

POLICY & PRACTICE

Musculoskeletal Education

Medical schools should address the fragmentation of musculoskeletal education by integrating this material throughout the curriculum and explicitly identifying it, according to a report from the Association of American Medical Colleges. Medical school professors should inform their students when they are receiving musculoskeletal medicine instruction "so they begin to recognize and associate the musculoskeletal thread between disciplines," the report said. "We are delighted with these new recommendations," Nancy E. Lane, M.D., president of the U.S. Bone and Joint Decade, said in a statement. "With the growing responsibility of musculoskeletal diseases in our aging population, it is mandatory that we incorporate these criteria in the medical school setting." The AAMC report is available online at www.aamc.org/meded/msop/msop7.pdf.

ACR Protests Pay Cuts

The American College of Rheumatology, the American Medical Association, and more than 100 other groups are urging Congress to step in to stop expected cuts in the Medicare physician payments for 2006. Physicians will face a 4.4% pay cut on Jan. 1, 2006, unless Congress acts to impose a fix. In a letter to congressional leaders, the group pointed out that other health care providers and institutions will get pay increases next year, including home health providers (2.5% increase), hospitals (3.7%), and nursing homes (3.1%). "Only physicians are subject to the flawed Sustainable Growth Rate (SGR) formula, which produces negative updates because it is tied to the ups and downs of the national economy, specifically the Gross Domestic Product (GDP)—and not to the health care needs of seniors and disabled patients or the cost of providing care to them," the groups said in the letter.

New Lupus Foundation Leader

Marjorie S. Susman has been elected as the new chair of the board of directors for the Lupus Foundation of America. Ms. Susman has been a member of the group's board of directors since 2003 and has served as a member of the development and gala committees. She is also vice chairman of the board of trustees and a member of the executive committee of the Museum of Contemporary Art in Chicago. "I am honored to lead the [Lupus Foundation of America] and look forward to working with the scientific community, business leaders, policy makers, and our chapters around the country to advance our agenda and make a significant difference in the lives of those of us with lupus," Ms. Susman said in a statement.

National Stem Cell Bank

WiCell Research Institute, a nonprofit organization headquartered at the University of Wisconsin, Madison, will be home to a new national stem

cell bank, thanks to a \$16.1 million grant from the National Institutes of Health. The stem cell bank will consolidate many of the human embryonic stem cell lines eligible for federal funding in one place, reduce the costs that researchers have to pay for the cells, and maintain quality control, according to NIH. "This will optimize and standardize the techniques used for comparing the properties of stem cells, a critical step for both the basic and translational research that is needed for the eventual development of potential therapies," NIH Director Elias A. Zerhouni, M.D., said in a statement. But critics of the federal policy on stem cell research funding say the move is overdue and doesn't go far enough. "A stem cell bank is only as good as the lines in it. Without federal funding, we will simply not have the resources to develop the number and diversity of lines researchers need," said Rep. Diana DeGette (D-Colo.), who has cosponsored legislation to expand the number of stem cell lines that will be eligible for federal funding.

Health Care Rankings

Health care quality improved markedly in many key areas in 2004, but only about 21.5% of the industry now reports publicly on its performance, according to the National Committee for Quality Assurance (NCQA) annual State of Health Care Quality report. Among the 289 commercial health plans that reported their data, average performance improved on 18 of 22 clinical measures, although Medicare and Medicaid plans reported smaller gains. Improvements in measures related to high blood pressure control were made in 2004 (up 4.6 points to 66.8%), along with cholesterol control for people with diabetes (up 4.4 points to 64.8%). Fewer patients are enrolled in plans that publicly report their data, largely because of shifting enrollment patterns, the NCQA reported. Enrollment in preferred provider organizations and consumer-directed health plans is up sharply. With a few exceptions, these plans tend not to measure or report on their performance.

von Eschenbach to Head FDA

Andrew C. von Eschenbach, M.D., has been named acting commissioner of the Food and Drug Administration, following the resignation of Lester Crawford, D.V.M., Ph.D. Dr. von Eschenbach served as head of the National Cancer Institute prior to his appointment. "As a practicing physician and research scientist, I share in the critical mission of this agency in protecting and promoting the health of the American people," he said in a statement. Dr. Crawford had a 30-year career with the agency, serving as its deputy commissioner and director of the Center for Veterinary Medicine, among other posts. "It is time, at the age of 67, to step aside," he said.

—Mary Ellen Schneider

1st Anti-CCP kit on market*
with break-apart
wells

DIASTAT™ ANTI-CCP EIA

Early detection of Rheumatoid Arthritis that's Accurate, Predictive, Prognostic and Cost-Effective



In response to customer demand, the highly successful DIASTAT™ anti-CCP EIA test for the diagnosis of Rheumatoid Arthritis has been re-designed to incorporate **break-apart microwells** and to offer an **extended dynamic range**. This new flexible format makes the second generation peptide-based test highly **cost-effective**, as only the required number of microwells need to be employed, while the extended calibration will cut the number of out of range samples needing to be re-run by up to 30%.

Accurate

✓ **Anti-CCP** is over 95% specific and present in 65-88% of RA sera

Lee and Schur 2003; Ann Rheum Dis 62:87-94
Vallbracht et al 2004; Ann Rheum Dis 63:415-419
Sauerland et al 2005; Ann N.Y. Acad Sci 1050:314-318

Predictive

✓ **Anti-CCP** titres correlate with disease activity

Vissar et al 2002; Arth & Rheum 46:357-65
Jansen et al 2003; J Rheumatol 30:1691-5
Mayer et al 2003; Ann Rheum Dis 62:120-6

Prognostic

✓ **Anti-CCP** is present in most patients at first visit to the clinic

Van Gaalen et al 2002; J Rheumatol 29:2074-6
Rantapaa-Dahlqvist et al 2003; Arth & Rheum 48:2741-9
Nielen et al 2003; Arth & Rheum 50:380-6
Berglin et al 2005; Ann Rheum Dis (E publication)

Cost-effective

✓ **New Format** - Use only the number of wells required
Perform up to 30% fewer re-runs

Axis-Shield Diagnostics, Luna Place,
Technology Park, Dundee, DD2 1XA, Scotland
Tel: +44(0)1382 422000 Fax: +44(0)1382 422088
Email: anti-CCP@uk.axis-shield.com



* Available in the US early 2006.

www.axis-shield.com

• **Extended dynamic range**
• **Minimise repeat testing**