

The Medical News Report for July 2013

#18

I hope your summer is going well. Also, I hope some of these medical subjects I am reporting on have helped you modify your lifestyle, talked more with your doctor, become more interested in your own health, and increased your appetite for medical knowledge. With healthcare going the way it is headed, YOU MUST GET BETTER INFORMED AND INSIST ON COMPLETE AND SATISFYING VISITS TO YOUR DOCTORS. If you are seeing a P.A. or a nurse practitioner, insist on seeing the doctor for a moment to be sure he/she agrees with the recommendations for treatment, prevention, etc. It is your health, and you deserve the best. If you are not satisfied.....switch doctors. Communication courses were never taught in medical school!



Subjects for July: SHORTER THIS MONTH!

- 1. Drug comparisons of the statins.**
- 2. The Supreme Court saves the day.**
- 3. The white population is diminishing faster than predicted.**
- 4. High risk pregnancy in the young and older (>40)**
- 5. How to stay healthy?**
- 6. Diagnosing and monitoring TYPE 2 Diabetes**
- 7. The Cervical Spine-diagnosis-Part 2 on the Spine**
- 8. Organ Transplantation**
- 9. Hospital transparency with medical bills**
- 10. Did Michael Douglas really get cancer from having sex?**
- 11. Double check your doctor and pharmacist before accepting a filled prescription.**
- 12. Obama trying to sell Obamacare**

1. Comparison of drug costs—the Statins

One of the most common prescriptions written today is for the statins. We have been told that these wonder drugs will decrease the risk of heart attacks, strokes, and possibly lower our risk for Alzheimer's disease. The facts keep changing about which one of the 7 statins on the market are best to lower cholesterol, decrease LDL and increase HDL----for a complete discussion on the lipids refer to a previous Medical News Report www.themedicalnewsreport.com

By doing this, it is believed by experts that this lowers our risk of heart attacks. I have personally been on several of these statins, and the results have been a little better on one more than the other. But does the cost of simvastatin's (Zocor-very low) for instance, outweigh the reported better job by rosuvastatin (Crestor)? What if I told you that Zocor cost \$18 a month and Crestor was over \$200 per month. What if I told you that some studies are saying that all statins lower the risk of heart attack whether they lower the cholesterol or not? WHAT? I JUST READ THAT! Look it up.

Also, studies have just come out stating that Crestor, Lipitor, and Simvastatin cause undue **elevations in blood sugar, so if you are pre-diabetic or diabetic, talk to your doctor about other alternatives. Also, all statins can't be taken if on several meds, especially erythromycin (i.e. Z-pack), and clarithromycin which inhibits the metabolism of the statins. Go to the internet for a complete list.**

All statins work the same.....they block a liver enzyme that is necessary for the liver to produce cholesterol, but some have more adverse side effects than others. Obviously, Big Pharma is working overtime to find a new statin that is better than the rest. As stated, there are already 7 on the market. Welcome the newest statin....pitastatin (Livalo). With so much money at stake every company wants to come up with a better statin. It may not make a difference if it is true that vascular disease is prevented by statins regardless of how effective they are at reducing cholesterol. Talk to your doctor and ask him about this.

Diet and regular exercise is even more important. So don't think these drugs give you a pass on losing weight, lowering blood pressure, reducing fat in your diet, and exercising at least 30 minutes/day. If you fit the metabolic syndrome, you must get to work. I discussed this before too.

2. White population diminishing faster than expected, and some info on white women-WSJ

The white population is slowly becoming a minority. More white Americans are dying than being born for the first time in modern

history--according to the US Census Bureau. White women are having fewer babies, getting married later, and just having babies is taking a backseat to careers. They make decisions for the family, especially health issues. There are more female doctors than ever before. That goes for most professions. Men are getting outcompeted. The poor, however, are having the most babies regardless of race, and that affects the healthcare dollar BIGTIME. Also teens have more pre-term low weight babies (1 in 10) and women over 40 have more birth defects. These are facts that impact the cost of healthcare.

