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PATRICK MALONE

Better Healthcare Newsletter from Patrick Malone



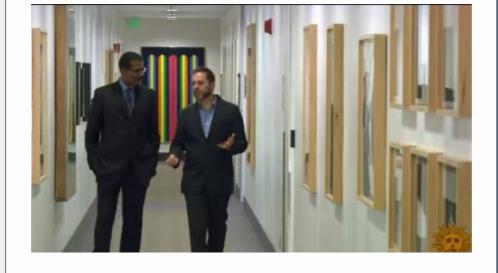
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For too many patients, medicine now revolves around two things: pills and procedures. But since humanity's earliest times, those treating the sick and injured often have turned to more human sources for help in healing: art, music, dance, theater, and literature. We're now rediscovering that the arts are not only deep wells of wisdom about what it means to be human, but also valid ways to heal mind and body.

Modern medicine prides itself on its basis in fact and science. At the same time, doctors, researchers, and artists at places with big reputations are amassing evidence on the benefits for patients to marvel at visual art works, play instruments or sing, break out in happy steps on a dance floor, see and craft live dramas, or write personal truths in prose and poetry.

The role of the arts as therapy for our physical and mental well-being is so vast that it's possible in this newsletter to give just a small survey.

Great art can help healing, major health care institutions are finding



Pablo Picasso. Andy Warhol. Willem de Kooning. Marc Chagall. Frank Stella. Max Ernst. Joan Miró. Frank Stella. David Hockney. Jasper Johns. Claes Oldenburg. Robert Irwin. John Baldessari. Jennifer Steinkamp. These aren't names plucked from a museum catalog. This is a list of some of the artists whose works are displayed at Cedars-Sinai in Los Angeles, one of the largest academic medical centers west of the Mississippi.

The hospital, at the behest of legendary Los Angeles collectors and experts Marcia and Frederick R. Weisman, has committed for decades to the "healing power" of art. This push began when Weisman underwent treatment for a severe head injury and drifted in and out of consciousness. His wife began to bring into his room favorite works from their collection, setting them by his bed and observing his reaction. He identified a painting as a Jackson Pollock before he recognized his wife anew, the hospital history says. After his recovery, the Weismans led a lifelong campaign to ensure that others especially patients receiving neurological and pediatric care - can benefit from interacting with a 4,000-works collection.

WATCH: CBS News reports on 'healing arts,' with correspondent Bill Whitaker reporting in Los Angeles (as shown above).

Cedars-Sinai is far from the only well-known institution invested in the idea that art can bolster patients' health and well-being. Johns Hopkins argues that "arts can be instrumental in helping us process and make meaning of our experiences, and feelings of grief and loss. Participating in collaborative, creative activities fosters connection, community, and well-being." It works across its schools, including the Peabody Conservatory, on research and clinical programs, including its International Arts and Mind Lab, Brain Science Institute and its International Arts + Mind Lab, which has promoted a NeuroArts Blueprint.

The World Health Organization, the Metropolitan Museum and the Museum of Modern Art in New York and New York University launched a cooperative initiative focused on "exploring the arts as a new frontier in health, care, and well-being."

The National Endowment for the Arts (NEA) is sponsoring research centers on arts and health, undertaking specialized studies at universities from coast to coast, including at the University of Maryland and George Mason University.

WHO researchers in Europe, by the way, conducted in 2021 a metaanalysis of 3,000 published medical- scientific research studies, in English and Russian, on the arts and health, reporting:

"This report found evidence from a wide variety of disciplinary approaches and methodologies for the potential value of the arts in contributing to core determinants of health; playing a critical role in health promotion; helping to prevent the onset of mental illness and age-related physical decline; supporting the treatment or management of mental illness, noncommunicable diseases and neurological disorders; and assisting in acute and end-of-life care."

