

POLICY & PRACTICE

Challenging the Refusal Clause

A group representing family planning clinics across the country is challenging a clause in Fiscal Year 2005 spending legislation that withholds federal funds from government agencies that discriminate against insurers or providers for failing to provide abortion services. The National Family Planning and Reproductive Health Association filed a lawsuit last month claiming that the refusal clause in the legislation has the potential to curb access to reproductive health care information and services. The group is seeking a temporary restraining order and a preliminary injunction to stop enforcement of the law. The new provision violates federal regulation of the Title X family planning program, which requires all institutions receiving Title X funding to provide referrals for abortion services to women who request that information, according to the lawsuit. "No individual provider in this country is required to perform abortions against his or her will," Judith DeSarno, president and CEO of the National Family Planning and Reproductive Health Association said in a statement. But Cathy Cleaver Ruse, director of planning and information for the U.S. Conference of Catholic Bishops' Secretariat for Pro-Life Activities, said the lawsuit would force Catholic and other health providers with moral objections into providing abortions.

Teens Delaying Sexual Activity

Sexual activity among younger teenagers declined significantly between 1995 and 2002, while use of contraception increased, according to a study by the Centers for Disease Control and Prevention. Among never-married girls aged 15-17 years, 30% of those surveyed in 2002 had ever had intercourse, compared with 38% in 1995. Among boys the same age, the percentage dropped from 43% in 1995 to 31% in 2002. The numbers were more mixed among teens aged 18-19; the percentage of boys in that group who had ever had sex dropped from 75% to 64%, but the percentage among the girls actually went from 68% to 69%. More than three-quarters used contraception when they began having intercourse. "More teenagers are avoiding or postponing sexual activity, which can lead to sexually transmitted diseases, unwanted pregnancy, or emotional and societal responsibilities for which they are not prepared," the Health and Human Services Department said in a statement.

Patients Turn to CAM

Six million Americans turned to alternative medicines in the past year to treat conditions such as depression and chronic pain, the Center for Studying Health System Change reported. People using these approaches to save money are often uninsured and usually lack a medical home. While the price is right, these alternatives "may be of questionable value," said HSC President Paul Ginsburg, Ph.D. About 63% of the respondents said they used herbal remedies, yet two of the most popular remedies—St. John's wort and kava—have been known to cause serious side effects. In more than half these cases, a conventional medical professional was unaware of a patient using an alternative treatment. The

study was based on the 2002 National Health Interview Survey, which included information on 31,000 adults.

Mixed Messages on Sex

Some adults are concerned that providing teens with information about abstinence and contraception sends a mixed message that encourages them to have sex, but most adults (51%) and more than two-thirds of teens (68%) disagree, according to a recent survey. The National Campaign to Prevent Teen Pregnancy sponsored the nationally representative survey of 1,000

teens aged 12-19 years, and 1,014 adults 20 years and older. The survey also found that teens are less critical of their school-based sex education program than adults are. About 26% of adults would give their child's sex education class an A or B, while nearly 60% of teens would do so.

Closed Claims Analysis

The American Society of Anesthesiologists has been using closed insurance claims to track trends in medical errors and design patient safety strategies, Frederick W. Cheney, M.D., director of the group's Closed Claims Project said at a meeting on patient safety and medical li-

ability sponsored by the Joint Commission on Accreditation of Healthcare Organizations. Information from the project, which began in 1985, has been used to create standards of practice and practice guidelines. Since the project was launched in 1985, the inflation-adjusted median payment for a malpractice claim involving anesthesia has dropped from \$220,875 to \$72,500 in 1999. But there are drawbacks to the use of closed claims, such as the 5-year time lag involved, Dr. Cheney said. Multi-institutional injury specific registries and access to open claims could improve the analysis in the future, he said.

—Mary Ellen Schneider

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References: 1. Office of the Surgeon General. *Bone Health and Osteoporosis: A Surgeon General's Report: What Is Bone Disease?* Available at: www.surgeongeneral.gov/library/bonehealth/factsheet1.html. Accessed November 19, 2004. Page 3. 2. *Bone Health and Osteoporosis: A Report of the Surgeon General*. Washington, DC: Office of the Surgeon General, US Dept of Health and Human Services; 2004:12.

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