



Patient Safety America Newsletter

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<http://PatientSafetyAmerica.com>

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Question: What percentage of new drugs offer 'substantial clinical benefit?' A) 10% B) 20% C) 30%

Diagnostic Errors in Hospitalized Patients

A large team of investigators sought diagnostic errors that contributed to a hospitalized patient's transfer to the Intensive Care Unit (ICU) or to their deaths.¹ They looked at the medical records of 2,428 patients treated at one of 29 academic medical centers in 2019. The records were examined by two experts to determine if a medical error had occurred. This included missed or delayed diagnosis. They ascertained that 23 percent of the patients had experienced a diagnostic error and that 18 percent had caused harm (temporary, permanent, or lethal). In 6.6 % of the patients, the diagnostic error contributed to death. The most prevalent causes of diagnostic error were failure to fully assess the patient and failure to order and properly interpret tests. These are obvious targets for improvement.

In my opinion, a patient's advocate has an important role in reducing diagnostic errors. She should ask if all the patient's symptoms are explained by the present diagnoses. If the patient's symptoms are worsening, the advocate should ask if that change in status, such as being transferred to the ICU, needs further diagnostic attention. Finally, if the patient's clinicians seem rushed or overburdened with workload, the advocate must become assertive in seeking full attention to the patient in her care. If the patient dies, the advocate should insist on a full accounting of the cause of death, including missed diagnoses. If a diagnostic error is identified, then the advocate must insist on a plan for correction and that the misdiagnosis be acknowledged in the death certificate.

¹ <https://pubmed.ncbi.nlm.nih.gov/38190122/>

New Drugs and Same Old Story

A Canadian public health physician characterized the causes of why so many new drugs coming to market are of little to no value and what may be done to correct this situation.² The springboard for his opinion was the results of a French study. The researchers looked at the 623 new drugs introduced to the French market from 2008 to 2018 and used a standardized system to assess the therapeutic value of each one. Substantial clinical benefit was found in only 7.7 % of the drugs developed in academia and 2.6 % of the drugs developed by industry.



The author criticizes the drug industry for its recurrent false themes that claim that the pharmaceutical industry is responsible for all the newly marketed drugs and that, despite lack of a breakthrough, they allow more choices for the patient. The author slams the first claim by noting that all the 356 new drugs approved by the US FDA between 2010 and 2019 were at least partially funded by government. The author further notes that 'new' drugs are seldom tested for their efficacy in comparison to existing drugs, so it is unclear if they offer an improvement over existing drugs. In a 'reality check' the author writes: 'Drug companies behave as rational economic actors and focus their

² <https://jamanetwork.com/journals/jamainternalmedicine/article-abstract/2811785>

efforts on products that have the potential to earn them the largest revenue.’ Thus, drugs most useful in only poor countries or those for rare diseases receive less attention. The often-offered complaint from drug companies that more regulation would undermine innovation is dispelled by the huge amount they spend on stock buybacks, dividends, and marketing. The latter is about \$30 billion per year. Urgent action is needed to correct this situation. The wise patient will ask about alternatives to any drug prescribed to them. Ask for benefits and risk of each choice.

Obesity, Social Isolation, and Death Risk

It is well known that people with obesity are likely to experience loneliness and social isolation more often than non-obese people. A small team of researchers sought to determine the interactions of obesity, loneliness-and-social isolation, and risk of death from almost 400,000 individual records in the UK Biobank with a median follow up of 12.7 years in the years 2006-2021.³ The mean age of the people in the database was 56 years and 23% were obese. During the study period, there were 22,900 deaths.

The highlights of the findings were as follows. In obese people reporting social isolation and loneliness the hazard ratio for all-cause death decreased from 36% to 9% as the isolation and loneliness index decreased from highest to lowest when compared to non-obese people. Social isolation had the strongest relationship to an increased risk of mortality among the plethora of factors assessed. The authors call for actions to decrease social isolation and loneliness in older, obese persons to help them live a longer life. The call to us is to find a fellow human being who is obese and may be lonely, and then befriend them and invite them to your social activities. Please see the next summary for another idea to mitigate loneliness in older folks.