Researchers tune up the data on role of music as a medical treatment



Music has a long linkage to medicine, as Dr. Harvey Simon reported in an article published in a medical journal. He wrote:

"The ancient Greeks put one god, Apollo, in charge of both medicine and music. Contemporary scientists tell us that music can enhance the function of neural networks, slow the heart rate, lower blood pressure, reduce levels of stress hormones and inflammatory cytokines, and provide some relief to patients undergoing surgery and to those with Parkinson's disease, strokes, heart attacks, depression, and painful chronic illnesses."

IN THIS ISSUE Great art can help healing, major health care institutions are finding Researchers tune up the data on role of music as a medical treatment Dance steps lively in

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therapeutic ways Drama takes a star part in well-being Say the word: Writing can be healthy

Architecture and design get new focus in safety and quality of patient care Nature has deep roots in keeping

people well

BY THE NUMBERS

~50% Percentage of health care institutions, mostly hospitals, reporting in 2009 national survey that they had arts programs, including art therapy classes and concerts. Permanent art displays were prevalent and were on the upswing.

31% Percentage lower risk of dying for older adults who engaged every few months or more with art and cultural activities vs. those who didn't. The

years of data on 6,000+, 50 or older subjects in British study on aging.

73%

findings came from 14

Percentage of recently published scientific studies reporting statistically positive effect in pain reduction in patients in arts-based therapies. Most were music related. The National Endowment for the Arts evaluated research to determine how art programs could

help battle the opioid abuse and drug overdose crisis. \$30,000 Potential savings for one

just by projecting on walls of the lounge for psychiatric patients an image of a natural landscape. This cut incidents of patient agitation and anxiety much better than displays of abstract art or

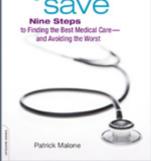
small Alabama hospital

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and practical advice from the frontlines of medicine for how to become a smarter, healthier patient.

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PAST ISSUES

Just say 'Whoa!' to

this summer

harmful

right now.

Care

Safety

Fall

runaway medical costs Staying safe and healthy

Medical "innovations" can be costly and

Why do we keep letting

dangerous doctors put

Before we launch a new cancer 'moonshot,' let's

talk about cancer care

You Can Eat This... But

Preparing for Long- Term

Managing Chronic Pain:

Secure Health Records:

A Matter of Privacy and

Standing Tall Against a

More...

Why Would You?

Looking Ahead:

It's Complicated

patients at risk?

The National Institutes of Health (NIH), the NEA, the Kennedy Center, and the National Symphony Orchestra are partners in the Sound Health initiative, a multiyear, multimillion-dollar program to provide broad research into scientific explanations of music's potential benefits for health and wellbeing.

WATCH: A sold-out Kennedy Center 'Sound Health' concert, highlighting artists, researchers, and clinicians participating in NIH initative.

The initiative has brought NSO musicians, as well as the whole orchestra, to NIH facilities for performances in clinical and research settings. It has started to result in published studies on the brain, how it processes music, and what medical interventions may be key. As Francis Collins, the recently retired NIH chief, said of the work, which also has been spotlighted by soprano Renée Fleming:

"For me, [Sound Health is] both a basic science opportunity, to use what we're learning about how music affects the brain to understand the brain better, but it's also got this therapeutic implication. Music therapy can be incredibly powerful for kids with autism, adults with Alzheimer's and everything in between, but we don't really understand most of the time how it works. We can give this field a stronger scientific base, and it can be even better."

research "explores the impact of music and rhythm-based therapies on Parkinson's disease, Alzheimer's disease, stroke, and ... other disorders ..." Patients can take note of the center's therapeutic groups, including ensembles for guitar, drumming, and singing for those with Parkinson's or Huntington's.

