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AHRQ News and Numbers

The costs of treating heart disease and cancer rose markedly between 2000 and 2004, from \$62 billion to \$90 billion and \$42 billion to \$62 billion, respectively. Per person spending on cancer patients increased the most—from an average per person of \$4,577 to \$5,727. [Source: Agency for Healthcare Research and Quality, MEPS, Statistical Brief #167, *The Five Most Costly Conditions, 2000 and 2004: Estimates for the U.S. Civilian Noninstitutionalized Population*, [statistical brief](#).]

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1. HHS Issues Report to Congress on E-Prescribing

Results of an electronic prescribing pilot project support the adoption of new electronic prescribing standards, according to a report to Congress released April 17, HHS Secretary Michael Leavitt. These standards, required by the Medicare Modernization Act of 2003, would help cut both medication errors and health care costs. The pilot project demonstrated that three initial standards are already capable of supporting e-prescribing transactions in Medicare Part D. These are standard transactions that provide physicians with patients' formulary and benefit information, medication history, and the fill status of their medications. The report also found that, with some adjustments, e-prescribing can work successfully in long-term care settings. Some of the initial e-prescribing standards tested by the pilot project were found to have potential but still need further development if they are to be adopted as e-prescribing standards. These include standards used to convey structured patient instructions, a terminology to describe clinical drugs, and messages that convey prior authorization information. The pilot project was conducted through an interagency agreement between CMS and AHRQ. Select to read the [HHS press release](#). Copies of the report to Congress and the full evaluation contractor's report are available on [AHRQ's Web site](#).

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2. AHRQ's Healthcare 411 Radio Story About Heart Healthy Behaviors

AHRQ produced an audio story for radio stations about behaviors adults can adopt to reduce their risk of heart disease. Of the three key preventive measures—not smoking, engaging in regular physical exercise,

and maintaining a healthy weight—93 percent of adults engage in at least one, but about 6 ½ percent do not do any of them. The 2-minute program features a 90-second story with soundbites from Anita Soni, Ph.D., a survey statistician with AHRQ's Medical Expenditure Panel Survey, plus a 30-second PSA about quitting smoking. Select to listen to the 2-minute [program](#). Select to read the [transcript](#). Visit AHRQ's [Healthcare 411](#) main page to see all AHRQ's full-length podcasts.

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3. AHRQ Vacancy Announcements Posted

AHRQ is seeking applicants for the positions of Director, Center for Quality Improvement and Patient Safety (CQuIPS), and Director, Center for Primary Care, Prevention, and Clinical Partnerships (CP3). CQuIPS works to improve the quality and safety of our health care system through evidence-based research, synthesis and practical implementation of evidence-based tools, products, strategies and interventions. CP3 expands the knowledge base for clinicians, health care organizations and patients to assure the translation of new knowledge and systems improvement into primary care practices. The Center also supports and conducts research to improve the access, effectiveness, and quality of primary and preventive health care services by working closely with clinician groups and other primary care-associated organizations to assure the implementation of that knowledge into practice, the use of health information technology to improve health care, and the evaluation/diffusion of effective health information technology tools into clinical practice. Select to read the CQuIPS [announcement](#) and select to read the CP3 [announcement](#). Visit [USAJobs](#) for other AHRQ announcements.

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4. Register by April 30 for HCUP Hands-on Workshop at the 2007 AcademyHealth Annual Research Meeting

AHRQ's Healthcare Cost & Utilization Project (HCUP) staff will conduct a full-day interactive seminar on June 2 for researchers interested in learning how to utilize HCUP tools and databases through hands-on access and manipulation of HCUP data. The session, entitled *Powerful Data, Meaningful Answers: Hands-on Training with HCUP Data*, is part of a series of AcademyHealth seminars on health services research methods. Select to [register](#) and for more information. Registration is required, space is limited, and the registration deadline is April 30.

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5. New Evidence Report on Breastfeeding Available

AHRQ released a new report that finds there is evidence that breastfeeding decreases infants' and mothers' risk of having many short-term and chronic diseases. The report found good evidence that breastfeeding reduced infants' risk of ear infections by up to 50 percent, serious lower respiratory tract infections by 72 percent and a skin rash similar to eczema by 42 percent. Children with a family history of asthma who had been breastfed were 40 percent less likely to have asthma, and children who were not prone to asthma had a 27 percent reduced risk compared with those children who were not breastfed. The risk of developing type 1 diabetes was reduced by about 20 percent. These benefits were seen in infants who were breastfed for 3 or more months. Breastfeeding also reduced the risk of type 2 diabetes by 39 percent compared with those who were not breastfed. The report also found that breastfeeding was associated with fewer episodes of diarrhea during infancy, decreased incidence of childhood leukemia, and decreased deaths from sudden infant death syndrome. The report found no clear relationship between breastfeeding and improvement in IQ. In premature infants, breastfeeding decreased the occurrence of necrotizing enterocolitis, a serious gastrointestinal infection that often results in death. For health outcomes in mothers, there is good evidence that women who breastfed their infants had up to a 12 percent reduced risk of type 2 diabetes for each year they breastfed. Breastfeeding decreased the risk

of ovarian cancer by up to 21 percent. Breastfeeding also decreased the risk of breast cancer by up to 28 percent in those whose lifetime duration of breastfeeding was 12 months or longer. Women who did not breastfeed their infants were more likely to have postpartum depression, but unmeasured factors—such as depression that was undiagnosed prior to giving birth—may have increased the rate of depression seen in this group. The report was nominated and funded by the HHS Office on Women's Health and prepared by AHRQ's Tufts-New England Medical Center Evidence-based Practice Center in Boston. Select to read the [report](#). A print copy is available by sending an e-mail to ahrqpubs@ahrq.hss.gov.

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6. Highlights From Our Most Recent Monthly Newsletter

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

- Children are more likely to attend a weight management program if location and time are convenient for parents.

Pediatricians are seeing more children whose health is threatened by being overweight or obese. Weight management programs can help these children lose weight; however, if children are to attend the programs, the locations need to be convenient and the programs held at times that fit parents' preferred structure. Select to read this [article](#).

Other articles are:

- Stimulation of the subthalamic nucleus of the brain improves quality of life for patients with advanced Parkinson's disease.
- Study provides national time averages for transporting trauma patients by ambulance and helicopter.
- Dysthymia may contribute to the disparity in use of antiretroviral therapy between men and women.

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

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7. 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.

Flynn KE, Smith MA, Freese J. When do older adults turn to the Internet for health information? Findings from the Wisconsin Longitudinal Study. *J Gen Intern Med* 2006 Dec; 21(12):1295-1301. Select to read the [abstract](#) in PubMed®.

Liang SY, Phillips KA, Haas JS. Measuring managed care and its environment using national surveys: a review and assessment. *Med Care Res Rev* 2006 Dec; 63(6 Suppl):9S-36S. Select to read the [abstract](#) in PubMed®.

Flaherty EG, Sege R, Price LL, et al. Pediatrician characteristics associated with child abuse identification and reporting: results from a national survey of pediatricians. *Child Maltreat* 2006 Nov; 11(4):361-369. Select to read the [abstract](#) in PubMed®.

Greene HA, Slattum PW. Resolving medication discrepancies. *Consult Pharm* 2006 Aug; 21(8):643-647. Select to read the [abstract](#) in PubMed®.

Grant RW, Wald JS, Poon EG, et al. Design and implementation of a Web-based patient portal linked to an ambulatory care electronic health record: *Patient Gateway* for diabetes collaborative care. *Diabetes Technol Ther* 2006 Oct; 8(5):576-586. Select to read the [abstract](#) in PubMed®.

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