Multi-Tasking in Medical Professions at the 148th Annual Meeting of the Hawaii Medical Association

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Sheraton Waikiki, Honolulu

Russell T. Stodd MD
Contributing Editor, Hawaii Medical Journal

The annual meeting of the Hawaii Medical Association was an incomparable endeavor in many areas. The meeting included an excellent three day scientific session, participation and subscription by numerous exhibitors (for which we are very grateful), and a marvelous banquet and inauguration of the incoming HMA President, Inam Rahman, MD. If there was a down side it was that so many of our members failed to take advantage of this excellent CME and social program, and gain the knowledge and experience that was offered by the prime time faculty.

The Saturday evening banquet included the installation of incoming President Inam Rahman, MD, and recognition of Don Parsa, MD, as physician of the year. Representative Galen Fox was given an award as the outstanding legislator of the year for his stalwart work in advocating for the best in medical care for Hawaii. We were further honored by the participation of Governor Linda Lingle who gave a barn-burning speech on Hawaiian politics. Her basic message was that doctors are foolish for contributing money, providing testimony and lobbying politicians who do not respect physicians, do not listen to physicians, and invariably vote for vested interests. The lesson was simple: work to elect people who will listen to you, and stop spending your largesse for no return. The meeting was further honored by the presence of J. Edward Hill, MD, the president-elect of the American Medical Association.

The Scientific Session Committee chaired by S. Kalani Brady MD, presented an outstanding CME program which provided two and half days of meaningful material.

The Friday morning session was opened by outgoing HMA President Sherrel Hammer MD, who introduced J. Edward Hill MD representing the American Medical Association. His remarks dealt largely with tort reform efforts at the federal level and also AMA plans for helping to provide medical care for the 40 plus million Americans who do not have health insurance. Following the Friday AM plenary program, the meeting broke out into two sessions, HIPAA and telemedicine. Cindy Goto MD, and Roger Kimura MD chaired the HIPAA conference on compliance and security. Andrew H. Melczer PhD, vice president for health policy research at the Illinois Medical Society, provided insight and direction for keeping out of trouble. Privacy was highlighted by an explanation of confidentiality, integrity, availability. In fact the more you know about security, the less secure you feel. As always, documentation is the sine qua non for protecting ones practice, and the HMA will supply a road map when questions arise. Each medical practice’s security program should be based on that practice’s risk. The bigger you are, the more you must do.

At the other venue, Myron Shirasu MD, chaired a presentation by Stanley Saiki MD outlining avenues and devices which are currently under research in a Department of Defense med-tech program with Tripler Hospital. Quite technical. Topping off the morning program was an excellent presentation by Richard Whitten MD, the director for Medicare part B for Alaska, Hawaii and Washington. He emphasized that Medicare is not a health plan, but is a collection of 600 laws. His message is that doctors are leaving money on the table with their inability to code properly, provide documentation, use appropriate modifiers, and failure to stay in contact with his office for beneficial changes. In any coverage determination question, spool up www.noridianmedicare.com/provider/ on the keyboard and get the help you need off the internet.

While the above was ongoing, an all day Friday class sponsored by the American Society of Addiction Medicine was offered to instruct physicians in the office-based treatment of opioid dependence using buprenorphine. Donald R. Wesson MD, presented the prerequisites for a physician to prescribe the drug, and how to sort out appropriate patients. Various factors must be considered, and maintenance protocols are necessary to manage office-based treatment.

The afternoon meeting on September 3rd included a tort reform panel discussion, moderated by Mark Bennett, Hawaii Attorney General. On the panel were John McDonnell, MD, J. Edward Hill, MD, Arthur F. Rocca, Esq., and L. Richard Fried, Jr. Esq. Not much light emerged. Plaintiff’s attorney Fried presented the tired statistics blaming the insurance companies for the liability crisis, while physicians described what is really happening, e.g. for-profit carriers have left the field, and awards have sky rocketed. Without question trial attorneys are dreadfully afraid of a MICRA law in Hawaii, and especially in the nation.

