



Of all eloquence, a nickname is the most concise.

The recent AAO meeting in New Orleans featured a new perspective for professional definition. The intent is to enroll all eye surgeons in the concept of "EYE M.D." Tired of being confused with other practitioners, and saddled with a clumsy specialty name, the Academy has embarked upon an approach to educate the public (not to mention insurers and the government), as to the real doctor for eye care. With the notation of EYE-M.D. on stationery, statements, yellow pages, business cards, door facings, alongside logos, and so forth, the Academy expects that the confusion regarding terms will disappear. This is a commendable Academy effort, and might well have come along ten or more years ago. Welcome to the EYE M.D. club.

They are called wonder drugs, because you wonder if they work.

Despite a federal ban on the drug, five states - Alaska, Arizona, Nevada, Oregon and Washington - have approved medical use of marijuana. The DEA has warned that physicians who prescribe marijuana for medical use will lose their prescription authority, and be excluded from Medicare and Medicaid. On this issue, the Republican Congress and the administration agree. However, proponents say doctors will not be prosecuted if they simply recommend pot, but do not prescribe or procure it. Under the law, the physician would write a recommendation in the patient's record, and the patient can then request a copy to protect against prosecution. Despite scant evidence about medical efficacy of pot, the various medical societies have been silent, and only the Nevada society opposed the issue. With legislative momentum gaining for medical cannabis, once can see where the domino effect will soon put this unregulated, undefined, unpurified, and under-researched drug into widespread use. To believe that it will be limited to medical indications, is hopelessly naive.

The first myth of management is that it exists.

MedPartners, Inc. the nation's largest physician practice management (PPM) company, is getting out of medical practice, and will concentrate on its pharmaceutical service business. In the strongest sign yet of the gloom around PPMs, MedPartners will shed 228 clinics and more than 10,000 affiliated doctors in the next 12 months. Meanwhile in California, FPA Medical Management filed for bankruptcy in July. The San Diego based practice management company left unpaid millions of dollars in claims for its doctors' services. FPA is not the only company that took a downhill slide after gobbling up physician practices; Allegheny Health, Education and Research Foundation in Pittsburgh also filed for bankruptcy. Earlier this year, PhyCor, MedPartners and FPA revealed losses, and difficulty integrating some of the physician practices into their organizations. Doctors chafed at working for outsiders and in some cases were alarmed by steep drops in personal income. Some groups have tried to break their contracts. As the old saying goes, there ain't no free lunch.

It takes a lot of suits to keep a lawyer well dressed.

The American Academy of Ophthalmology has filed a lawsuit against the Health Care Financing Administration over practice-expense calculations. The HCFA formula clearly conflicts with the intentions of Congress dictated by the 1997 Balanced Budget Act. If the Academy is supported by the court, the stake for ophthalmology amounts to nearly \$200 million. The complaint asks the court to limit the transfer to \$390 million as Congress intended, and stop this unlawful regulation which would provide underpayment for thousands of services. Ten other medical specialty societies have joined in the lawsuit. But is it wise to sue people who buy paper by the truckload and ink by the barrel?

The main accomplishment of unions is to annoy people who are not in them. A bill has been offered by Rep. Tom Campbell, Republican from California, called Quality Health Care coalition Act of 1998 which would allow physicians to negotiate collectively with managed-

care plans. Federal Trade Commission boss Robert Pitofsky testified against the bill before the House Judiciary Committee, stating that exempting doctors from antitrust laws could harm consumers by raising prices and forcing many to go without health coverage. According to Pitofsky doctors can use "collaborative efforts to offer lower-cost alternatives and assure quality." Yeah, right!

Is there anything so assured, resolved, and distainful as a managed care organization?

A mother brought her 15 year old daughter to the HMOs clinic three times over the course of a summer for chronic stomach pain, back pain and vomiting. Initial blood analyses showed several abnormalities, including a high level of toxins indicating kidney problems. On physician listed lupus as a possible diagnosis, but no confirmatory tests were ordered, no referral was made to a nephrologist, and there was no appropriate follow up. Two weeks later, the girl coughed up blood and was rushed for admission to the hospital where lupus was diagnosed. Shortly after that she went into acute kidney failure and expired. A malpractice suit resulted. The parents' lawyers presented the case as a classic HMO horror story and claimed the doctors failed in their care due to pressures to avoid tests aim referrals unless absolutely necessary. Because the ERISA law protects insurers from liability for medical decisions, the HMO was dropped as a defendant, leaving the doctors to provide the deep pockets. An obviously enraged jury awarded the plaintiff ~4 million dollars, twice the amount the lawyers were asking.'

Life is a magazine where the wrong turn is just ahead.

The human body is bilaterally symmetrical. This anatomic reality has produced many reports of operations or procedures performed on the body part opposite to the offending tissue. A few cases become media fodder, such as the Florida surgeon who removed the wrong leg or the neurosurgeon in a prestigious New York cancer center who operated on the wrong side of a patient's brain. The few cases that hit the papers are only a hint of the nearly 1,000 cases of malpractice claims for wrong breast, lung or eye surgery which have been quietly settled. The exact number of such events are not known, but data shows that one in four orthopedic surgeons will operate on the wrong site at some time in their careers. No numbers have been collected for operations on wrong eye muscles, cataract extractions, or glaucoma procedures.

Things go wrong all at once, but things go right very gradually.

The 105th Congress adjourned having failed in some areas, but did handle some issues to medicine's benefit. Full funding for claims processing was provided by Congress, as was increases for NIH and CDC. Clinton's plan for "user fees" for health care providers was defeated (in Hawaii we already pay 40/o), as was the proposed expansion of Centers of Excellence demonstrations. Also shelved was a plan to expand the DEA into prescribing practices of physicians.

We are from the government. We are here to help you.

Would you believe that popcorn needs federal protection? The U.S. Dept. of Agriculture recently noted the appointment of a new member to the Popcorn Board. Other Washington foolishness we all pay for within the USDA, are the Mushroom Council, the National Pork Board, the Beef Promotion and Research Board, the Potato Promotion Board, the National Dairy Board and the American Egg Board. Nearly \$11 million in taxpayer dollars are reserved for these programs. Granted that marketing and research are useful for these food products, but why should it be government sponsored?

Addenda

- ❖ The average American eats 21.4 lbs of snack food each year.
 - ❖ Buy old masters. They are a better investment than old mistresses.
 - ❖ Why isn't a douche a female duke?
- Aloha and keep the faith—rts ■