

Question: How many reports of child abuse happened in 2018 in the US?

- A) 200,000 B) 300,000 C) 400,000 D) 500,000 E) 600,000 F) 700,000

Reduce Your Risk of Atopic Dermatitis (AD)

Children worldwide have a roughly a 20 % chance of experiencing AD. Adults in the UK have about a 4% chance, but this increases to about 8% in older adults. Fast food consumption has been associated with increased risk of AD, up to 70% in adolescents. Fast food is known to be high in sodium; however, there has not been a study of an association between sodium intake and risk of AD. A small group of investigators asked if such an association existed using measurements of urinary sodium excretion and risk of AD in 216,000 subject records in the UK Biobank.¹ The subjects' average age was 56 ½ years, the average sodium excretion was 3 grams in 24 hours, and 54 % were female.

About 5 % of the subjects had a diagnosis of AD. The main finding was that a 1 gram/day increase in sodium excretion was associated with a 10% increase in the risk of an AD diagnosis. In a



validation study, 13,000 participants, based on their self-estimated intake of sodium, were found to have an excess risk of AD of 20% for each gram/day of excessive sodium intake. The authors speculate as follows: most of the body's 'exchangeable' sodium is stored in the skin. Excess sodium there is associated with autoimmune and inflammatory conditions, such as AD. The bottom line for those with AD is to find a way to reduce sodium intake. This may be especially important for children and adolescents. Reduced sodium intake has many other benefits which are likely well known to my readers.

Opioid Use Disorder Medications after a Nonfatal Overdose

A small team of investigators asked if fee-for-service Medicare beneficiaries that had experienced a nonfatal opioid overdose had received support, including medications to counteract another overdose, and whether the availability of the antidote was helpful.² The team looked at 137,000

¹<https://jamanetwork.com/journals/jamadermatology/article-abstract/2819233>

²<https://jamanetwork.com/journals/jamainternalmedicine/article-abstract/2820177>

records of persons of average age 68 years that had had an index event of an opioid overdose. In the 12 months after that event, almost 23,000 experienced another nonfatal overdose, and 1,300 died from a fatal overdose. Only six percent of the cohort had filled a prescription for naloxone. Some sought behavioral health services which reduced the risk of a non-fatal overdose by 30% and a fatal overdose by 75%.

The small percentage of beneficiaries filling prescriptions for naloxone suggests that patients are not being given the support they need to manage their opioid problem, either through a prescription for naloxone or community-based behavioral support. The implications of this study are obvious. If you are a caregiver of someone who has had an opioid overdose incident, make sure that they have naloxone available to reverse any subsequent overdose. Naloxone (or Narcan) is now readily available over the counter or from online suppliers such as Amazon. The latter seems to have lower prices (\$34-\$45). I know of two young adults that died from an opioid overdose. Their lives may have been saved if naloxone were readily available.

Cancer Survivorship Services

A couple of experts wrote their perspective on the delivery of care to cancer survivors.³ The basis for this was an upgrade in 2021 from the Commission on Cancer (CoC) that proposed a new standard for serving those who are in the process of surviving. The CoC is the accrediting organization for cancer care centers, so its opinion has influence. The old standard was a terse approach that failed to address the panorama of needs many cancer survivors have. There is a need for automated tools that can be triggered if the survivor crosses a threshold (e.g. illness from chemotherapy, loss of appetite, or increase in pain) that suggests they need support. Teams may be formed to address needs in a multidisciplinary way. The new standard, while initially not well received, has fostered an ‘outbreak’ of methods to support cancer survivors. Part of the

³ <https://pubmed.ncbi.nlm.nih.gov/38958982/>

problem is that support can be expensive, and it is unclear how those who give the support will be paid. It seems to me that insurance companies should pay for this kind of support.

The message to patients and those who are caring for cancer survivors is to ask when considering a CoC for initial cancer treatment how their cancer survivor support system works. This is especially important *before* starting the treatment plan. You do not want to ask after successful surgery about a survivor’s plan and find that there is not one.

Lead in Drinking Water of Dialysis Patients

A small team of experts in Massachusetts sought a relationship between the amount of lead in a susceptible person’s drinking water and adverse effects.⁴ Their susceptible cohort consisted of adults going on dialysis for renal failure. The adverse effect was increased use of Erythropoiesis-Stimulating Agents (ESAs) in the first 90 days of dialysis. These agents stimulate the bone marrow to produce more red blood cells to deal with the effects of chronic renal failure. In other words, something is increasing the need for more ESA.

The investigators looked at 6,400 records of dialysis patients of average age 57 years; 65% were female. Was lead in the patients’ drinking water increasing their need for ESAs? The answer was that there was an association. Higher lead in the patient’s drinking water induced a 15% higher risk of the need for more ESA.

The Mayo Clinic has a patient-friendly tutorial on lead poisoning.⁵ It is particularly toxic to children younger than 6 years old. There is a long list of symptoms associated with lead poisoning. Likewise, there are also many household sources of lead – old paint, dust, drinking water, and soil. The EPA estimates that about 9 million US households get their water through lead pipes, which were in

⁴ <https://jamanetwork.com/journals/jamainternalmedicine/article-abstract/2818894>

⁵ <https://www.mayoclinic.org/diseases-conditions/lead-poisoning/symptoms-causes/syc-20354717>

more common use before 1986.⁶ There are a variety of lead-in-water test kits available. You probably want one with a sensitivity below 5 ppb. The EPA has a tutorial on protecting your children from lead exposures.⁷

Please Identify Child-Abuse Pediatricians

Three experts wrote about the legal and ethical picture associated with pediatricians identifying themselves as ones that are trained to determine if a child is a victim of abuse.⁸ These pediatricians are called ‘Child Abuse Pediatricians (CAPs).’ Apparently, there are no national standards guiding how CAPs introduce themselves and disclose how they are associated with Child Protective Services (CPS). The experts suggest that failure to reveal their role to parents is an ethical violation that needs attention. Generally, a CAP is called to consult by the child’s care team. If the CAP determines that the child is the victim of abuse or neglect, the care team is informed and often the CPS and law enforcement are informed.

