

**Next Meeting****Wednesday, May 18, 2011**VA Greater L A Healthcare 11301 Wilshire Blvd 90073
Bldg 500 Rm:6001 or 6400**Parking:** free, enter east lot , ER side

5:30pm free dinner 6:00-8:30 meeting

agenda:

- 1) Administrative consent by hospitals for unbefriended patients to donate organs at the time of their deaths.... a controversial idea
- 2) Panel discussion on bioethics issues unique to Latino-Americans.

>>>**A Wider View**<<<**National****A New Take on Harm Reduction?**

A "wet house" is a safe haven for alcoholics that allows them to drink and have access to alcohol. (Alcohol is not provided, just permitted.) The wet house is a safer place for alcoholics to drink and is staffed with people to care for the chronic alcoholics. Their clients may have formerly been relegated to dangerous areas, under highways, etc. and include individuals who have failed sobriety efforts at various outreach and housing programs.

In one study, a group of alcoholics cost taxpayers \$8 million when they were not enrolled compared to \$4 million when living in such establishments. Interestingly, wet houses are located in places where the cost of health care is some of the lowest in the nation with the highest quality, like Minnesota and Seattle.

<http://www.cnn.com/2011/HEALTH/05/11/minneapolis.wet.house.alcoholics/index.html>

Arizona's Shake Down: Pay to Play (Stay?) Taxing Smokers and the Obese

To address the state's budget deficit Arizona's Gov. Jan Brewer proposed [levying a \\$50 fee on state Medicaid recipients](#) who are [obese](#) and who don't follow a doctor-supervised slimming regimen. She also intends to charge those who smoke. If approved this would mark the first time a state-run but federally subsidized health-care program for the poor would charge people for unhealthy acts.

The [Wall Street Journal](#) quoted [Monica Coury](#), spokeswoman for Arizona's Medicaid program, as endorsing the idea, saying "If you want to smoke, go for it. But, understand you're going to have to contribute something for the cost of the care of your smoking," describing the proposal as a way to reward good behavior, raising awareness of conditions, such as obesity, that increase expenses to the state Medicaid system. People who are facing this tax earn less than \$15,000 per year for a two-person family.

Conversely, Arizona's House recently gave preliminary approval to a law making it illegal for any local government to restrict toy giveaways to promote McDonald's Happy Meals or other fast-food products. This in contrast to California's Santa Clara County and San Francisco efforts to tackle childhood obesity by making fattening food less attractive to kids by restricting such promotions.

Transplants on the Block?

Additionally, last year Dr. Brewer and the Arizona legislature considered rescinding coverage for Arizonans waiting for organ transplants-- and to whom coverage had been promised, as a means of controlling the budget deficit.

http://www.msnbc.msn.com/id/42383307/ns/health-health_care/

International

The hope that-- even a poignantly vulnerable life offers-- and the honor in that sometimes messy effort to preserve it, is conveyed in this account of the struggle to save an infant in the aftermath of the earthquake in Haiti. *Night Transport in Port-au-Prince* Jeffrey S. Cook J Am Board Fam Med 2011;24 323-325

<http://www.jabfm.org/cgi/content/abstract/24/3/323>

Cost Conundrum

While the Mayo Clinic is an example of low cost but quality healthcare, McAllen, Texas, has some of the highest health care costs in the nation. The question of why healthcare costs more in one place than another does not seem to be answered by the type of patients, obesity rates, age, insurance reimbursements but rather, perhaps in part by the behaviors of the doctors of the town.