Pets May Slow Cognitive Decline

A group of investigators looked at the records of almost 8,000 people of average age 66 years in the English Longitudinal Study of Ageing over a period from 2010-2011 to 2018-2019.⁴ They looked at measures of verbal cognition, fluency, and memory. When they used ‘stratified analyses’ of their data, they found an association between pet ownership in people living alone and slower verbal decline. Pet ownership in those not living alone was not associated with slower verbal decline. The ownership of a pet made the verbal decline in those living alone comparable to those living with others. There was no data on which kind of pet was being kept by the subjects.

The study had several limitations. For example, if the individual had a pet at the start, it was assumed to be kept for the duration of the study. The duration of pet ownership needs further investigation. In addition, the subjects were almost all white, meaning that any generalization to other races must not be made. I might have added that the sort of pet kept may be a factor. Is a pet dog equivalent to a pet fish or pet bird? None-the-less, if you know of an older person living alone, and they seem to be experiencing a decline in verbal ability, you may offer to get them a pet of their choice. Loneliness has been called an epidemic by the US surgeon general.⁵

Hospital Billing Quality

Bills from hospitals can be painful. A study from the Leapfrog consortium characterized the prevalence of three quality billing practices in 2270 participating hospitals that volunteered from among the 3691 that were invited to participate.⁶ The quality measures were as follows: not using legal action to collect on bills, itemizing bills sent to patients within 30 days, and availability of billing service support. Of the participating hospitals, 67%

³<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2814114>

⁴ <https://pubmed.ncbi.nlm.nih.gov/38147332/>

⁵ <https://www.hhs.gov/about/news/2023/05/03/new-surgeon-general-advisory-raises-alarm-about-devastating-impact-epidemic-loneliness-isolation-united-states.html>

⁶ <https://pubmed.ncbi.nlm.nih.gov/38109155/>

did not use legal action to collect payment, 55% sent timely and itemized bills, and 95% provided access to billing services. Only 38% of surveyed hospitals reported meeting all three quality standards. A good question for patients to ask when considering hospital treatment is to ask how flexible they are when it comes to paying bills. Almost 2/3rd of people with medical debt avoids seeking medical care because of their debt. This phenomenon is only experienced in the U.S. Citizens in other developed countries do not incur medical debt.

Walking Ability Tied to Fracture Risk

The self-reported ability of Australians 45-years-old and older to walk 1000 meters was divided into three categories: no limitation, a little limitation, and a lot of limitation.⁷ The study included 239,000 subjects with a mean age of 63 years. Of these, 20 percent reported some degree of limitation. During the 4.1-year average follow up, 7200 women and 4270 men experienced a fracture (hip, vertebral, or another site). The hazard ratios for fracture compared to those with no walking limitations were as follows: women with a little limitation, 1.32; women with lots of limitation, 1.60; men with a little limitation, 1.46; and men with lots of limitation, 2.03. The authors conclude that clinicians should assess walking ability and those with limitations should have more attention given to bone health assessments.

Perhaps there is a warning here for people who do not want to become a hospitalized patient because of a bone fracture: pay attention to your walking ability and select activities that are unlikely to cause a fall leading to a bone fracture. A friend, who I would judge to have limited walking ability, recently fell, fracturing her hip in a dark parking lot. In the hospital, she got a hip replacement and then contracted COVID, likely thanks to no masking used by her physical therapists.

Cancer Diagnosis after Recent Weight Loss

I know of someone being evaluated for an underlying health problem because of recent, *unintended* weight loss. At my last physical exam my primary care physician noticed I had lost some weight and asked me if that was intentional. I said it was. ‘OK, then,’ she said.

A recent study by a huge team of investigators explored a longitudinal database of healthcare professionals’ health behaviors, targeting their weight loss in previous 2 years, and then looking at cancer incidence in the year following this period.⁸ The investigators assembled questionnaire data from two large databases developed in the U.K. starting in 1976 (nurses) and 1986 (male health professionals). They examined records of 157,500 persons of mean age 62 years. They found the following: Among participants categorized with low intentionality for their >10% weight loss, there were 2687 cancer cases/100 000 person-years. This was compared with 1220 cancer cases/100 000 person-years for those without recent weight loss.’ The most common cancers in those with >10% unintended weight loss were in the upper GI tract. These included cancers of the esophagus, stomach, liver, and pancreas. Other cancers less strongly associated with weight loss included the following: hematological, lung, and colorectal. Cancers *not* associated with unintended weight loss included the following: breast, genital, urinary, and melanoma.