At Johns Hopkins, the Center for Music and Medicine reports that its

Dance steps lively in therapeutic ways



With the fitness movements of recent times, regular folks have learned about the importance of exercise in staying healthy and rehabilitating from injury and illness. Even a modicum of movement can be a difference maker, studies show. And dance can be its own kind of medicine, say Julia F. Christensen and Dong-Seon Chang, brain scientists and co-authors of "Dancing Is the Best Medicine: The Science of How Moving to a Beat Is Good for Body, Brain, and Soul." This is what Christensen, a onetime dancer, told the Washington Post:

"We looked at studies where people have been assessed for 10 or 15 years on their hobbies, such as swimming, running, doing crossword puzzles, and dance. People who dance have an advantage. They have less risk of developing heart disease or dementia. So, what is it that makes dance so different? Three reasons: music, a social aspect, and movement ... dance is a sport, an aerobic exercise. It gets your heartbeat up, keeps your muscles in shape and releases toxins from your body. In addition to these, there's the emotional component. We express ourselves when we dance. We don't just make shapes. We can be authentic, and be what we feel ..."

Academic medical centers run specialized programs to treat the special needs of professional and other elite dancers with injuries and physical performance concerns. Just as with musical therapy, there also are professional dance therapy organizations.

Both the renowned modernist Mark Morris Dance group and the English National Ballet have developed programs for therapy and research in Parkinson's. At the University of Florida, the Center for Arts and Medicine has brought together UF health clinicians and artists for long-running, regular "Dance for Life" sessions to help Parkinson's patients "improve their quality of life through enhanced overall physical well-being, social interaction, creative expression, and targeted improvements in balance, strength, and mobility." Patients praise the program, which is undergoing clinical study.

WATCH: Patients participate in UF 'Dance for Life' program and other efforts to incorporate arts, medicine, and health.

Drama takes a star part in healing



As anyone who has come through a major injury or illness knows, the experience can be full of drama. Converting real life into theater, though, can be an important treatment for soul and mind, experts say. Here is how the online site Medical News Today described drama therapy:

"Drama became a form of recreation, with people creating plays and exploring their issues. It allowed them to explore their emotions in a safe and controlled environment. It evolved until becoming more focused, with practitioners helping its redefinition as a therapy in the 20th century. It is an active and experiential approach that can help people address various issues, including trauma, mental illness, relationship problems, and personal goal setting. Drama therapists help people explore difficult emotions, process past experiences, and work through challenging life situations ... When individuals explore their inner lives through drama, they can access hidden parts of themselves, develop new ways of relating to others, and find new solutions to old problems ...

"While there is limited research on the effectiveness of drama therapy ...[a] 2021 study used [it] in individuals with serious mental illnesses such as schizophrenia, major depressive disorder, or bipolar disorder. Following a 9-week drama therapy program, the researchers noted a modest reduction in the Brief Psychiatric Rating Scale ... Another 2021 study explored drama therapy and 42 participants with dementia. After an 8-week program, the results showed that the experimental group showed a significant improvement in depressive symptoms and quality of life."

The University of Florida, with its Center for Arts and Medicine, has worked for a quarter-century with the UF Health system on a weekly therapeutic program involving "Playback" theater, notably with the Reflections troupe based in the Shands hospital. Storyteller and troupe participant Barbara Esrig explained in an online interview what she and her colleagues do:

"Every week I go to patients' bedsides and ask them to share their life stories. I tell them that in every room there is an amazing story and if it doesn't get written down no one else can tell it. I emphasize that I know they are more than just 'a heart' or 'a car accident in room 4515' but a whole human being, and I want to honor them and their life."

She described why the performances of their lives, unscripted and with music, can be beneficial to patients and medical staff:

"A huge medical complex such as Shands Teaching Hospital can be an isolating place for patients. For someone to be able to tell a personal story, not just his or her medical history, to another person is a powerful way to connect. Our audiences are not limited to just patients. The family and friends of the patients, young medical students who go in and out of crises month after month with nowhere to process their feelings, and hospital staff also come in and tell their stories. So, every Thursday afternoon this diverse group is our audience. In addition, one Thursday a month we go to Shands at Alachua General Hospital, the first and oldest hospital in town, and do bedside Playback Theatre or a performance there as well."