Do healthcare costs reflect the culture of the doctors in a location and whether it aims to maximize revenue? One author makes a case for reimbursement of physicians as team units with a system of accountability that reconciles patient care and revenue, using Mayo clinic with its quality and cost efficiency as a model

http://www.newyorker.com/reporting/2009/06/01/090601fa_fact_gawande

SCBCC Steering CommitteePaul Schneider, Paul.Schneider@med.va.govJim Hornstein, MD jimfamdoc@sbcglobal.netNeil Wenger, MD NWenger@mednet.ucla.eduK. Gorlitsky, MD kfgorlitsky@gmail.comMargie E. Spies, RN margie.e.spies@kp.orgKenneth Landis, MD kwlscrdoc@aol.comTheresa Drought Theresa.s.drought@kp.org**Webmaster:** StuartFinderStuart.Finder@cshs.org



Reading Between the Lines

Coal is Killing Kids is an activist group that developed a hoax website attacking the coal industry's resistance to federal pollution reforms. The target of their "[Coal Cares](#)" site (which supposedly offers free Justin Bieber and Dora the Explorer inhalers to children living near coal-fired power plants) is the world's largest private coal company, [Peabody Energy](#), which along with other energy companies has opposed government-mandated environmental protections.

The parody attributed the following false message to the large coal enterprise: "Some environmentalists have suggested that coal companies should install an untested technology called 'scrubbers' atop coal plants to make them burn more cleanly, reducing coal particulate exposure as one cause of childhood asthma," [reads the site](#). "For our part, Peabody has decided that reducing Asthma-Related Bullying (ARB) is the single most effective way to combat public misperceptions of our industry."

Peabody's response to the hoax included the comment "A growing collection of studies demonstrate the correlation between electricity fueled by low-cost coal and improvement in health, longevity and quality of life," in a [company press release](#).

While the clever hoax sites may intend to enlighten the public, could such antics confound the issues, especially among less savvy interpreters of social media, which may include those most vulnerable to the ill effects of pollution? <http://www.latimes.com/health/boostershots/la-heb-coal-parody-20110511,0,7484983.story>
<http://coalcares.org/>

Glossary

Medicalization: taking a normal variant of behavior or health condition and assigning a pathological implication to it. At times this can be detrimental, fostering somatization and promoting unwarranted anxiety. "Overlap syndromes" include premenstrual syndrome, irritable bowel syndrome, and MVP. [hypoglycemia](http://resources.metapress.com/pdf-preview.axd?code=y81562000th488hq)<http://resources.metapress.com/pdf-preview.axd?code=y81562000th488hq>

There is a battle of definitions between medical disease and "medicalization" of previously normal behavior. As pharmaceutical companies design more drugs, patient populations that will "benefit" from the drugs are sought.

Money and research by the pharmaceutical companies is invested on drugs that must be taken chronically, like for rheumatoid arthritis, rather than those that are for short term use (explaining a marked decrease in antibiotic research.)

Video Games, Their Implications for ADHD

Is a child's fascination with the screen a cause or an effect of attention problems — or both? The concentration children give video games and television is not the kind they need to thrive in school or elsewhere in real life, according to Dr. Christopher Lucas, associate professor of child [psychiatry](#) at N Y University School of Medicine. "It's not sustained attention in the absence of rewards," he said. "It's sustained attention with frequent intermittent rewards."

The brain's reward may be the release of the neurotransmitter [dopamine](#). Children with A.D.H.D. may find video games more gratifying than other children do because their dopamine reward circuitry may be deficient. When children with A.D.H.D. were treated with methylphenidate ([Ritalin](#))-- which increases dopamine activity in the brain-- at least one study found that they played video games less, suggesting the games might be a kind of self-medication.

Viewing more television and playing more video games were associated with subsequent attention problems in both schoolchildren and college undergraduates in a 2010 study in the journal *Pediatrics*. Video games stimulation "is really about the pacing, how fast the scene changes per minute," said Dr. Dimitri Christakis, a pediatrician at the U of Washington School of Medicine who studies children and media.

If a child's brain gets habituated to that pace and to the extreme alertness needed to keep responding and winning, he said, the child ultimately may "find the realities of the world underwhelming, understimulating."



