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MH Medical Newsletter - November 2016

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1 HEALTHCARE NEWS

1.1 Early Childhood Screening for Familial Hypercholesterolemia May Reduce Later CVD

Screening for familial hypercholesterolemia (FH) at the time of childhood immunization can successfully identify children and parents who are at risk of cardiovascular disease, according to new research. Researchers could identify four children and four parents as positive for FH for every 1000 children they screened. They consider that childhood vaccination is an ideal opportunity to screen because parents are motivated and prevention of atherosclerosis beginning in childhood is likely to result better than those achieved with current efforts in older adults.

Meaning:

The question, whether this approach will help to reduce the number of heart attacks in the long term needs to be clarified before any revision in the current guidelines, which recommend screening only when someone has one or more close relatives that have had a heart attack at an early age.

Read more:

<https://www.tctmd.com/news/fh-screening-started-time-childhood-immunization-feasible-and-effective>

1.2 Breakthrough in Production of Dopamine Neurons for Parkinson's Disease

The first transplantation of stem cells in patients with Parkinson's disease is almost within reach, say investigators. They have developed a better and more accurate methods for producing dopamine cells for clinical use in a reproducible way. Although it remains a challenge for researchers to control stem cells accurately in the lab in order to achieve successful and functional stem cell therapies for patients, the first transplants are expected to be only a few years away.

Meaning:

It may not mean that the treatment is around the corner, but sounds promising to develop an effective cell therapy for this chronic and progressive disease affecting more than 10 million people worldwide. Parkinson's disease often leads to severe disability resulting in substantial expenditures for treatment, care and rehabilitation of patients.

Read more:

<https://www.sciencedaily.com/releases/2016/10/161028085830.htm>

1.3 WHO Doubles Minimum Number of Recommended Prenatal Care Visits

Pregnant women should have at least eight prenatal care visits, according to new World Health Organization recommendations. This is double the contacts recommended previously. According to WHO, a minimum of eight contacts for antenatal care can reduce perinatal deaths by up to 8 per 1000 births when compared to a minimum of four visits. Among the other recommendations: An early ultrasound before 24 weeks' gestation, daily oral iron and folic acid supplements, and tetanus toxoid vaccination during pregnancy.

Meaning:

Claim guidelines and adjudication rules should be aligned to ensure that pregnant women have at least eight visits with competent health providers.

Read more:

<http://www.jwatch.org/fw112231/2016/11/08/who-doubles-minimum-number-recommended-prenatal-care>

1.4 AMA Promotes Prescribing of mHealth Apps

The American Medical Association (AMA) believes mobile health applications and devices that promote safe and effective patient care have the potential to be integrated into everyday practice. AMA says, it is essential for mHealth apps support care delivery that is patient-centered, promotes care coordination and facilitates team-based communication. The new AMA principles aim to foster the integration of digital health innovations into clinical practice by promoting mHealth apps and related devices that are evidence-based, validated, interoperable and actionable.

Meaning:

Engagement of a doctor increases the use and efficiency of health apps and the new AMA policy provides guidance on how to encourage the reluctant physicians.

Read more:

<https://www.ama-assn.org/ama-adopts-principles-promote-safe-effective-mhealth-applications>

2 CHANGING HEALTHCARE POLITICS/ REGULATIONS

Currently no remarkable change.

3 CURRENT OUTBREAKS

- Currently no major outbreak alert exists.
- Previous/ minor outbreak news:

ZIKA: As no new cases are reported recently, WHO decided to end PHEIC (Public Health Emergency of International Concern) for Zika but it still remains as a public health challenge.

MERS (Middle East Respiratory Syndrome): MERS Corona virus infection was first seen in S.Arabia in 2012, worldwide 1812 cases and 645 deaths are reported so far. Human to human transmission has been observed but was only in healthcare facilities, mortality rate is high.

Status quo: 6 new cases, 2 deaths among previous cases in November in S. Arabia

Risk estimation: Sporadic cases can be expected to continue but there is no evidence for an increased risk of an outbreak. Arabian Peninsula is the main area of risk, but any travel / trade restrictions are not required.

4 NEWS / ANNOUNCEMENTS FROM MEDICAL FUNCTION

We received an interesting question via our pool mailbox (<mailto:medicalfunction@munichhealth.com>)

Question: Is VSF (Vascular Stromal Fraction) experimental? Should it be covered?

Answer: VSF is a method to obtain stem cells from fat tissue. Compared to aspirating them from bone marrow in the current method, it's much easier to aspirate stem cells from fat tissue and even in much larger amounts. Hence no need to cultivate them to gain enough number of cells and they can be given back to the same person in the same session. It's still in investigative state, not yet approved by FDA but clinical application will be enormous in many major diseases like degenerative diseases (e.g. osteoarthritis), chronic inflammatory diseases (e.g. Crohn), cardiomyopathy, neurodegenerative diseases (e.g. Parkinson, ALS), etc. once it's approved/ established. As long as policy terms and conditions doesn't indicate the opposite, VSF is still experimental and should be considered as not covered. We are monitoring the developments and will keep you updated.