Obviously, introducing oneself as a CAP to the child’s parents or guardians can be fraught with tension as the parents sense an accusation of child maltreatment. The parents will be expected to explain how apparent injuries have occurred. The CAP training should include ‘parent friendly’ ways to introduce yourself as a CAP, and they should tell the parents that their findings may be shared with CPS and law enforcement. Child abuse is not a rare happening. In 2022, 176 children died from child abuse in Texas.⁹ Across the US, there were 559,000 reported victims of child abuse, which had decreased slightly from a high of 698,000 in 2018.¹⁰

⁶ <https://www.fastcompany.com/90991052/lead-pipe-map-states-rank-drinking-water-service-lines-epa>

⁷ <https://www.epa.gov/lead/protect-your-family-sources-lead#protect>

⁸ <https://pubmed.ncbi.nlm.nih.gov/38739410/>

⁹ <https://www.statista.com/statistics/255050/number-of-child-fatalities-due-to-abuse-in-the-us-by-state/>

¹⁰ <https://www.statista.com/statistics/639375/number-of-child-abuse-cases-in-the-us/>

COVID Restrictions and Death Rates in the US

There has been much controversy about whether stringent restrictions were necessary to effectively reduce deaths from COVID 19 during the pandemic of 2020 to 2022.¹¹ A scientist sought an answer to this question by comparing the death rates from 2020 to 2022 to the death rates from 2017 to 2019 by state. The investigation found that in states with weak restrictions the excess death rate was 417/100,000, whereas in the states with strong restrictions the excess death rate was 282/100,000. There were limitations to this cross-sectional study, but the impression is clear that strong restrictions saved thousands of lives. The author noted that there were harms associated with strong restrictions including those on isolation of school children and nursing home residents.

Medical Data on Fall Prevention

The US Preventative Services Task Force (USPSTF) rounds up all quality studies pertaining to a topic, assesses the quality of each, and then makes a recommendation based on the evidence. The USPSTF found 83 studies of fair-to-good quality that collectively investigated the value of six strategies to prevent falls.¹² This was a complex study with a variety of strategies and adverse fall outcomes. The strategies were grouped as ‘multifactorial’ and exercise. Without going into painful detail, exercise demonstrated the greatest benefit in preventing a variety of falls in multiple good-quality studies involving adults aged 65 years and older. Exercise included walking an hour per week or participating in an exercise group.

Applying the findings to real world situations requires three steps. The first is to identify people at risk of falling. Once a person is suspected of being a fall risk, they must be persuaded to get involved in an exercise group. Given that step, the final one is to track whether the patient is adhering to the exercise protocol. Or one could simply walk a

¹¹ <https://jamanetwork.com/journals/jama-health-forum/fullarticle/2821581>

¹² <https://jamanetwork.com/journals/jama/fullarticle/2819574>

mile in 20 minutes at a 3 mph pace three times per week.

Interesting Links

Patient safety events reported up to 2022:

https://patientsafetyj.com/article/74752?utm_content=buffercd974&utm_medium=social&utm_source=linkedin.com&utm_campaign=buffer

Censured doctors hired by Wisconsin prison system (NYT):

https://www.nytimes.com/2024/07/02/us/wisconsin-prison-doctor-health-care.html?unlocked_article_code=1.4U0.lC3p.qa7bL-s7TQQ9&smid=em-share

Listen to the nurses if you want to know which hospitals offer quality care (by department)

<https://careluminare.com/raleigh-durham-23-nurse-interviews-findings/>

Stop C. auris spread in hospitals by thorough cleaning of equipment:

<https://www.healthcarefacilitiestoday.com/posts/Stopping-C-Auris-Transmission-from-Adults-to-Infants--29552>

Breast implants are not as safe as many suppose:

<https://www.frontiersin.org/journals/global-womens-health/articles/10.3389/fgwh.2024.1359106/full>

It took eight years to fine San Diego hospital for baby's death:

<https://www.sandiegouniontribune.com/2024/07/15/why-did-it-take-eight-years-for-the-state-to-fine-a-san-diego-area-hospital-for-causing-babys-death/>

Good video on medical harm (26 minutes):

<https://www.youtube.com/watch?v=09IVcL6pACU>

The dangers of for-profit psychiatric hospitals:

<https://www.statnews.com/2024/07/08/psychiatric-hospital-investor-owned-chains-operate-under-nonprofit-brands/>

Texas among the worst states for women's health and reproductive care (Commonwealth Fund):

<https://www.commonwealthfund.org/publications/scorecard/2024/jul/2024>

Mentally ill Californians get huge medical bills:

<https://calmatters.org/health/mental-health/2024/07/state-hospital-bill/>

UK surgeon suspend after harming hundreds of women, in part due to informed consent failure:

<https://www.bbc.com/news/articles/cw0y189yknzo>

Hospital executive called to testify about his apparent greed at patients' expense:

<https://www.cbsnews.com/news/steward-health-care-ceo-ralph-de-la-torre-senate-subpoena/>

Make an informed decision about where to have your healthcare:

file:///C:/Users/johnt/Downloads/Make%20an%20Informed%20Decision%20About%20Your%20Care_FIN_AL.pdf

The vast majority of patients want to view their test results even if their doctor has not yet looked at them:

<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2802672>



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Answer to the Question: (F) 698,000, reference 10.

Find past newsletters:

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