3. Supreme Court invalidates genetic company's right to a patent for discovering a gene.

The Court told a genetic company they could not patent a gene whether they discovered it or not, and therefore from now on, genes can't be patented. That is great news, because if a company could, they would be the only one to test for it, and that would skyrocket the cost because of their monopoly. It may have been the reason BRCA gene test costs \$3000. Now, the competition can cut the costs, and that saves us money. More importantly, that company would be the only one to do further research on it. This will open up the field of genetics. Way to go Supreme Court!! They reversed a lower court's decision. America wins!!

By JESS BRAVIN and BRENT KENDALL



WASHINGTON—The Supreme Court unanimously held Thursday that human genes cannot be patented, even when isolated from the body, a ruling expected to quickly expand access to genetic testing while potentially allowing inventors to retain rights to artificially created DNA.

The decision marked the latest step in the court's decadelong march to toughen the requirements for patents. The justices repeatedly have declared that 21st-century innovation depends less on locking up intellectual-property rights than on expanding access to discoveries in order to spur further progress.

4. How to stay healthy—hand washing!

Hand washing is the most common simple way to stay healthy. Think about all the hand shaking.... the number of times per day you touch your mouth, nose, go to the bathroom, etc. A study at Michigan State found that only 5% of people wash their hands properly to get rid of germs on their hands. 33% didn't use soap, and 10% didn't even wash their hands at all. Here is some more information:

- ✦ Men were less likely than women to clean their hands. Fifteen percent of men and 7 percent of women didn't wash their hands at all. When they did wash their hands, only 50 percent of men used soap, compared with 78 percent of women.
- ✦ People were less likely to wash their hands if the sink was dirty.
- ✦ People were more likely to wash their hands earlier in the day. This may be because when people are out at night for a meal or drinks, they are relaxed and hand washing becomes less important, the researchers suggested.
- ✦ People were more likely to wash their hands if they saw a sign encouraging them to do so.

It takes 15-20 seconds to thoroughly wash your hands. The average time in this study was 10sec. If you have children or grandchildren, good luck! You live in a germ environment. Use Clorox wipes on all surfaces, telephones, TV remote, door knobs, etc. and wash your hands frequently....for 15-30 seconds.

5. Diagnosing and monitoring Diabetes-Part 3

Routine testing of fasting blood sugars will alert your doctor that you are either normal (less than 100mg/ml), pre-diabetic (100mg/ml to 125mg/ml), or diabetic (greater than 125mg/ml). Early diabetes has no symptoms, just like high blood pressure.

There is a second test---hemoglobin A1-c. If you have more than 6.5mg/ml of this type of hemoglobin in the blood (hemoglobin is the protein that iron bonds to), that would also concern your doctor that you are or becoming diabetic. But it is not a reliable test to diagnose diabetes, as studies have shown that as little as 43% of mild diabetics have normal HgA1-c. Blood sugar also bonds to this protein,

implying a higher blood sugar. If the test is abnormal, it is recommended as a **monitoring only test**.

There was a home test recently cleared by the **FDA** to monitor **Hg A1-c**. Maintenance of optimal levels of blood sugar and Hg A1-c is the goal for good control. Control will minimize complications from diabetes.