WATCH: PBS delves into the path-breaking research and clinical work of the University of Florida's Center for Arts in Medicine.

At the University of Southern California, faculty from the Keck Medical School and the School of Dramatic Arts, have cooperated to craft a theatrical production aimed at helping medical staff and students better deal with burnout and the emotional challenges of the healing professions. The drama involved patients, medical students, and staff, as well as trained actors from "marginalized" communities. The performances deeply engaged the various participants and had a measurable effect, notably improving employee satisfaction survey

Say the word: Writing can be healthy

scores.



Patients are people first, and especially when they are sick or injured, their very lives become complex stories. Doctors must listen to these, as well as to observe, analyze, chronicle, and put together these stories to treat the afflicted. It is little surprise, then, that medicine and literature have long, deep connections. Consider this from a Yale Medicine magazine article:

"The prevalence of great physician-writers suggests an affinity between medicine and writing. Among the best-known practitioners are the Russian short-story writer and playwright Anton Chekhov; the poets John Keats and William Carlos Williams; and Sir Arthur Conan Doyle, who created Sherlock Holmes and his physician sidekick, Dr. Watson. Contemporary physician-writers include Oliver Sacks ... Jerome Groopman ... Atul Gawande ... and Abraham Verghese ... author of the popular novel Cutting for Stone. Khaled Hosseini ... wrote The Kite Runner; Robin Cook ... writes medical thrillers; and the late Michael Crichton ... wrote popular fiction on everything from dinosaurs to marijuana smugglers to extraterrestrial plagues."

Dr. Daniel Becker, a now-retired palliative medicine expert, poet, and onetime director of the University of Virginia Medical School's Center for Biomedical Ethics and Humanities, has described in an interview the importance of stories, storytelling, creativity, reading, and writing in medicine, observing that "unless you get the patient family story right, you're not going to do an adequate job taking care of them. Imaging, lab tests, medications – all of that doesn't approximate suffering, loss, family dynamics - how a father's illness affects mother, kids, for example."

Studies have shown the health benefits of writing, he said, adding, "If you take college kids who volunteer and encourage them to write about a difficult personal experience and compare them to students who didn't write, they have an easier time in college, go to student health less often ... It's been reproduced in a clinical setting."

For some clinicians, a key component of the quality of their care is rooted in the expertise of narrative medicine, a field championed by Rita Charon, an English Ph.D., as the National Endowment for the Humanities explains and M.D. in an online posting:

"In 2000, Charon founded the Program in Narrative Medicine at the Columbia University College of Physicians and Surgeons to teach future doctors how to elicit, interpret, and act upon the stories of their patients. The skills came through rigorous training in close reading, attentive listening, and reflective writing on stories of illness. By studying how narratives work, doctors could build trust, develop empathy, and foster a sense of shared responsibility in a patient's health. An article in the March 2011 issue of Academic *Medicine* described an experiment that followed 891 diabetic patients for three years to see if their health outcomes related to their physicians' empathy levels, which was measured in part by 'an understanding of the patient's experiences, concerns, and perspectives.' The results showed 'the likelihood of good control [f diabetes] was significantly greater in the patients of physicians with high empathy scores than in the patients of physicians with low scores."

WATCH: Dr. Charon describes 'narrative medicine' in a TEDx talk in Atlanta.

