," Dr. Slusser said.

Initially, a panel of expert physicians developed a childhood overweight prevention and management curriculum. Their aim was to better arm future clinicians with the skills necessary to combat obesity in children and adolescents, said Dr. Slusser, a pediatrician and medical director of the UCLA Fit for Healthy Weight program. The Fit for Residents program is a collaboration among the American Academy of Pediatrics, the American Academy of Family Physicians, and the University of California, Los Angeles. The Fit for Residents training adopts a chronic care model and was designed to be similar to a successful AAP breastfeeding residency curriculum, Dr. Slusser said.

Residents completed a baseline survey about their knowledge and attitudes regarding pediatric obesity. Then the

residents at the additional training sites received a 2-day, in-person orientation to the curriculum that included training in motivational interviewing and quality improvement. They also participated in group problem solving. UCLA faculty made monthly telephone calls to key residency faculty once a month on an individual basis and once quarterly as a group call.

Dr. Slusser and her colleagues gauged the efficacy of the project by comparing resident responses to surveys before and after the initiative. The investigators also reviewed 20 charts once a month at each of the 10 residency programs to determine changes in clinical practice.

Resident knowledge about pediatric obesity did change significantly at the five residency programs with the new curriculum. In contrast, no significant change was observed at the five comparison sites.

Very few practices documented that physicians asked patients about physical activity, Dr. Slusser said. However, one program with paper charts added a lifestyle log that made residents much more likely to assess physical activity, she added.

A meeting attendee asked about implementation of the curriculum at sites with paper versus electronic medical records (EMRs). Two of the sites had EMRs, Dr. Slusser replied. Improvements in resident knowledge and attitudes did not differ between sites with different

VITALS

Major Finding: In July 2009, only 50% of charts at one site had percent BMI calculated. This figure grew to 85% by June 2010.

Data Source: A 1-year pilot study of pediatric and family physician residents at five residency programs testing their knowledge about pediatric obesity.

Disclosures: The Anthem Blue Cross and Blue Shield Foundation funds the Fit for Residents project. Dr. Slusser said she owns stock in Amgen, Bristol-Myers Squibb, Merck, and Novo Nordisk.

record types, but programs with EMRs adopted changes faster and more efficiently than paper-based sites.

The 10 pediatric and family physician residency programs studied were in California. The five primary care residency programs that added the new curriculum were Children's Hospital and Research Center Oakland, Contra Costa Family Practice, White Memorial Pediatrics and Family Medicine, Harbor-UCLA Pediatrics, and Scripps Family Practice.

The next step is to complete data analysis and to refine the curriculum and tools based on the 1-year experience, Dr. Slusser said. "We next hope to engage residency programs at the national level." ■