



hasn't been cleaned out properly is not appropriate, she said.

"Antibiotics should be the last tool in the toolbox, starting with better farm practices," Rogers said. "But the FDA doesn't regulate farm practices."

Taylor explained that the agency chose to pursue a voluntary phase-out over an outright ban because the agency felt it would require less time and fewer resources to work with industry groups than to pursue the legal course necessary to ban such antibiotic use. He emphasized that producers and industry groups have expressed willingness to make changes quickly.

"We'd rather get to [a reduction in antibiotic use] over the next 2 years rather than litigate over the next 2 decades," he said.

Additionally, Taylor said, the agency hopes to minimize the potential negative effect of these changes on the industries involved and on animal health by working with producers, veterinarians, and industry representatives. In particular, he acknowledged that certain producers who have more limited access to veterinarians and other resources may have a difficult time complying with some of the changes.

"We know that change will be more challenging for small-scale and geographi-

cally remote producers," he said. "We won't forget about these special needs."

Ultimately, the success of this effort may be measured in 2 ways: by monitoring antibiotic resistance levels through the CDC's National Antibiotic Resistance Monitoring Program and by tracking sales of these antibiotics, which are expected to decrease as use of these drugs for animal growth promotion decreases, according to the FDA.

"If these guidelines do not bring down antibiotic use and drug-resistant bacteria, then the FDA will have to take additional steps," Rogers said in a statement. □

## Materials Educate Patients to Make Wise Choices on Tests and Procedures

Bridget M. Kuehn

**A**S MULTIPLE ORGANIZATIONS STEP up efforts to encourage physicians to more wisely use clinical resources and reduce health care costs, professional organizations and consumer groups are conducting a parallel campaign to educate patients about testing and procedures that involve more cost than value.

Over the past few years, several professional organizations and publications have launched efforts to eliminate wasteful or potentially harmful

medical practices. These programs include the Less Is More series from the *Archives of Internal Medicine*, the High Value Care initiative of the American College of Physicians (ACP), and most recently the Choosing Wisely campaign launched by the American Board of Internal Medicine (ABIM) Foundation in partnership with numerous professional medical groups. The efforts aim to identify medical tests or other procedures that are commonly used but offer little benefit to patients, to educate physicians about such unnecessary medical care, and to en-

courage better stewardship of medical resources.

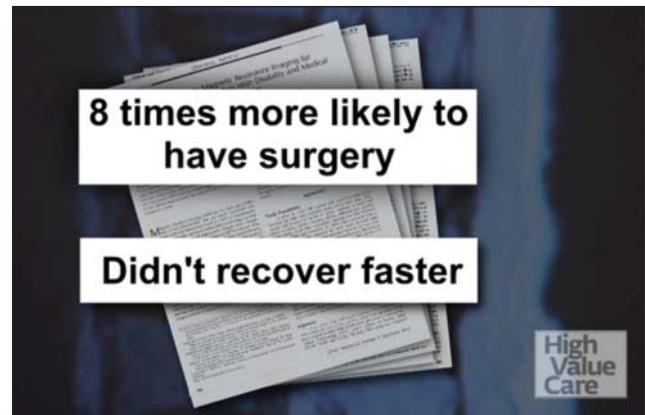
"We feel it's a professional responsibility to reduce overuse and misuse of medical care," said Steven E. Weinberger, MD, executive vice president and chief executive officer of the ACP, which is also participating in the Choosing Wisely campaign, during a press briefing.

But the organizations participating in these efforts acknowledge that physicians are only one piece of the puzzle and that educating patients to be thoughtful consumers of health care is a vital step.



Consumer Reports

Consumer Reports has created an online video to help patients weigh whether imaging is necessary to care for low back pain.





So the ABIM Foundation and ACP have partnered with *Consumer Reports* to help educate patients about interventions that have been identified as being potentially unnecessary by either the Choosing Wisely campaign or the High Value Care initiative.

Kevin McKean, vice president and editorial director of *Consumer Reports*, noted at the ACP briefing that although it would be ideal if physicians and patients could weigh interventions based on their clinical value alone, cost is an important factor for many patients in determining whether to pursue care.

“In the real world, there are millions and millions of patients who must consider cost, through no fault of their own,” he said.

McKean noted *Consumer Reports’* long track record of casting a critical eye on health care products and services—dating as far back as the first issue in 1936, which included testing of Alka-Seltzer—as providing an excellent foundation for this new effort.