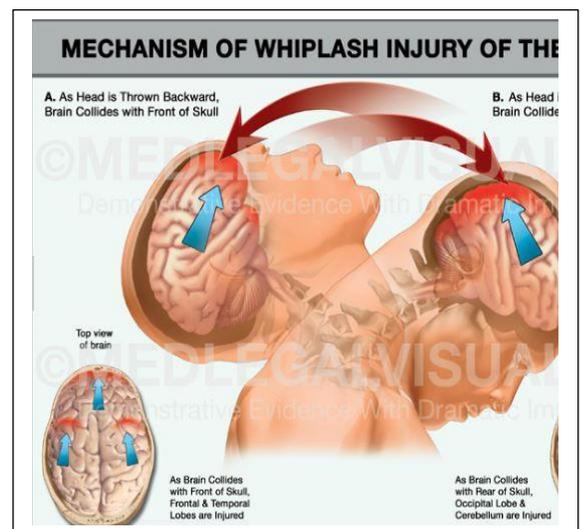
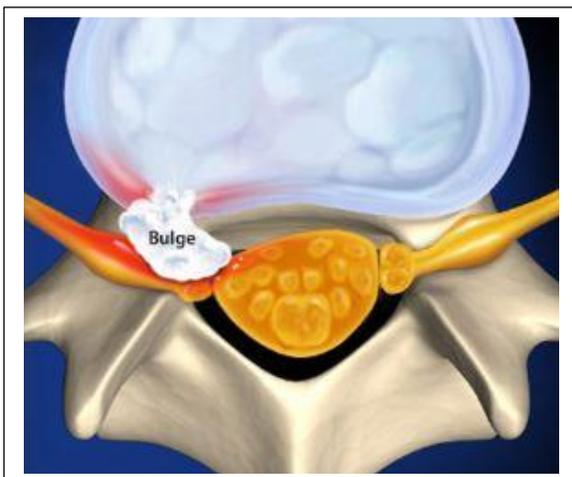
Testing for **ketones** and how acid the blood is are other tests that are done if a diabetic gets out of control. Ketones are breakdown products of sugar, and very acidic...hence **diabetic ketoacidosis**. When a diabetic gets sick for any reason, this is of great concern, and often the way type 1 diabetic children are initially diagnosed. Ketones are toxic to the brain and can cause **coma**. This condition requires hospitalization and control with regular insulin (fast acting—1-2 hours). Death will occur if not reversed.

Next month, I will report on other complications of diabetes.

6. The Cervical Spine—Part 2—diagnosis

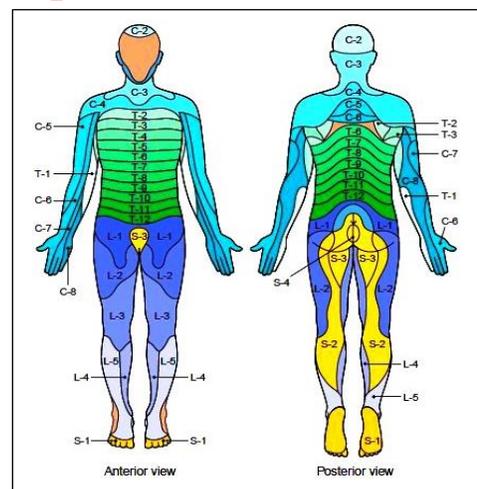
It is difficult to report on diagnosing spine problems for entire spine, so it is appropriate to report on each section of the spine separately. I have been studying the spine for years because of my personal experience. Here are some pointers.

Bulging disc between 2 vertebrae



Most cervical spine problems come from injuries (whiplash (see above--hyper-extension/flexion injuries), arthritis, heredity, and surgery. The head is a very big ball to balance on our shoulders, and it takes a strong set of muscles in front and back of the neck and also the upper back keep the head erect for a lifetime. When we were born, we could not even pick our heads up. These muscles can be destroyed with surgery, nerve injury, and radiation scarring. In my case, all of the above applies. Loss of range of motion, headaches, pain in the shoulders, upper back and radiation of pain or numbness down into the arms and hands is common. This is called **radicular pain.**

DERMATOMES are shown to the right!



Pain, numbness and weakness of specific muscle groups occur depending on the level of spine. In the last report, I showed you the **dermatomes of the body. Knowledge of these distributions, allow healthcare professionals to diagnose (clinically) the level (s) of nerve abnormalities, which can be confirmed with radiological tests (X-ray, MRI. CT scans).**

Spasms in the neck, aching, and stiffness all indicate spine and muscle problems, but **stress can be the cause or a contributing factor in many cases. If these symptoms persist, see your doctor.**

NSAIDs (non-steroidal anti-inflammatory drugs) are very helpful, but taking them can be a problem, so see a doctor, especially if you are taking OTC drugs like Aleve, etc. every day. Regular use can damage the heart and kidneys. Even prescription anti-inflammatory drugs can be even worse. Indocin caused my

kidneys to go into failure (increased creatinine, BUN). It took my kidneys 1 year to return to normal. Thanks to my doctor, he was checking these tests routinely. I can no longer take any of these drugs.

Acetaminophen (Tylenol) is helpful for mild pain, but regular use (more than 4000mg per day) can destroy the liver. One Tylenol has 850mg---do the math).

