

POSTS MADE IN FEBRUARY 2012

[ARE PATIENTS CONSUMERS?](#)

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When you are relaxing and watching your favorite evening television program or surfing the Internet and advertisements pop up for a cholesterol, anti-aging or arthritis medication, it leaves no doubt in your mind that you are being targeted as a consumer of health care.

Wikipedia defines a consumer as an individual who uses goods generated within the economy. As a health care consumer you need to be equipped with the information to choose your providers, medications and special services, based on the right price, features, brand recognition and appeal.

In the past if you had a medical problem, you saw your local general practitioner. He or she suggested a treatment and you generally followed those recommendations with little decision-making desire or power on your part. You were okay with that.

Today, there are so many variables, including cost vs coverage, efficacy of the treatment, and complex evidence-based diagnoses, that force the patient to shop for health care and make choices. The development of consumer directed health plans that most employers support because they save money, put you in the driver's seat when choosing health insurance. These plans give you options for choosing your provider, hospital, pharmacy and other peripheral services such as therapists and clinics. They encourage you to choose health savings programs and flexible spending plans which include high deductibles and ways to put aside money to help pay for extraordinary health expenses should they arise. The cost analysis involved with consumer directed health plans forces you to stop and think about whether or not to seek treatment or put it off; whether to go to the community hospital or look for a specialist at a large academic teaching hospital where the costs are higher; whether to take the newest medication developed for a particular condition or a generic that will be cheaper and covered by the plan. Does this force you to become an educated consumer of health care? You bet.

This is not a bad thing. It is the way you are empowered with the information and financial responsibility to own your health care decisions and deal with your health in a holistic way rather than engaging in a knee jerk reaction to sickness and disease. It is a way of forcing you to plan and take actions that reinforce wellness prevention, compliance, treatment and early intervention programs. There is no question that consumerism in health care is a fact that you cannot avoid. Whether or not it will help to improve the quality and efficiency of your care and result in better outcomes is up to you.

[HOW TO FIND GOOD HEALTH INFORMATION ON THE WEB](#)

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It is a well established fact that empowered patients go to the web when they need to find information about health issues. Pew research indicates that 80% of Internet users search online for their health information and that translates into 59% of the total population of the United States looking online for health information for themselves or someone that they care for. These individuals are seeking information on symptoms, treatments, medications and general health such as food and safety issues. Many of these individuals belong to Facebook and Twitter. This raises the questions:

Where do these individuals look for health information?

Should they rely on their social networks?

What are some of the reliable, focused health sites?

There has been major discussions about Facebook recently, which now has over 800 million registered users and has an IPO pending. Facebook claims that there are approximately 175 million individuals who log in daily but these estimates vary widely. For the most part, Facebook visitors are connecting with friends on a variety of personal/social issues and are not specifically seeking health information. On the other hand there have been some remarkable stories of Facebook users finding organ donors and other health assistance and information through this social network. So if you are on Facebook and have a health need or a question, it never hurts to put it out there to your friends.

What about Twitter? Twitter claims to have 175 million accounts. Looking closely we find that of those, 56 million Twitter accounts follow zero persons and 90 million have zero followers. No information exchange there. The rest include small numbers of individuals who follow significant numbers of accounts and a very small percentage who seek health information. Among the health seekers there are tweets and links to a very wide range of resources and issues. Therefore if you like to tweet and are an information junky twitter may be helpful.

There are social networks specifically devoted to patients who are looking for information and communities with whom to share their concerns and thoughts. They are worth checking out and include:

www.patientslikeme.com

www.curetogether.com

www.inspire.com

Web MD www.webmd.com

The most popular of the general health information consumer web sites is Web MD. Web MD has over 80 million unique visitors each month. The site offer just about everything a health care consumer needs, including a symptom checker, a comprehensive database of drugs and medications, a directory, women's health information, and general health issues related to diet, fitness, recipes, life style, exercise and safety. The site includes pod casts, videos, tool kits, training materials, an e-newsletter, even a section on the health of your pets. There is a Web MD app that can be downloaded for all popular smart phones. Web MD does accept advertising so some of the content on the site could be influenced.

Mayo Clinic www.mayoclinic.com

The Mayo Clinic web site offers user friendly content and includes mainstream questions and concerns for consumers, health care professionals and educators. All of the information is vetted by health care professionals. Information on diseases and conditions, a symptom checker,. drugs and supplements, tests and procedures, healthy living as well as information on how to provide first aid on conditions from tooth aches to animal bites is available. There is no advertising on the Mayo Clinic site.

Drugs.com www.drugs.com

Drugs.com is a popular, up-to-date source of free drug information online. it is based on peer-reviewed accurate and independent data

on more than 24,000 prescription drugs, over-the-counter medicines and natural products.

Health Grades www.healthgrades.com

At this site, patients can find doctors, dentists, and hospitals by specialty and location. The individuals and institutions are profiled and rated by patients. The information is objective and reliable.