**CONSUMER TRANSLATOR**

*Consumer Reports*, with its long history of providing evidence-based and unbiased information to consumers, plans to leverage its reputation and experience to translate the new guidelines for physicians into written or video materials for laypeople, explained John Santa, MD, MPH, an internist and director of *Consumer Reports’* health ratings center.

The patient materials will be peer-reviewed and cobranded by *Consumer Reports* and the professional society that created the guideline on the particular topic. The patient materials will describe why the particular intervention may not be necessary and give patients advice on steps they can take to deal with a particular issue. For example, the item on imaging for low-back pain explains: “Most people with lower-back pain feel better in about a month—whether they get an imaging test or not. In fact, those tests can lead to additional procedures that complicate recovery.”

This resource goes on to recommend steps patients can take to alleviate back pain, such as staying active, applying

heat, considering over-the-counter pain relievers or anti-inflammatories, sleeping comfortably, and consulting a physician to rule out serious underlying issues or to discuss options for alleviating the pain.

All of the patient materials produced in conjunction with the Choosing Wisely and High Value Care initiatives are free at the *Consumer Reports* website. *Consumer Reports* has also established partnerships with a range of organizations, including the AARP, Service Employees International Union, and National Center for Farmworker Health, to further distribute the materials. Santa explained that *Consumer Reports* targeted organizations with the potential to reach at least 1 million consumers each. For example, the AARP’s *Bulletin* reaches 28 million individuals. Wikipedia will also be working with *Consumer Reports* but will produce its own materials to post online.

“This is going to take a long-term commitment,” Santa said at the briefing. “Consumers’ perceptions are strong that more health care is better, more expensive care is better.”

**CHANGING PERCEPTIONS**

Santa said he expects to see some resistance to efforts to change consumer perceptions about the relationship between cost and value and to encourage consumers to be proactive in weighing the value of care. He said that past efforts by *Consumer Reports* to raise cost as an issue have met push-back from consumers.

“They are worried about mentioning to physicians that cost is an issue, because they are worried they will get [lower-quality] care,” Santa said in an interview.

But Santa said he hoped the involvement of ACP and the other professional organizations participating in Choosing Wisely will help assuage these fears. He also applauded the physician organizations for taking their fiduciary duties to patients seriously.

“More and more consumers are struggling with medical costs,” he said. “The health care industry is imposing these costs on them. We are trying to give patients some tools for dealing with those costs.” □

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From JAMA’s Daily News Site

**Polluted Air Still a Threat**

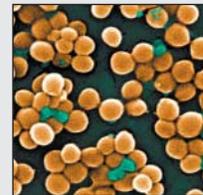
Air quality in the United States is at its cleanest since the American Lung Association (ALA) began tracking it 13 years ago. But that’s little consolation for more than 127 million residents still living in counties with unhealthy levels of ozone or particle pollution.

A recent ALA report showed that in 2010, ozone levels were 13% lower, year-round particle pollution was 24% lower, and short-term particle pollution was 28% lower than in 2001. Los Angeles had the worst ozone pollution problem.

<http://tinyurl.com/cwngte8>

**Influenza-MRSA Coinfection**

Coinfection with seasonal influenza and methicillin-resistant *Staphylococcus aureus* (MRSA) may be uncommon, but it can be deadly.



CDC/Janice Haney Carr

The US Centers for Disease Control and Prevention (CDC) reminded clinicians how severe these infections can be in a report on the deaths of 3 family members. All 3 were infected with seasonal influenza A(H3N2); 2 were coinfecting with MRSA and developed pneumonia and bacteremia. The CDC suggested using antiviral drugs and antibiotics when bacterial coinfection is suspected in patients with influenza.

<http://tinyurl.com/6qcmvar>

**Vaccine Safety Confirmed**

New research confirms that the vaccine used to protect against herpes zoster, commonly called shingles, appears to be safe.

Researchers analyzed data from 193 083 adults 50 years and older who were vaccinated in 2007 and 2008. They found a small increased risk of reactions such as redness, swelling, and/or tenderness at the injection site but no increased risk for strokes, cardiovascular events, meningitis, encephalitis, encephalopathy, Ramsay-Hunt syndrome, and Bell palsy.

<http://tinyurl.com/cwd5vnz>

**Better Nursing, Healthier Babies**

Very low-birth-weight neonates fare better at hospitals that are recognized for nursing excellence, according to a recent study.

Data from more than 70 000 very low-birth-weight neonates at 558 US hospitals show that mortality during the first week, brain hemorrhages, and infections are 1% to 2% lower in hospitals recognized for high-quality nursing care by the American Nurses Credentialing Center.

<http://tinyurl.com/76tqn92>

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