Next month, I will report on disc and arthritic changes and provide you with photos of these conditions and the tests that can confirm them.

7.The end of rejection for human organ transplantation?

Assuming a good result from a transplant, one of the main problems transplant patients face is rejection of those organs. The issue of transplants has been in the news because of a child that needed a lung transplant. The issue is far from over, as there are thousands of patients on waiting lists to get a donated organ. Facebook now allows users to put their decision to donate their organs on line, and has boosted by the thousands of Americans to donate their organs. But black market organs is a big business, so be aware. Also, this week, the decision was made to use **adult organs in children, which will be a big boost for kids. Only a piece of the organ is necessary.**

Now, Massachusetts General Hospital in Boston is transplanting kidneys and the patient's own bone marrow at the same time. This apparently is decreasing the need for lifelong immunosuppressive drugs to prevent rejection. These immunosuppressive medications create potential side effects for these patients including cancer, life threatening infections, tuberculosis, etc. Read below:

Ending Body Rejection of Transplants

By Alexandra Sifferlin | June 06, 2013 | 0



The transplant team from the Massachusetts General Hospital Transplantation Biology Research Center is trying to combat organ rejection and has developed an unconventional procedure that avoids lifelong dependence on drugs.



STURTI / GETTY IMAGES

In 2008, the researchers, led by Dr. David H. Sachs and Dr. Megan Sykes, transplanted four donors' bone marrow along with their kidneys. This appeared to mitigate the problem of organ rejection without the need for loads of immunosuppressive drugs that can plague patients with lifelong side effects.

Doctors prepare the patient's immune system before the surgery by using drugs that target the immune systems's T cells — which look for foreign invaders like bacteria or tissue from outside donors — then eliminate them. They then transplant both the donor's kidney and bone marrow. The bone marrow cells then rebuild the body's immune system as a chimera, which is a hybrid combination of the patient's cells and the donor's cells.

This allows the body to accept the donated organ. Although the procedure is still not widely available, the researchers are conducting the procedure again in 15 kidney patients.

Ref: Time Magazine

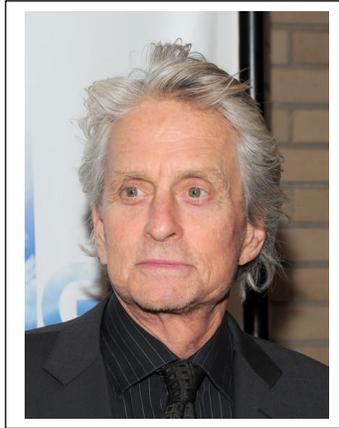
8. Hospital pricing transparency

I read IBJ Health Reform, which is from Indiana, and the articles they put out are spot on. It is time that hospitals and insurers become transparent with pricing. It is time YOU ask your doctors and hospitals the cost of procedures, tests, operating room fees, recovery room, hospital costs per day. If we demand this, it will come even faster. In IBJ Health Reform this was discussed:

They want three key things to happen to bring the health care games to an end:

1. Require all payers—that's private health insurers such as WellPoint and government programs such as Medicare—to make their medical claims data publicly available, although stripped of patient-identifying information.
2. Encourage all health care providers—hospitals, doctors and nurses—to use these payer data to give every patient personalized pricing information before he or she receives care.
3. Make total price information available to health care providers who are working in contracts that reward them for reducing health care spending.

9. Did Michael Douglas get throat cancer from having sex?



The short answer is probably, but the real answer is much more complicated. The most common causes of throat cancer are tobacco and excessive alcohol, but now there is a third serious cause (HPV). Mr. Douglas had all of these risk factors. A combination of these factors is the reason he got cancer.

The HPV (human papilloma) virus that I have spoken about in previous medical news reports is becoming an epidemic. Some 20% of 20 year olds are positive for one of the many HPV strains. All uterine cervical cancer is caused by this virus, as is anal, and vagino-vulvar cancers. That is why the HPV vaccine was created, but there is one catch. It is only preventative! Once, the HPV virus is in your system, it is there for life, just like the herpes and chicken pox viruses. Therefore, the vaccine plus 2 boosters need to be administered before a young person is sexually active. The CDC recommends 8-12 years of age with catch up to 18 years. Only 2 strains are usually the culprits (16 and 18) that cause most of the cancers. The latest studies are showing great results with the vaccine, with a drop in infections in 13-20 year olds by 50%. The vaccine is working!!!! But only 32% of young girls have had all three shots.

