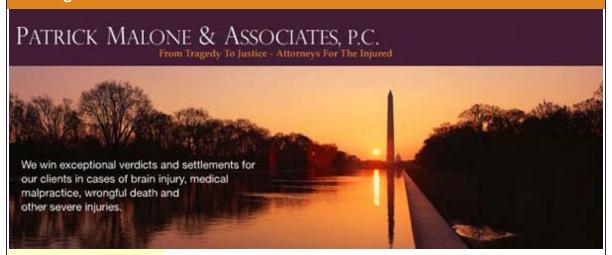
Getting the Best Medical Care: a Newsletter from Patrick Malone



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A Set of Once-Only, Pain-Free (Almost) Preventive Care Tips for the New Year

Dear Patrick.

Ah yes, the New Year's list of resolutions for better health and smarter health care: Can we make it non-boring, non-guilt ridden, non-fear inducing? And be practical too? I think so, if we keep it simple and straight. And the really special bonus is that many of these life-saving tips involve a one-time-only investment -- no endless diets or constant trips to the gym, just bases to touch once. Read on for more.

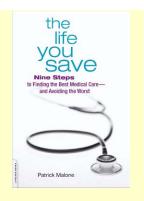
Vaccines: The Neglected Shot of Prevention

In Britain, it's called a jab. Here, we usually refer to a vaccine "shot." But whatever, the vaccination is a valuable life-long essential for preventive health care.

Vaccines have received an unfair rap from some fear mongerers. Vaccines do NOT cause autism in children, at least there's no more evidence for a vaccine/autism link than there is for a link between autism and the phases of the moon. (As a parent of an autistic child, I have a keen interest in its causes.)

For adults, most of us know about the annual flu shot, but there is also a short list of other vaccines -- most of them a one-shot-for-life deal -- that are quite useful. Here it is:

- Shingles vaccine once after age 60. This is for everyone unless you're taking immune-suppressing drugs or have some other unusual condition. (The recommendation used to be only for adults who had chicken pox as a kid. Shingles is caused by the same virus.)
- Annual influenza vaccine. (Again, this is for all adults. It used to be recommended only after age 65.)
- Pneumococcus vaccine, once after age 65 (if not previously vaccinated).
- Whooping cough vaccine. Once as an adult, often combined



Learn More



Read our <u>Patient</u> <u>Safety Blog</u>, which has news and practical advice from the frontlines of medicine for how to become a smarter, healthier patient.



with the tetanus and diphtheria vaccines. (Tetanus needs a booster every 10 years.) You especially need the whooping cough (pertussis) vaccine if you're older and exposed to children under age one. That means you, grandma and grandpa.

- Measles-Mumps-Rubella: At least one dose if you were born in 1957 or later.
- Human papilloma virus. (This paragraph is mostly for parents and grandparents advising pubescent youngsters.) This vaccine is to prevent cervical cancer which is often caused by HPV infection. But since the vaccine only works if you've never been exposed to the HPV virus, the patient needs the shot before first sexual activity, which is why it's recommended for young teenagers.

See further authoritative <u>advice on <u>adult vaccinations</u> from the <u>Centers for Disease Control here</u>. And if you want a table of <u>best</u> <u>advice for vaccine recommendations for <u>children up to age 18</u>, click here.</u></u>

Notice how I put the **shingles vaccination** at the top of this list? That's because it's often neglected but can be the single easiest misery-preventive step you can take right now.

I got a shingles vaccine shot a few months back, and even though my insurance didn't cover it, and it was fairly expensive (\$200), the money was well spent. Read more about this <u>important vaccine in our August 2010 newsletter here</u>.

Screening and Prevention Tests that Work

Here is a list we first ran in this newsletter in 2010, updated with the latest recommendations. Again, you will notice that many of these are once-only investments of your time.

(The guidance is mostly from the U.S. Preventive Services Task Force, an independent body of doctors in primary and preventive care who give advice about what works and what doesn't. See their current summary list here, which also includes advice for pregnant women, newborns, and prevention of sexually transmitted diseases, not covered on the list below.)

Cancer prevention:

- Colonoscopy at age 50, and again in 10 years if OK, sooner if not. Stop colonoscopy screening at either age 70 or 75. See this recent newsletter for other kinds of colon cancer screening that you can try, but know that colonoscopy is the "gold standard."
- Mammogram for women every two years, starting at age 50,

- sooner if family history of breast cancer.
- Pap smear every three years for sexually active women, more often if any history of abnormal Pap smears, and more testing depending on the Pap history.
- One-time ultrasound of lungs in men between age 65 and 75 who smoked at any time in their lives.

Heart and blood vessel disease prevention:

- Blood pressure check every year starting at age 18.
- Blood cholesterol checks every year starting at age 35 in men, age 45 in women.
- Ultrasound of the abdomen, once only in men ages 65-75 who have ever smoked, to check for abdominal aorta aneurysm (ballooning and weakening of the major artery that delivers blood south from the heart).
- Daily baby aspirin for men starting at age 45, women at age 55, unless you have a very sensitive stomach prone to bleeding.
- Diabetes screening for any person with sustained blood pressure over 135/80.

Other prevention screening tests and counseling:

Your doctor should ask you about the following issues and give counseling and further testing and treatment if appropriate. If they don't ask, they're not doing a thorough job.

- Problem drinking. Doctors should ask. If you feel defensive about this, that may indicate a problem right there.
- Smoking: Screening questions and counseling. Tobacco smoking remains the Number One cause of preventable disease in the United States and the world.
- Hearing problems after age 65.
- Depression.
- Obesity.
- Osteoporosis check in any woman over 65.

That's it. A good list, and do-able for all of us in 2012.

Some Interesting Health Care Blog Posts

Here is a sampler of some of our recent posts on our patient safety blog that might interest you.

Tried and True Beats the New in Medical Devices, Yet Again: The new latest and greatest designs in hip replacements have a significantly higher failure rate than older designs. Consumers need to understand that unlike the market for electronic toys and gizmos, in the health care field, newer designs can be slow to reveal their flaws, and in the meantime, patients who are early adopters are the guinea pigs.

<u>Our Nation's Hidden Elderly Deaths Scandal</u>: It's frightfully easy to cover up a suspicious cause of death of an elderly person. The national lack of autopsies in all age groups is especially problematic

when an elderly person dies outside a hospital. This article summarizes a special ProPublica and PBS Frontline investigation.

What Psychotherapy Won't Fix: A short guide to those aches and pains of the heart that psychotherapy can't help with, and those it can.

<u>Doing Hospital Care in the Home:</u> This is going to be an important trend as the U.S. health care system struggles to make its care safer and more cost-effective. Unless a patient really needs intense, round-the-clock monitoring and ministrations, most hospital care can be better provided at home. The problem right now is that new federal rules that are supposed to guide how this new kind of hospital-at-home care is provided are not yet ready for publication.

Past issues of this newsletter:

Here is a quick index of past issues of our Better Health Care newsletter, most recent first.

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To your continued health!

Sincerely,

Patrick Malone

Patrick Malone & Associates

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