Personnel Contamination During Equipment Removal

Tomas and colleagues found that health care personnel from 4 Northeast Ohio hospitals frequently contaminated their skin and/or clothing during simulations of contaminated glove or gown removal. To test whether the frequency of contamination could be reduced by training, a single-center quasi-experimental point-prevalence study was conducted that included education and practice in removal of contaminated gowns and gloves with immediate visual feedback based on fluorescent lotion contamination of skin and clothing. The intervention resulted in a significant reduction in skin and clothing contamination during simulations of contaminated glove and gown removal that was sustained after 1 and 3 months.

Early Trends From the Choosing Wisely Campaign

The Choosing Wisely campaign consists of lists compiled by specialty societies of medical practices of minimal clinical benefit to patients. Rosenberg and colleagues developed and performed an observational study to quantify the frequency and trends of the earliest Choosing Wisely campaign recommendations and found that low-value imaging for headache and cardiac conditions decreased slightly. Other low-value tests and treatments, such as antibiotic use for sinusitis and human papillomavirus testing for women younger than 30 years, either increased or remained stable. The mixed results suggest the need for additional action to reduce the use of low-value procedures.

Financial Integration Between Physicians and Hospitals

In this study, Neprash and colleagues estimated the association between changes in physician-hospital integration in metropolitan statistical areas from 2008 to 2012 and concurrent changes in commercial health care spending and prices, adjusting for patient, plan, and market characteristics, including physician, hospital, and insurer market concentration. Neprash and colleagues found physician-hospital integration increased by a mean 3.3 percentage points. An increase in outpatient spending was driven almost entirely by price increases, as associated changes in use were minimal. Changes in physician-hospital integration were not associated with significant changes in inpatient spending or use. These findings are consistent with hospitals and hospital systems conferring their market power on newly employed physicians and acquired practices as the integrated organization negotiates prices for outpatient physician services. To the extent that payment reforms accelerate physician-hospital integration, commercial health care prices may rise as an unintended consequence.
LESS IS MORE

Treatment Deintensification for Diabetes Mellitus

Medication deintensification during treatment of diabetes mellitus is necessary to reduce the overtreatment of blood pressure and blood glucose levels, but little is known about this process. Sussman and colleagues examined a large database of potentially overtreated patients older than 70 years with diabetes mellitus and found that treatment deintensification was not common and had only a modest association with blood pressure, hemoglobin A₁c test results, or life expectancy. Sussman and colleagues determined that practice guidelines and performance measures should focus more on reducing overtreatment through deintensification.

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Clinical Review & Education

Physicians and Insider Trading

Insider trading—the buying or selling of securities with material, nonpublic information in violation of a fiduciary duty—is illegal, but as Kesselheim and colleagues note, recent high-profile cases have implicated physicians and scientists involved in corporate governance or who have access to information about clinical trials of investigational products. The input that physicians and scientists provide to business leaders can serve legitimate social functions, but insider trading harms consumers and undermines trust in financial markets. Minimizing insider trading among physicians and scientists will require robust education and selective prohibitions against high-risk conduct.

LESS IS MORE

Medical Practices to Question in 2015

Morgan and colleagues describe the 10 most important studies published in 2014 related to clinical services that represent overuse of medical care, consisting primarily of overdiagnosis and overtreatment. A lack of benefit was demonstrated for screening pelvic examinations, carotid artery screening, and thyroid ultrasounds. Harms of cancer screening included unnecessary surgery and complications. Head computed tomographic scans were an overused diagnostic test, and practices including acetaminophen for low back pain, prolonged opioid use after surgery, perioperative aspirin, medications to increase HDL, and stenting for renal artery stenosis were also found to be considered overtreatment.

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LETTERS (continued)

Comment & Response

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Editor’s Note

1979 Improving the Health of Persons With Serious Mental Illness MH Katz

1986 No Time to Wait JS Ross and MH Katz

1999 Distinguishing Between Substance Use and Substance Use Disorder MH Katz

2003 Correction

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Author Interview

AUDIO Interview with Curtis J. Donskey, MD, author of “Contamination of Health Care Personnel During Removal of Personal Protective Equipment,” and Michelle Doll, MD, author of “The Increasing Visibility of the Threat of Health Care Worker Self-contamination”