The throat cancer connection has only been known for about 10 years. The research has not even proven it is causal, but as many as 70% of these oral and oropharyngeal cancers have the HPV virus present. Interestingly, the positive cancers are 30%

more curable, and the reason for that is unknown, except it is hypothesized that alcohol and tobacco are less of a factor.

Most of the patients with HPV positive cancers are younger, but probably it still takes many years for it to cause a cancer.

Michael Douglas did not get this cancer from Catherine Zeta-Jones, in my opinion. He was positive for HPV for many years before being with her.

Of course, the big question is, if someone is HPV positive, do they know it?? NO!!! Infections are silent. These cancers do not necessarily occur in sexually promiscuous people either. There is no treatment for adults, and no way to prevent it unless the vaccine is given. Two generations of Americans are going to have more of these cancers. Be a responsible parent or grandparent, and see to it the kids get the vaccine.

10.Obamacare prepares to sell Obama-care to a nation that does not want it.

President Obama is trying very hard to solidify his legacy by going all out to a nation who says they don't want his healthcare program. 49% are against Obama-care. One would expect the other half to be in favor of it since they are the recipients of benefits. Here is a catch....he has to convince 2.7 million Americans from age 18-35 to buy this insurance through exchanges. These are the healthiest Americans of all, and Obama needs them to balance the cost of all the recipients who will soak up mega-dollars because of major healthcare issues. If he is unable to convince the young to buy through these insurance exchanges, the exchanges will fail, and so will Obama-care. Look for TV commercials to try to convince folks to purchase health insurance. They are already hitting up the NBA and the NFL, but they aren't biting. The law requires it, but will they defy the law and pay the fine? Most Americans don't even understand it, and we are all paying for it.

10.Double checklist for ensuring you are getting the right prescription

This is a good checklist for you to be sure you know you are getting the right prescription from your doctor and that the pharmacy is filling it properly.

Double-Checking your Doctor

1. When your medical provider prescribes any medication, ASK WHAT IT IS. Get the name and write it down. Many doctors will mention brand names (easier), but yet prescribed a generic because of insurance reasons. If there are two names for the drug, write both of them down.
2. Ask the *reasons* for the medication, unless it is obvious.
3. Ask what *dosage* you are to take and how often. Inquire as to the duration you are to take it.
4. Ask about any potential side-effects.
5. Make sure your medical provider knows other medications you may be taking (including over-the-counter medicines), especially if you are seeing more than one doctor. Many drugs can have adverse interactions if taken together.
6. If the medical provider gives you a written prescription, read it. Make sure it matches what he or she just told you. Unfortunately, many prescriptions use short-cut abbreviations in Latin. For instance, QID means "four times per day" and PRN means "as needed". You may need to look up these meanings on the Internet or ask your medical provider before they take off to the next room. If the medical provider sends the prescription electronically to the pharmacy, you may need to address those questions later with the pharmacist.

As the patient, you have a personal responsibility to look up the medication you are taking and familiarize yourself with the usual dosages and usual side-effects. Know what you are taking!

Double-Checking your Pharmacist

1. When picking up your prescription, read the label carefully and make sure the medication prescribed by your medical provider matches the medications in the prescription. Ask the pharmacist if there is any discrepancy.
2. If your medical provider told you to take the medicine for ten days, make sure there are ten days worth of medications in the bottle.
3. Some medications are available in pills, capsules, or liquids, so make sure the type that was prescribed is in a form you can take.
4. The pharmacist should give you a print out of patient information about the drug that

A recent study showed that with 5 generic companies creating the most generic drugs that the constant color change of pills confuses patients. Be aware that the pill color will change with each company.

Remember, you must be on the lookout for mistakes on prescriptions. They happen more than you think. Question the pharmacist, look at the prescription while still in the pharmacy, and be sure you know the name of your pills.

**Happy 4th of July. Enjoy your family, good health,
and stay well, my friends, Dr. Sam**



