

## POLICY & PRACTICE

### CU Seeks Sunscreen Probe

Consumers Union has urged the Food and Drug Administration to review sunscreens for safety, saying that tests it conducted found that four of five products contained nanoparticles, despite claims to the contrary by the manufacturers. Nanoparticles make clear sunscreens, which consumers prefer, but there are unanswered safety questions, said Consumers Union, which publishes Consumer Reports. "The widespread use of nanoparticles of titanium dioxide and zinc oxide in sunscreen is involving consumers in a vast experiment as to the safety of these products," CU senior scientist Michael Hansen, Ph.D., said in a statement. Even if the Food and Drug Administration does not conduct a review, it should require manufacturers to reveal the presence of nanoparticles, according to the organization.

### Lasers Effective for Leg Hair

A small study has found that both Nd:YAG and alexandrite lasers are effective for long-term removal of leg hair, but that combining the two did not confer additional benefit, just more side effects such as pain and hyperpigmentation. There was no significant difference between the two lasers, according to a study published in Archives of Dermatology. The trial included 20 patients aged 16-50 years with Fitzpatrick skin types III and IV. Eighteen months after the last treatment, the mean hair reduction for the 12-mm spot-size alexandrite laser was 76%. For the 18-mm spot-size alexandrite laser it was 84%, and for the Nd:YAG laser, it was 78%.

### Elston Honored By Derspaths

The American Society of Dermatopathology honored Dr. Dirk M. Elston with its Walter R. Nickel Award for Excellence in Teaching of Dermatopathology at the society's annual meeting in San Francisco. Dr. Elston is director of dermatology at Geisinger Medical Center, Danville, Pa., and is on the advisory board of SKIN AND ALLERGY NEWS. He has authored hundreds of peer-reviewed articles and is editor-in-chief of the Requisites in Dermatology series of textbooks and of eMedicine Dermatology. An active participant in the American Academy of Dermatology's mentorship and leadership programs, Dr. Elston is the recipient of numerous teaching awards including the Darl Vanderplueg Excellence in Teaching Award, the Brooke and Wilford Hall Medical Center Department of Medicine Outstanding Teacher Award, and the Brooke Army Medical Center Department of Pathology Outstanding Teacher Award.

### Etanercept, Infliximab Lead Injuries

An analysis of adverse drug reactions reported to the FDA in the first quarter of 2008 has found that etanercept and infliximab were among the top 10 drugs accounting for serious injuries. The analysis was conducted by the Institute for Safe Medicine Practices. Varenicline (Chantix) was the leading source of serious injuries with reports of 1,001 injuries and 50 deaths, including 226 reports of self-injury or suicide. In response, the FDA said in a statement that it has been

"carefully evaluating" the varenicline reports. The ISMP said that overall, there were a record number of serious injuries reported in the first quarter: 20,745 cases. The 4,824 deaths recorded was the highest total since 2004, according to the ISMP. Heparin—specifically a tainted version tied to Chinese suppliers—accounted for the second-highest number of serious reactions. The FDA received reports of 779 serious adverse reactions and 102 deaths. The ISMP noted that only a small number of drugs accounted for a large volume of reports. After varenicline and heparin,

the top 10 associated with injuries included fentanyl, interferon- $\beta$ , infliximab, etanercept, clopidogrel, pregabalin, acetaminophen, and oxycodone.

### Practice Costs Outstrip Revenues

Operating costs rose faster than did revenues in most group practices in 2007, according to the Medical Group Management Association's annual cost survey. From 1997 to 2007, operating costs rose from 58 cents per dollar of revenue to 61 cents. For multispecialty groups, median total revenue increased 5.5% from 2006 to 2007, while median operating costs increased by 6.5%. The cost survey data are

based on reports that were submitted by practices representing 30,000 physicians, said the MGMA.

### Poor Marks for PQRI

Most of the physicians who participated in Medicare's 2007 Physician Quality Reporting Initiative found the program at least moderately difficult, according to a survey conducted by the American Medical Association. Only 22% of respondents to the online survey were able to successfully download their feedback reports. Of those who downloaded the report, less than half found it helpful. In an open-ended question about their experi-

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ence with the program, nearly all the responses were negatives, according to the AMA. The results are based on responses from 408 physicians. The AMA plans to work with Congress and the administration to alter the program to provide physicians with interim feedback reports and an appeals process. A recent survey conducted by the Medical Group Management Association reported similar problems in accessing feedback reports.

#### GAO: FDA Needed Broader Pool

FDA officials might have avoided some conflicts of interest on their scientific ad-

visory committees by expanding recruitment efforts beyond word-of-mouth nominations, according to a report from the Government Accountability Office. The report, released last month, analyzed the recruitment and screening of FDA advisory committee members before the agency changed those processes in 2007. The FDA could have reached out beyond its usual source of experts to retired professionals, university professors, and experts in epidemiology and statistics, the GAO concluded. The evaluation was requested by members of the Senate.

—Alicia Ault

## In Eight-Nation Survey, More U.S. Patients Call for Reform

BY JONATHAN GARDNER

*Elsevier Global Medical News*

In an eight-nation survey of people with chronic conditions, patients in the Netherlands were most positive about their country's health care system—reporting affordable, accessible care with low rates of errors—while U.S. patients were the most likely to say their

system was in need of major revision.

The study, published online, showed that patients in all nations report gaps in care when being discharged from the hospital, such as providing written care plans, follow-up care, instructions about symptoms to watch for, and what institution to contact with questions about condition or treatments.

The survey included more than 9,000 patients in Australia, Canada, France, Germany, the Netherlands, New Zealand, the United Kingdom, and the United States from March through May 2008. Patients had developed hypertension, heart disease, diabetes, arthritis, chronic lung conditions, depression, or cancer, and the share of patients with two or more conditions ranged from 51% in New Zealand to 71% in the United States, according to the survey.

The researchers, from the Commonwealth Fund, a New York-based charitable foundation, said just 9% of patients in the Netherlands called for health care restructuring, significantly less than the 33% of the respondents in the United States (Health Aff. 2008 Nov. 13 [doi 10.1377/hlthaff.28.1.w1]).

"It goes back to primary care as the core of [the Dutch] system," Robin Osborn, vice president of the International Program in Health Policy and Practice at the Commonwealth Fund, said in a teleconference to discuss the findings. "Patients register with a doctor. There is gatekeeping. The benefit is great. Eighty percent of the patients had been with their doctors for 5 years or more." In the United States, just 53% of subjects had been with their physicians 5 years or more.

U.S. patients faced the greatest cost and access issues, with 41% spending more than \$1,000 out of pocket, significantly more than the seven other countries, with France (5%) and the United Kingdom (4%) paying the lowest.

U.S. patients were significantly more likely (43%) than all other countries to skip doses of prescribed medicine or not fill prescriptions because of costs.

U.S. patients were also significantly more likely than most other countries to say it was "very difficult" to get out-of-hours care, according to the survey. Australia and Canada had similar negative response levels at 34% and 33%, respectively.

The United States scored comparatively well on care when patients transition from hospital care to the community. U.S. patients were significantly less likely than all other countries to report gaps in discharge information, the survey found. In the United States, 38% of hospital patients reported deficiencies; the highest rate was in France, with 71% of hospital patients reporting gaps, the report said.

The United States scored well on waiting times, the researchers found. Of patients needing to see a specialist, 74% waited less than 4 weeks, with Germany (68%) and the Netherlands (69%) also having short waits. Forty-two percent of Canadians reported waits of 2 months or longer, significantly higher than all other countries, according to the survey. ■

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