For patients, of course, reading and writing can have significant health benefits, studies have shown. Consider, for example, this bit of information from a study published in medical journal:

"In comparisons with controls, expressive writing produced significant benefits for individuals with a variety of medical problems ... Study participants with asthma or rheumatoid arthritis showed improvements in lung function and physician-rated disease severity respectively, following a laboratory-based writing program (Reference Smyth, Stone and HurewitzSmyth et al, 1999) ... Some studies found that patients with cancer reported benefits such as better physical health, reduced pain, and reduced need to use health care services (Ref: Rosenberg, Rosenberg and ErnstoffRosenberg et al, 2002; Ref: Stanton, Danoff-Burg, Lepore and SmythStanton & Danoff-Burg, 2002) ... Patients with HIV infection showed improved immune response similar to that seen in monotherapy with anti-HIV drugs (Ref: Petrie, Fontanilla and ThomasPetrie et al, 2004) and individuals with cystic fibrosis showed a significant reduction in hospital-days over a 3-month period (Ref: Taylor, Wallander and AndersonTaylor et al, 2003). Women with chronic pelvic pain reported reductions in pain intensity ratings (Ref: Norman, Lumley and DooleyNorman et al, 2004) and poor sleepers reported shorter sleeponset latency (Ref: Harvey and Farrell Harvey & Farrell, 2003)."

Architecture and design get new focus in safety and quality of patient care



Architecture and design can have

significant effects -- good or bad -- on people's health and health care, a fast-growing body of research has found. Those studies point to a disturbing conclusion: Too many health care facilities are built all wrong, making patients sicker, slower to improve — and even killing them. It's a view that the coronavirus pandemic has only reinforced.

Long before the pandemic, Dr. Druv Khullar, an M.D. and M.P.P. at Massachusetts General and Harvard Medical School, wrote a trenchant Op-Ed column in the New York Times. He argued that the bean-counting financial types who run hospitals must stop thinking about architecture as an aesthetic or "trophy"-creating concern.

Instead, he emphasized the significant harms that patients suffer in hospitals, most notably due to infections acquired there. Hospital-acquired infections (HAIs) add to the woes of hundreds of thousands of already ailing patients annually, and they're part of the broader problem of medical errors, which some experts estimated in prepandemic times claimed 250,000 lives annually and may be the No. 3 killer in this country.

As Khullar noted, hospitals could achieve sufficient cost-savings with reduced HAIs alone, so that they could put all patients in single rather than shared rooms. These would give doctors and patients greater privacy, comfort, quiet and calm, and lessen infections' spread. (Separate research, for example, has found that curtains that screen patients can themselves be germ-ridden, with one California hospital finding that a third of them in use there carried multi-drug-resistant bacteria.)

Further, by rethinking the solo suites' design, hospitals could make rooms safer from the growing problem of patient falls: Bathrooms could be built nearer to beds and be made more navigable with handrails. By starting from scratch in designs, other research has found, hospitals could create adjacent rooms in mirrored fashion, sufficiently alike left and right, so important medical equipment in the suite would be better positioned and in places instantly familiar to staff

Nature has deep roots in keeping people well



Take a hike! Stroll through a nearby park. Pad around a beach, lake, river, or stream. Bike through the hills. Meditate in the wild.

No matter how folks choose to do it, getting into the great outdoors for 120 minutes or so each week — indulging in what the Japanese call shirin yoku or "forest bathing" — can benefit your health.

This is what British researchers found in their meta-analysis of almost 150 studies published in medical journals and examining the health benefits of those who are exposed to green spaces:

"[Our] review suggests that green space exposure is associated with wide ranging health benefits, with meta-analyses results showing statistically significant associations with reduced diastolic blood pressure, heart rate, salivary cortisol, incidence of type II diabetes and stroke, all-cause and cardiovascular mortality, as well as healthdenoting associations with pregnancy outcomes, [heart-rate variability], and HDL cholesterol, and self-reported health"

The New York Times reported that clinicians in nations around the globe are prescribing outdoor time in response to patients' various health conditions:

"In Sweden, *friluftsliv*, the term for living close to nature, is so ingrained in everyday life — from commuting by bike to relaxing in lakeside saunas - that there are tax breaks offered as incentives for the lifestyle. In South Korea, the government is establishing dozens of "healing forests" for its stressed-out citizens. And last year, NHS Shetland, a national hospital system in Scotland, began allowing doctors at some medical practices to write scripts for outdoor activities as a routine part of patient care."

