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## AHRQ News and Numbers

Male hospital patients are more likely than female patients to have a number of serious conditions, including heart attack, alcohol-related mental disorders, alcohol-related liver disease, hepatitis and injuries. For each of these conditions, the rate of cases per 1,000 hospital stays was 50 percent higher or more for men than for women in 2003-the latest data currently available. [Source: Agency for Healthcare Research and Quality, HCUP Statistical Brief #9: *Hospitalizations Among Males, 2003*, [statistical brief](#).]

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### 1. AHRQ Director Testifies on Accelerating the Adoption of Health IT

AHRQ Director Carolyn M. Clancy, M.D., testified on June 21 before the Senate Committee on Commerce, Science, and Transportation's Subcommittee on Technology, Innovation, and Competitiveness on accelerating the adoption of health information technology. Dr. Clancy highlighted the progress that HHS is making in the area of health IT. HHS, under Secretary Mike Leavitt's leadership, is giving the highest priority to fulfilling President Bush's commitment to promote widespread adoption of interoperable electronic health records, she noted. Select to read Dr. Clancy's [statement](#) and select to view the [Webcast](#).

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### 2. Institute of Medicine Releases Reports on the Future of Emergency Care

The Nation's emergency medical system is overburdened, underfunded, and highly fragmented, according to a new series of three reports released June 14 by the Institute of Medicine. The findings and recommendations are presented in three reports: *Hospital-Based Emergency Care: At the Breaking Point* explores the changing role of the hospital emergency department and describes the national epidemic of overcrowded emergency departments and trauma centers; *Emergency Medical Services at the Crossroads* describes the development of EMS systems over

the last 40 years and the fragmented system that exists today; and *Emergency Care for Children: Growing Pains* describes the unique challenges of emergency care for children. As the reports note, there is more that can be done to improve everyday emergency services and to plan for potential public health emergencies. HHS Secretary Mike Leavitt has made disaster preparedness one of his top priorities, and ensuring the safety and availability of emergency medical services is central to that effort. The study was supported by AHRQ, HRSA, CDC, the Josiah Macy, Jr. Foundation, and the U.S. Department of Transportation's National Highway Traffic Safety Administration. Select to read the [press release](#) and to order the reports.

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### **3. AHRQ Director's Remarks During Annual Patient Safety/Health IT Conference Now Online**

AHRQ Director Carolyn M. Clancy, M.D., gave remarks at AHRQ's sixth national conference on patient safety, and the second combined conference on patient safety and health IT in Washington, DC, on June 4-7, during the first-ever "National Health IT Week." More than 40 organizations came together to sponsor a week-long focus on health IT, looking at where the field stands today and how we can move toward widespread adoption of health IT. Select to read her June 5 [remarks](#) on patient safety and select to read her June 7 [remarks](#) on health IT.

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### **4. New AHRQ Study Finds Underuse/Misuse of Antivirals for Flu**

Antiviral drugs that can ease flu symptoms and even avert death are rarely prescribed and sometimes used inappropriately by primary care doctors, according to a new AHRQ-funded study. Treatment records of flu patients who visited Boston-area clinics between October 2000 and May 2004 showed only about 15 percent were prescribed antiviral medications. About 24 percent of those not given prescriptions should have received antivirals. Researchers at the Brigham and Women's Primary Care clinics also found that doctors prescribed antiviral drugs more often to blacks and other minorities compared with whites or Latinos. The researchers also found that 30 percent of patients who received antivirals were prescribed the drugs inappropriately. The medications are appropriate for those flu patients who have had symptoms for 2 days or fewer, who have fever and any two of the following: headache, sore throat, cough or muscle aches. The study was published in the June issue of the *Journal of Clinical Pharmacy and Therapeutics*. Select to read the [abstract](#) in PubMed®.