Department of Health and Human Services, www.healthfinder.gov

This gateway site links to a broad range of consumer health information resources and enables the consumer to search for medical, pharmaceutical and health information from over 1,500 websites, online publications, clearinghouses and databases on every conceivable health topic. It is one of the hidden gems for health information on the web and for the health information seeker is well worth checking out.

There are many other excellent web sites that address specific diseases and issues. A more comprehensive list can be found in my book, **e-Patients Live Longer, The Complete Guide to Managing Health Care Using Technology**

IS THAT SCREENING TEST REALLY NECESSARY?

1 Reply

“We are in the midst of an epidemic of diagnosis. Conventional wisdom tells us that this is good. Finding problems early saves lives, because we have the opportunity to fix small problems before they become big ones. What’s more, we believe that there are no downsides to looking for things to be wrong. But the truth is that early

diagnosis is a double-edged sword. While it has the potential to help some, it always has a hidden danger – overdiagnosis – the detection of abnormalities that are not destined to ever bother us.”

Overdiagnosed: Making People Sick in the Pursuit of Health by H. Gilbert Welch, Lisa Schwartzl, Steve Woloshin, published by Random House, 2011

We are getting mixed messages about whether or not screening for cancer and other diseases is a good thing or a bad thing. We read in the media that early, aggressive treatment is always best, yet some have begun to question that mantra. The belief that cancer screening, for example, will save your life has come under attack. Research now confirms that some cancerous tumors would, in fact, never cause harm because they are too slow-growing to ever threaten your life.

Others are so aggressive that finding them early does not make much difference. Then there are the situations where early detection can make all the difference, actually stopping diseases before they start, e.g. testing blood sugar for diabetes, checking blood pressure, cholesterol and EKG for hypertension and other cardiac issues.

Dr Welch issues a reasonable call for change that would save patients pain, worry and money when he contends that “overdiagnosis is a big problem with modern medicine that leads millions of people to become patients unnecessarily while adding huge costs to an already overburdened system.”

So what is an intelligent empowered patient supposed to do when, for example, there are qualified medical providers who clamor for eliminating screening for prostate cancer and postponing mammograms, while other qualified providers are not only encouraging these screenings but insisting on them for their patients? We know that many of the screening tests have risks, including false positives that lead to invasive biopsies and in some cases irreversible side effects. On the other hand if we look at mammography we also understand that although mammograms don't prevent breast cancer they can save lives by finding tumors as early as possible. Overall mammograms pick up 80-90% of cancers and have shown to lower

the risk of dying from breast cancer by 35% in women over the age of 50. In women between ages 40 and 50 the risk reduction appears to be somewhat less. Some groups including the National Cancer Institutes, the American Cancer Society and the American College of Radiology currently recommend annual mammograms for all women over the age of 40. Others suggest that screening for breast cancer does not need to begin for the general female populace until age 50, with obvious exceptions such as women with a family history of breast cancer.

Creating even more confusion are the results of two long-awaited studies – one conducted in the United states and the other in Europe. These studies were supposed to settle the debate over the value of PSA (prostate cancer) testing. These trials, published in the New England Journal of Medicine, March 2009, appear to reach opposite conclusions. The Prostate Lung Colorectal and Ovarian (PLCO) Cancer Screening Trial reported no survival benefit with PSA screening and digital rectal examination. The European Randomized Study of Screening for Prostate Cancer (ERSPC), however, found a 20% reduction in prostate cancer deaths. The ERSPC study estimated that for every life saved, 48 men are treated and 1,068 men are screened.

Is it therefore left to the patient to figure out whether to undergo screening or not? This is one of the best examples of why being an empowered patient is so important. The patient must weight the benefits and risks, talk to your physicians and ask the following questions:

1. Which test do you recommend for me and why?
2. How much do the tests cost
3. Will my health insurance help pay for these screening tests?
4. How soon after the tests will I learn the results?
5. If the results show a problem, how will we learn if I have cancer?
6. What are my choices once a diagnosis is confirmed?

Patients also need to be sure that their physicians follow a sensible protocol before rusiing into screening tests, including the following:

1. Physical exam and history. This exam checks the body for general health as well as signs of disease such as lumps or anything else that seems unusual.

2. Laboratory tests. A first step following the physical exam should be the least invasive screenings including blood and urine

3. Imaging procedures including mammography might be the next step because they are also less invasive

4. Genetic tests executed by drawing blood, that look for certain gene mutations (changes) that are linked to some types of cancer are another non-invasive screening option, although they are quite costly

5. Finally if there is enough evidence, a biopsy might be warranted.

It is up to each patient to drive the screening process, communicate with your physician at every step and weigh all the alternatives before agreeing to tests that may not, in the long run, change your outcome.

Below are websites that have cancer support advice and tool kits.

www.cancer.org

www.healthfinder.gov

<http://www.screenforlungcancer.org>

<http://www.canceradvocacy.org/toolbox/>