

## MEDIA MENTIONS: DMS & DHMC IN THE NEWS



Among the people and programs coming in for prominent media coverage in recent months was the *Dartmouth Atlas of Health Care*, which found itself in the eye of a media storm after the *New York Times* published an article critiquing the *Atlas* and its methodology. Describing *Atlas* maps that show differences in Medicare spending across the country (with higher-spending regions in brown and lower-spending regions in beige), the *Times* contended that “for all anyone knows, patients could be dying in far greater numbers in hospitals in the beige regions than hospitals in the brown ones, and Dartmouth’s maps would not pick up that difference.” The *Times* article soon became an object of criticism itself, drawing rebuttals from the *Atlas*’s primary investigator, Dr. Elliott Fisher (above), and Dartmouth health economist Jonathan Skinner (below), as well as from respected health-care journalists such as Gary Schwitzer and Maggie Mahar. Blogging for *Mother Jones*, Kevin Drum wrote that “The Dartmouth research is not the



be-all-end-all of health-care research, but its basic conclusions are extremely robust and have been confirmed over and over. Why the *Times* chose to pretend otherwise is a mystery.” And in a rare occurrence, the conservative *National Review Online* concurred with the liberal *Mother Jones*, asserting that “the Dartmouth group, to its credit, does its best to produce a thoughtful, empirical analysis of variations in health-care spending.”



A six-part Associated Press series on over-treatment reported on a DMS study by Drs. Louise Davies and H. Gilbert Welch, who “found that diagnoses of thyroid cancer have more than doubled while the death rate remains unchanged.” Welch told the AP that “the

new cases are almost entirely a small, low-risk type spotted with increasing medical scans. . . . ‘The problem with our tests is they can see too much,’” he said.

“The battle to eliminate polio, which has been more than 99% successful and has hovered on the verge of victory for a decade, has sustained new setbacks,” said the *New York Times*. “The ‘biggest bump in the road,’ Dr. John Modlin, a polio expert at Dartmouth Medical School, wrote . . . in the *New England Journal of Medicine*, has been the recent emergence of polio cases caused by live vaccine viruses that mutated until they, too, were dangerous enough to cause paralysis.”



Dr. David Goodman was interviewed by the *Los Angeles Times* about warnings of an impending doctor shortage. Groups such as the Association of American Medical Colleges and the American Academy of Family Physicians have voiced concerns about a shortage of doctors and their uneven distribution among specialties. “Generally, more physicians per capita does not lead to better outcomes,” Goodman told the paper. “Organization of care and decisions doctors make [are what] count.”



An Associated Press article about the debate regarding whether healthy people should take cholesterol medication to try to prevent future heart problems turned to “an outside expert, Dr. Lisa Schwartz of the Dartmouth Institute for Health Policy and Clinical Practice.” Federal regulators recently approved the cholesterol drug Crestor for use even in pa-



tients with normal cholesterol levels, the AP reported. “The bottom line for patients,” Schwartz was quoted as saying, “is to pay attention to what’s still unknown about long-term use of Crestor in healthy people. . . . ‘We just don’t know what the balance of benefits and harms are for people who are going to take this for a lifetime.’”

“Determining brain death is a complex process that requires dozens of tests to make sure doctors come to the correct conclusion,” asserted a recent article in *U.S. News & World Report*. The magazine said a 2008 study had found wide variability in how doctors and hospitals determine brain death. “The authors of this study are experts in their field and have done an evidence-based, authoritative review,” Dr. James Bernat, a DMS neurologist, was quoted as saying. “They are saying, ‘This is the way it ought to be done.’ The goal is to improve the uniformity and the quality of neurological practice.”



“High doses of Viagra have been shown to damage hearing in mice, but until now only a few anecdotal cases had been described in humans,” according to a Reuters Health article. But, the article went on, a recent study found that men who take drugs for erectile dysfunction “may double their chances of hearing impairment, bolstering a Food and Drug Administration warning from 2007 about this side effect. . . . Dr. James Saunders, an ear doctor with Dartmouth-Hitchcock Medical Center” told Reuters that “the focus has always been on sudden hearing loss. . . . This study suggests that maybe there are small incremental changes that occur over time.”



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