Dr. Qing Li, an MD and PhD who practices in a Tokyo hospital, has written a book on Japanese forest bathing, describing it in a Time Magazine article:

"So how does one go about forest bathing? First, find a spot. Make sure you have left your phone and camera behind. You are going to be walking aimlessly and slowly ... Let your body be your guide. Listen to where it wants to take you. Follow your nose. And take your time. It doesn't matter if you don't get anywhere. You are not going anywhere. You are savoring the sounds, smells and sights of nature and letting the forest in ... Let nature enter through your ears, eyes, nose, mouth, hands, and feet. Listen to the birds singing and the breeze rustling in the leaves of the trees. Look at the different greens of the trees and the sunlight filtering through the branches. Smell the fragrance of the forest ... Taste the freshness of the air as you take deep breaths. Place your hands on the trunk of a tree. Dip your fingers or toes in a stream. Lie on the ground. Drink in the flavor of the forest and release your sense of joy and calm. This is your sixth sense, a state of mind. Now you have connected with nature. You have crossed the bridge to happiness."

to avert error.

Better designed rooms also would relocate and improve their sinks, both in patient bathrooms and for caregivers to wash their hands — a major way to reduce hospital infections. More attention must be given to hospital sinks, other research shows. That's because fatal infections, such as an outbreak at the National Institutes of Health clinical flagship in Bethesda blamed in the deaths of 11, may be tied to persistent bacteria flourishing in hospital plumbing and splashing up from sinks.

Khullar says that redesigned hospitals could better position nursing stations with clearer sightlines into multiple patient rooms, lessening the need for the many noisy electronic alarms with which so many medical devices now are armed. Better design would eliminate hard, slick hospital floors that may be easier to clean but also contribute to falls and add to hospital clatter. (Hospitals are trying to help patients by quelling noisy environments to give them peace and quiet to get

During the pandemic, news articles have reported how doctors and hospitals were and will be forced to rethink an array of institutional design issues, notably ventilation, quarantine capacity, infection control, and the inflexibility of spaces in many fancy, giant buildings.

a decent night's sleep.)

When trying to treat overwhelming numbers of very sick patients, many hospitals came close to collapse, partly because they were designed when policy makers sought to slash capacity — keeping costly beds at the lowest numbers possible. That meant too many hospitals had become sealed fortresses to handle fewer, specialized, and complex cases — forcing the virally ill to wait in halls, jammed waiting areas, and worse.

The pandemic will force politicians, doctors, and hospitals to reconsider whether networks of satellite centers — for surgical procedures and urgent and emergency care — provide sufficient facilities for future situations involving mass treatment.

By the way, the pandemic has made painfully clear that giant nursing homes and other long-term care facilities, towering facilities packed with residents in hopes of making business operations run more efficiently, also demand changes. These were outlined in a expert research investigation by the National Academies of Sciences, Engineering, and Medicine As the Associated Press reported, quoting David Grabowski, a nursing home expert and Harvard Medical School professor:

"Among the more routine subjects in the report, but one that nonetheless impacts residents' everyday lives, the authors call for homes to prioritize private rooms and bathrooms, instead of the communal ones that can fuel infections and underscore the institutional setting. And in a blunt reminder of how bleak life in nursing homes can be, the report notes most residents spend 'little if any time outdoors,' calling for facilities to make outside access more accessible. The proposals, Grabowski said, have the potential to improve the days of residents who, even when they are having their basic medical needs met, are frequently lacking in other areas of their lives. 'I think the average nursing home resident has an OK quality of care but a poor quality of life,' Grabowski said."