Elizabeth Lorch, a professor of [psychology](#) at the U of Kentucky studied children's ability to comprehend televised stories. "Why did an event happen, why did a character do this — that's where the comprehension and recall of children with A.D.H.D. tends to fall down," she said. Her co-author Richard Milich, also a professor of psychology, suggested that "This inability to see causal relations may affect this social problem we've known for 30 years," he said. "These kids have dramatic social problems. They're highly rejected by their peers."

Children whose brains need neurochemical rewards seek out an activity that provides it. Those with social problems spend more time alone, facing a screen and mastering a virtual world, while struggling in the classroom. He advises parents of children with A.D.H.D.: No screens in the child's bedroom. Pay attention to the content of the games, especially to violence. Set limits on screen time, look for other ways to manage family interactions. <http://www.nytimes.com/2011/05/10/health/views/10klass.html?ref=views>

editors note: Should physicians be taking a more proactive stand in controlling video game time and content in the interest in children's health, similar to the efforts to remove soda from our increasing obese populated public schools (after they figure out how to add apps to their Androids)?

*******Religion and Health*******

Orthodox Community Tackles Eating Disorders

Many assume eating disorders to be an affliction of a secular and materialistic image conscious culture, but anorexia has been discovered among those who are expected to dress modestly and live their lives based on religious tenants rather than more worldly ideas. A 1996 unpublished study of an Orthodox high school in Brooklyn, found 1 in 19 girls had an eating disorder — about 50 percent higher than in the general population at the time.

Dieting among people required to dress modestly may be baffling to outsiders, but Matchmakers asking about a prospective bride's dress size — and her mother's — find the preferred answer is 0 to 4, extra small. "There is an amazing stigma attached to eating disorders — this is the real problem," said Rabbi Saul Zucker, educational director for the Union of Orthodox Jewish

Congregations of America. "But hiding it is not going to make it go away... This isn't a luxury type of disease, where, O.K., someone is a little underweight. People die."

As a teenager, Naomi Feigenbaum developed bizarre eating habits. She was emaciated when her rabbi came to visit. He told her that she must attend a treatment program that met on Saturday, even if riding in a car to get there violated religious rules. She could even eat food that wasn't kosher. "My rabbi does not take Jewish law lightly. But he told me the Jewish laws are things God wanted us to live by, not die by, and that saving a life takes precedence over all of them."

"A patient will call and tell me their weight is down to 82 pounds, and they have weaknesses in their body, and I'll tell them there is no question they must eat during a fast — not that they can eat, but that they must eat," said [Rabbi Dovid Goldwasser](#) of the Bais Yitzchak Synagogue in Flatbush, Brooklyn, an expert and counselor on eating disorders for orthodox women around the world.

Clearly Jewish communities include various levels of observation (or not) of dietary laws, but 25 percent of the Jewish girls suffered from eating disorders that merited treatment, compared with 18 percent of the non-Jewish girls in a 2008 [study](#), that looked at 868 Jewish and non-Jewish high school students in Toronto. Israel's rate of dieting is among the highest in the world — more than one woman in four — though [obesity](#) rates are relatively low. [Israeli studies consistently find high rates of disordered eating among Jewish adolescents](#) (but not Arab ones). <http://www.nytimes.com/2011/04/12/health/12orthodox.html?ref=views>

IN PRINT

Feigenbaum, Naomi "***One Life***" (Jessica Kingsley Publishers, 2009), an orthodox youth's recovery from anorexia after treatment at the Florida branch of the [Renfrew Center](#), a nationwide eating-disorders clinic

*******Weigh in with the Editor*******

Ed-in-chief: Kendra Fleagle Gurlitsky, MDkfgorlitsky@gmail.com

Contributors: Kyle Graham, Carlos Almanza, Christine Kalinowski

RESOURCES

*ASBH <http://www.asbh.org/>

*SCBCC website <http://www.socalbioethics.org>

*POLSTupdate: http://www.finalchoices.org/ccccchf_polst_grant.htm



f
o
r

E
a
c
h

P
r
e
s
e
n
t
a
t
i
o
n
A
l
a
n

S
a
n
d
e
r
s
,

P
h
.
D
.
D
i
r