Obviously, the investigators could not directly ask individuals that lost more than 10% of their body weight whether they intended to lose that weight or not. Intentionality for weight loss was judged from recorded improvements in diet and increases in exercise, which would indicate that the individual intended to lose some weight. In other words, if one keeps exercising and eating at a constant level and a 10% loss of weight happens anyway, then there is a need for evaluation for cancer.

⁷<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2814210>

⁸ <https://jamanetwork.com/journals/jama/article-abstract/2814132>

Links of Interest

****This is a must see from a physician on Facebook about private equity:**

<https://www.facebook.com/reel/979812533121198>

Becker's Hospital Review: Selling a Medical Practice:

<https://go.beckershospitalreview.com/financewp/selling-a-medical-practice-strategies-to-improve-outcomes-for-owners>

Health Watch USA Newsletter:

<https://www.healthwatchusa.org/HWUSA-Publications/Newsletters/20240101-HWUSA-Newsletter.pdf>

Who is profiting the most in healthcare:

<https://www.statnews.com/2024/01/02/heres-whos-profiting-the-most-in-health-care/>

Pioneering woman of color allegedly died from medical neglect in Texas hospital:

<https://www.thedailybeast.com/eddie-bernice-johnson-died-terrible-death-due-to-medical-neglect-family-alleges>

<https://www.texastribune.org/2024/01/04/texas-eddie-bernice-johnson-lawsuit/>

Malpractice and no discipline harms women in Virginia

(long): <https://magazine.atavist.com/damages-javaid-perwaiz-virginia-obgyn-surgeries-lawsuit/>

Danger of asthma drug hidden for years (NYT):

https://www.nytimes.com/2024/01/09/health/fda-singulair-asthma-drug-warning.html?unlocked_article_code=1.MU0.R3jK.s011gfJT9P&smid=url-share

Higher cancer rates in young adults (Becker's):

<https://www.beckershospitalreview.com/oncology/experts-scramble-to-understand-rising-cancer-rates-in-young-adults.html>

Medical mistakes more likely in women (NBC):

<https://www.nbcnews.com/health/health-news/medical-mistakes-are-likely-women-minorities-rcna133726>

What's that rash? Get help from AI (Fortune):

<https://fortune.com/2024/01/04/ai-make-business-better-ada-health/>

Greedy Neurosurgeon in Portland:

<https://www.wweek.com/news/2024/01/17/the-4700-pee-test-a-portland-neurosurgeon-issued-big-bills-and-received-an-extraordinary-comeuppance/>

Great letter by my patient safety colleague (Lori):

<https://www.concordmonitor.com/My-Turn-Changing-the-reality-for-NH-patients-53685800>

A \$33 million kickback scheme nets a jail term for a Pharma manager:

<https://www.nj.com/middlesex/2024/01/ex-pharmacy-president-sentenced-to-prison-in-33m-kickback-scheme-feds-say.html>

Government claims to be better controlling the value of medical diagnostic tests: https://www.fda.gov/medical-devices/medical-devices-news-and-events/fda-and-cms-americans-deserve-accurate-and-reliable-diagnostic-tests-wherever-they-are-made?utm_medium=email&utm_source=govdelivery

74% of physicians are now employees (Beckers):

<https://www.beckersasc.com/asc-news/the-race-to-acquire-physicians.html>

Leapfrog – Check your hospital's safety grade:

<https://www.hospitalsafetygrade.org/>

GAO to investigate medical device recalls:

<https://www.propublica.org/article/gao-will-open-investigation-into-fda-oversight-of-medical-device-recalls>



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Answer to the Question: A) 8% see reference #2

Find past newsletters:

<http://patientsafetyamerica.com/e-newsletter/>

