# POLICY & PRACTICE

#### **CMS Mulls Facial Lipodystrophy**

The Centers for Medicare and Medicaid Services is considering whether to cover reconstructive therapies for facial lipodystrophy, which would include Sanofi Aventis' Sculptra and BioForm Medical's Radiesse. The decision was requested by Dr. Bruce Wilder, an attorney representing an unknown client, and by two attorneys at the University of Pittsburgh School of Law. Facial lipodystrophy can occur in some individuals taking antiretroviral medication against HIV. The

agency indicated it would make a final decision by October.

## **Elesclomol Trial Suspended**

Synta Pharmaceuticals Corp. has suspended a phase III study of elesclomol for stage IV melanoma. According to the company, a safety committee found that more deaths were occurring among patients receiving elesclomol and paclitaxel than among those getting paclitaxel alone. The company also decided to halt two other studies of elesclomol, one of

the drug combined with docetaxel against hormone-refractory metastatic prostate cancer and the other, a dose-escalation study in patients with solid tumors. Synta President and CEO Safi Bahcall said in a statement that the company "will present detailed results in an appropriate scientific venue as soon as a full analysis has been completed."

## **Psoriasis Act Is Reintroduced**

A small bipartisan group of lawmakers has reintroduced The Psoriasis and Psoriatic Arthritis Research Cure and Care Act (H.R. 930). It calls on the National Institutes of Health to support research on genetic markers and joint inflammation and destruction. It also directs the Centers for Disease Control and Prevention to develop a registry of psoriasis and psoriatic arthritis patients, and directs the Institute of Medicine to study the costs and health insurance coverage of these conditions. "We are seeking to foster understandings between research physicians in different specialties," said bill cosponsor Rep. David Wu (D-Ore.) in a statement. The legislation was introduced in 2007 but failed to pass. The act's lead advocate in the Senate is Sen. Robert Menendez (D-N.J.).

#### Silicone/Saline Combo Toxic

A Tampa woman was issued a citation for practicing medicine without a license after injecting several women with a combination of silicone and saline that was meant to enhance their buttocks. The Hillsborough County Sheriff's Department reported that the first woman paid \$500 for 40 injections of hydrogel and saline, and that the second paid \$250 for 20 injections. Shortly afterward, both experienced pain and discomfort and were taken to Town and Country Hospital. The injector, Sharhonda Lindsay, turned herself in after a warrant was issued for her arrest.

# **Group Wants Ban on Industry CME**

The consumer watchdog group Public Citizen has asked the American Medical Association to support a ban on commercial support of continuing medical education. In a letter to the chairs of the AMA's ethical and CME councils, Public Citizen's Health Research Group said that it wants the ban "because the consequences of any corrupting influence of commercial support on CME are so significant." The group said that "physician-supported CME" is a viable alternative to commercial funding. The Pharmaceutical Research and Manufacturers of America said in a statement that a ban on commercial support of CME could prevent physicians from accessing criti-

Fewer physicians left group practices in 2008 than in 2007, and a majority of group practice leaders believe that the change reflects more physicians delaying retirement because of the poor economy, said the American Medical Group Association. The group's annual survey of AMGA members reported about a 6% turnover of group practice physicians in 2008, compared with nearly 7% in 2007. The top reasons cited for leaving a group included poor fit with one's practice and need to relocate to be closer to family. Flexibility can keep physicians in a practice, according to respondents, nearly half of whom said part-time options encourage physicians to stay while meeting personal needs or to delay retirement. Almost three-quarters of group practices offer preretirement physicians reduced hours, 56% allow for no call responsibility, and 20% allow concentration on



