Survey: Millions of People in the US Forgo Medications to Reduce Costs
In 2021, more than 9 million US adults aged 18 to 64 years did not take their medications as prescribed because of costs, according to a report by the National Center for Health Statistics. These individuals made up 8.2% of adults in this age group who took prescription drugs in the 12 months preceding the survey.

People with disabilities were among the most likely to report cutting back on medications due to cost—20% did not take their prescriptions compared with 71% of people without disabilities. In addition, more women than men and more people who were uninsured than those with private or public insurance reported not taking medication. Moreover, Black adults as well as those identifying with more than 1 race were more likely to report not taking medication to reduce costs than Asian and White adults.

To save money, people reported skipping doses of their medication, taking less of their drugs than prescribed, or delaying prescription refills. Any of these actions might worsen the person’s health condition, contribute to more serious illness, and lead to additional costly treatment, the researchers noted.

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NCI Will Study Drug Combinations in New Precision Treatment Initiative
A new initiative will evaluate the effectiveness of drug combinations to treat cancers with particular genetic changes, the National Cancer Institute (NCI) announced.

ComboMATCH, short for Combination Therapy Platform Trial with Molecular Analysis for Therapy Choice, is made up of phase 2 trials that evaluate either 2 targeted drugs or 1 targeted drug and 1 chemotherapy treatment. The initiative follows an earlier precision medicine clinical trial in which patients with certain genetic changes in their tumors received targeted therapies of mostly single drugs.

“[W]e’re hoping that by attacking the genetic driver and the mechanisms of resistance, we will obtain more durable clinical responses and more benefit to patients,” Jeffrey Moscow, MD, a co-leader of ComboMATCH, said in a statement.

The NCI plans to enroll about 2000 patients, including some children, with specific cancer types or specific genomic changes in their cancer cells. Currently, 3 ComboMATCH trials are open for enrollment with more on the way. Physicians at participating community hospitals and cancer centers can refer patients whose tumor biologies that match those being investigated in the trials, and designated commercial and academic labs that perform genomic testing can also identify eligible patients.

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FDA Proposes Simplified Medication Guides for Patients
A new, “easy-to-read” standardized document proposed by the US Food and Drug Administration (FDA) would help patients use their prescription drugs or biological products more safely and effectively, the agency said in a statement.

The 1-page Patient Medical Information guide includes the drug’s name, information about its indications and uses, safety information, common adverse effects, and directions for use. The document, which would replace 2 types of FDA-approved written drug information for patients, would accompany prescription drugs, biological products, and blood or blood components used or transfused in an outpatient setting.

In addition to helping patients, the document might save drug and product manufacturers on costs, the FDA wrote. Although the guide would require more than $20 million per year to implement, it could save more than $180 million annually, based on estimates.

The proposed rule is open to electronic or written comments through November.

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Hybrid COVID-19 Immunity Common by Fall of 2022
The vast majority—more than 96%—of people aged 16 years or older in the US had SARS-CoV-2 antibodies by September 2022, including about 48% who had “hybrid immunity,” or immunity derived from both vaccination against and infection with the virus. People who were unvaccinated were more likely to have antibodies from infection compared with people who were vaccinated, according to an analysis of 72,748 blood donors.
More than a year earlier, by comparison, about 68% of people in the US had SARS-CoV-2 antibodies. The increase in people with the antibodies, particularly those with hybrid immunity, by 2022 might be a reason fewer people are now experiencing severe disease and death from COVID-19 compared with early in the pandemic, the researchers wrote in the Morbidity and Mortality Weekly Report.

Hybrid immunity and infection-induced immunity were lowest among people aged 65 years or older. This points to "the success of public health infection prevention efforts" and reinforces the need for this high-risk age group to stay current on their COVID-19 vaccinations, including at least 1 bivalent dose, the researchers noted.

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CMS Will Cover Alzheimer Drugs With Traditional FDA Approval

Alzheimer disease drugs that receive traditional approval from the US Food and Drug Administration (FDA) will be covered under Medicare for patients who qualify for them, the Centers for Medicare & Medicaid Services (CMS) announced.

To be eligible, patients must be enrolled in Medicare Part B and diagnosed with mild cognitive impairment or early dementia caused by Alzheimer disease. In addition, their physicians must contribute treatment results to a registry to help researchers assess real-world outcomes with the drugs, the FDA noted.

Currently, the FDA has not granted traditional approval to any medications to slow the progression of Alzheimer disease, although 2 drugs have received accelerated approval: aducanumab and lecanemab-irmb. After reviewing results from a confirmatory trial in early June, the FDA will consider whether to grant lecanemab-irmb traditional approval.

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Hospital Walking Program Reduced Nursing Facility Admission

Enrollment in a supervised walking program reduced the likelihood that hospitalized patients would be discharged to a skilled nursing facility, according to results from a trial of 12,863 veterans aged 60 years or older across 8 Veterans Affairs hospitals. Before the program was implemented, about 13% of patients were discharged to a nursing facility compared with 8% after its implementation.

The walking program did not reduce the length of hospital stays or inpatient falls. In addition, involvement in the intervention was low. The proportion of eligible patients who participated ranged from 0.6% to 22.7%.

Even though the program did not improve the length of stays or the risk of falling, "[h]ealth systems should consider hospital walking programs as a reasonable means to improve quality of care for older adults," the researchers wrote in Annals of Internal Medicine.

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WHO Introduces Network for Global Emergency Care

The World Health Organization (WHO) recently announced the formation of the Acute Care Action Network to boost emergency, critical, and operative care services worldwide, especially in low-resource areas, following the February approval of a resolution.

Swift access to these services, which range from first aid to surgical operations, would prevent millions of deaths and impairments caused by injury, infection, mental health conditions, and other medical issues, according to the WHO.

With the support of the Laerdal Foundation and the American Heart Association, the new network will teach and assist health care workers, team up with communities to create interventions, and implement the WHO's equipment and supply standards when delivering emergency, critical, and operative care, among other initiatives.

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Most Children Miss Out on Prompt Mental Health Care After Firearm Injuries

About 63% of children enrolled in Medicaid do not receive mental health services within 6 months of surviving a firearm injury despite being at heightened risk for mental health conditions, according to data from 2613 children aged 5 to 17 years who experienced firearm injuries.

Moreover, Black children were less likely to receive mental health care than White children postinjury, as were children with no prior contact with mental health services.

For the 958 children in the study who did access mental health services, the most common new diagnoses were substance-related and addictive disorders as well as trauma and stressor-related disorders. "[P]ediatricians might consider prioritizing screening for these conditions after firearm injuries," the researchers wrote in Pediatrics. – Emily Harris

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Note: Source references are available through embedded hyperlinks in the article text online.