At the same time, Gerald McKenna, HMA past president, described the legal action against medical insurers by the Physicians’ Foundation for Clinical Excellence. The HMA is part of this class action law suit which appears to be heading for a favorable resolution.

The Saturday program was dedicated to addictive disease. Ray Baker MD, clinical professor of addiction medicine at University

Hawaiian Medical Journal, Vol. 63, October 2004
of British Columbia, gave an engrossing presentation about the disease of addiction, and especially its relevance for primary care physicians. His teaching technique drew the audience in, captured attention of all, and was both witty and instructive. He was followed by Kevin Kunz MD, MPH and Gerald McKenna MD, who gave additional material in warning signs of addiction which can lead to a diagnosis. Intervention approach and therapy including the 12 step program were discussed. Donald R. Wesson MD, psychiatrist with the California Society on addiction medicine presented additional treatment mechanisms for addictive disease with various disease models.

The Sunday AM plenary session moderated by Danny Takanishi, Jr. MD, began with an alarming, but not surprising, discussion about the obesity epidemic in America. At the present time, 61% of Americans are obese or overweight according to Kenric Murayama MD, who presented excellent slides and numbers to document the problem. Using the BMI (body mass index) a weight to height index, he corroborated how Americans have fattened up over the last 30 years. Moreover, the problem extends to children as well, with sedentary habits, lack of PE in many school programs, computers, video games and lack of physical activity. Obviously, Americans need to exercise more and eat less, and physicians must be the leaders in bringing the message. Drastic therapeutic measures include bariatric surgery for morbid obesity. Of course, the various procedures require specific indications and parameters before undertaking these surgical measures.

Break out sessions followed the plenary meeting with respiratory illness moderated by Raul Rudoy, MD, MPH, and Geriatrics chaired by HMA president-elect Patricia Blanchette.

Iqbal Ahmed MD, Professor Psychiatry at the JABSOM discussed behavior problems, variations in dementia, and the prevalence of depression. The use and efficacy of anti-psychotics and the ABC of behavior therapy were presented. No FDA approved drug is approved for agitation therapy. Various anti-psychotic drugs were discussed with limitations and indications. Emese Somogy-Zalud MD, chief of palliative medicine in the department of geriatric medicine at JABSOM, provided a definition of palliative medicine as the active, total care of patients with serious, chronic and life limiting illness. He noted that dollars spent on the chronically and terminally ill, are an increasing target of public and professional criticism. Dr. Zalud discussed the goals of medical care, the goals of hospice care, and general prognosis guidelines for hospice care. Also presented were palliative care coordination projects with anticipated improvements and outcomes. The morning session concluded with Patricia Blanchette MD, professor department of geriatric medicine at JABSOM, discussing the overuse of antibiotics in nursing home residents, especially regarding the UTI. Bret Flynn, MD, MPH assistant professor of geriatric medicine at JABSOM, presented material of falls in the elderly, with consequences and avoidance.

The most amusing and still very educational contribution was Francis Pien MD, MPH retired chief of infectious disease at JABSOM, as he discussed bronchitis and use of antibiotics. He pointed out that the use of antibiotics is vastly overdone in the office management of upper respiratory illnesses. He was followed by the equally entertaining Wallace Mathews Jr. MD, clinical professor pediatrics at JABSOM, who discussed asthma. The disease may be mild intermittent, severe persistent or chronic. He emphasized

that if the usual medications are not working, get help! Do not add increasing amounts of what is not working. He noted that asthma can be a chronic lung disease and it is on the rise, especially in Hawaii. Last on the program was Raul Rudoy MD, chairman department of pediatrics at JABSOM who presented vaccines and preventable disease. His figures demonstrated the efficacy of pneumococcal polysaccharide and influenza vaccines. Specific recommendations were offered for age and frequency of administration. A very rewarding session.

In summary, the 148th annual meeting of the Hawaii Medical Association was an excellent occasion to gain medical education hours, a marvelous opportunity to meet and socialize with friends old and new, a chance to meet and talk with Governor Lingle as well as the President-elect of the American Medical Association, and even to learn something new in medical care, and current pharmaceuticals. Many more of our members should have exercised that option.