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### **5. AHRQ Evidence Report on Tobacco Use Is Available**

AHRQ released an evidence report summarizing available evidence on the effectiveness of community- and population-based efforts to prevent tobacco use and encourage smoking cessation, and on the impact of smokeless tobacco marketing. The report, *Evidence Report on Tobacco Use: Prevention, Cessation, and Control*, was requested and funded by NIH's Office of the Medical Applications of Research for a State-of-the-Science Conference held on June 12-14 in Bethesda, MD. The researchers found notable gaps in the evidence. Some new information confirms conclusions of earlier authoritative reviews of the topics. However, little new information addresses issues that the reviews had not covered, and no new evidence was found that would overturn any earlier recommendations. AHRQ's Evidence-based Practice Center at RTI International and the University of North Carolina conducted the systematic literature review and prepared the report. Select to read the [report](#) and select to read the NIH [consensus statement](#). A print copy is available by sending an e-mail to [AHRQpubs@ahrq.hhs.gov](mailto:AHRQpubs@ahrq.hhs.gov).

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## 6. New Book on Improving Communication of Critical Test Results Now Available

*Getting Results: Reliably Communicating and Acting on Critical Test Results*, a new book that presents practical ideas and authoritative lessons on how to determine which test results and values require timely and reliable communication, is available for sale from the Joint Commission on Accreditation of Healthcare Organizations. The book includes articles from the February 2005 issue of the *Joint Commission Journal on Quality and Patient Safety* plus new case studies and articles indicating what hospitals, medical centers, and outpatient practices are doing to improve communication of critical test results. The book is edited by AHRQ grantee Gordon D. Schiff, M.D., Director, Clinical Quality Research and Improvement, and Senior Attending Physician, Department of Medicine, John H. Stroger Jr. Hospital of Cook County, and is available for purchase from the Joint Commission's online [catalog](#).

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## 7. Highlights of Our Most Recent Monthly Newsletter

Among the key articles in the online issue of *Research Activities*:

- Nursing homes that emphasize team effort and staff flexibility are more likely to sustain improvements in quality of care.

Nursing home organizational cultures that emphasize a team or group approach and staff flexibility are more likely to implement and sustain quality improvement programs. Staff responses from 84 percent of the 31 United States nursing homes surveyed reflected a dominant group culture, indicating a family and team orientation that provides an optimal context for working conditions that sustain quality improvement efforts. However, the strength of the overall group culture was weak in 55 percent of the homes, suggesting competing values, perhaps from nursing home administrators, who more often reflected a hierarchical orientation. Select to read this [article](#).

Other articles are:

- Ethnicity, age, and living arrangements affect the use of assistive devices by people with impaired mobility.
- Parents of children with special health care needs identify multiple barriers to accessing care for their children.
- Preoperative risk factors and surgical complexity are more predictive of hospital costs than postoperative complications.

Select to read these [articles](#) and more.

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## 8. AHRQ in the Professional Literature

*We are providing the following hyperlinks to journal abstracts through PubMed® for your convenience. Unfortunately, some of you may not be able to access the abstracts because of firewalls or specific settings on your individual computer systems. If you are having problems, you should ask your technical support staff for possible remedies.*

Ettner SL, Kotlerman J, Afifi A, et al. An alternative approach to reducing the costs of patient care? A controlled trial of the Multi-Disciplinary Doctor-Nurse Practitioner (MDNP) model. *Med Decis Making* 2006 Jan-Feb; 26(1):9-17. Select to read the [abstract](#) in PubMed®.

McFarlane JM, Groff JY, O'Brien JA, et al. Secondary prevention of intimate partner violence: a randomized controlled trial. *Nurs Res* 2006 Jan-Feb; 55(1):52-61. Select to read the [abstract](#) in PubMed®.

Sobo EJ, Seid M, Gelhard LR. Parent-identified barriers to pediatric health care: a process-oriented model. *Health Serv Res* 2006 Feb;41(1):148-172. Select to read the [abstract](#) in PubMed®.

Kulasingam SL, Myers ER, Lawson HW, et al. Cost-effectiveness of extending cervical cancer screening intervals among women with prior normal Pap tests. *Obstet Gynecol* 2006 Feb; 107(2 Pt 1):321-328. Select to read the [abstract](#) in PubMed®.

Gnanasekaran SK, Finkelstein JA, Lozano P, et al. Influenza vaccination among children with asthma in Medicaid managed care. *Ambul Pediatr* 2006 Jan-Feb; 6(1):1-7. Select to read the [abstract](#) in PubMed®.

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