Those with appropriate skepticism about touchyfeely interventions also can consider that the importance of exposure to nature is informing experts' rethinking of the design of hospitals and other health care facilities, as Dr. Druv Khullar, an M.D. and M.P.P. at Massachusetts General and Harvard Medical School, reported in an Op-Ed column in the New York Times:

"Some of the most interesting research on the way hospitals are built examines the role of nature to promote healing. Research pioneered by Roger Ulrich, now a professor of architecture at the Center for Healthcare Building Research at Chalmers University of Technology in Sweden, suggests that when it comes to recovering from illness, the more nature the better. But too often patients and physicians find themselves cooped up in dim rooms and sterile hallways with little access to natural light or views of nature: too much concrete, not enough jungle. Dr. Ulrich's early work explored how patients recovered after gallbladder surgery based on whether they were assigned to a room with a window that had a view of nature or of a brick wall. The study, now one of the most widely cited in the hospital design literature, found that patients looking out at trees had shorter hospital stays and took fewer pain medications than those viewing a brick wall ...

"Similar research has found that patients with bipolar disorder who are randomly assigned to brighter, east-facing rooms with morning sunlight had hospital stays nearly four days shorter than those with west-facing rooms. Even just images of nature may be beneficial. One study found that psychiatric patients tend to require far fewer medications for anxiety and agitation when photos of landscapes hang on hospital walls compared to walls adorned with abstract art or left bare."

Photo credits: medicine as art, top, in famed 'Portrait of Dr. Samuel D. Gross, 1875, by Thomas Eakins. The pioneering surgeon is shown teaching clinicians in Jefferson Medical College's surgical amphitheater. Gift of Alumni Assn. to Jefferson Medical College in 1878, purchased by Pennsylvania Academy of the Fine Arts and Philadelphia Museum of Art in 2007 with the generous support of more than 3,600 donors ... conductor Francesco Lecce-Chong leads National Symphony Orchestra in concert at NIH Clinical Center as part of Sound Health initiative, institute photo by Ernie Branson ... other photos by Unsplash.

Recent Health Care Blog Posts

Here are some recent posts on our patient safety blog that might interest you:

- Federal officials have launched a new 988 number for callers with suicidal thoughts or other mental health emergencies, hoping that the public adopts this three-digit alternative and finds it as familiar and useful as 911 has become for medical and other urgent help needs. The National Suicide Prevention Lifeline, which those in distress could reach by calling 800-273-TALK (8255) or texting HOME to 741741, will keep operating for a time. But mental health advocates say they hope 988 soon will become embedded in the public consciousness as the line to call 24/7 to tap into resources — many of them which will rely more on individual states — for what have become big needs.
- Get some sleep! That's not just a late-night nudge for the kids from their parents. It is strong new advice patients will hear from their cardiologists and other doctors, as the American Heart Association has added sleep to its list of important ways for folks to avoid cardiovascular conditions, stay healthier, and live longer, the Washington Post reported. The association has focused on behavioral and other factors for a time now to battle the leading cause of death in this country: heart disease. The federal Centers for Disease Control and Prevention has reported that almost 700,000 Americans died of heart disease in 2020. The ailment costs the country \$230 billion annually.
- Since the 1970s, some doctors have treated arthritic knees by injecting them with hyaluronic acid, a substance originally derived from the combs of roosters. Specialists have zealously promoted this therapy, costing patients a few hundred dollars a pop and repeated so widely that Medicare alone pays \$300 million annually for it. Doctors argue it reduces pain and increases joint mobility. It hardly lives up to this billing, though, offering patients scant more relief than a placebo (saline, or salt water), researchers found after scrutinizing a half century's worth of data from 169 clinical trials involving more than 20,000 patients.
- One of the nation's largest health care systems had its ambitious plans to reshape itself for the 21st century torpedoed by a dozen members of the U.S. Senate, with taxpayers and veterans left in the lurch with great uncertainty about the future medical care for those who valiantly have served this country. Just a few weeks ago, Denis McDonough, the secretary of the Department of Veterans Affairs, met a deadline from Congress to detail significant shifts in how his sprawling agency cares for former military personnel and their families. He provided a proposal — a plan only — to shut many of the VA's 1,200 big, aging hospitals and clinics or slash services there, shifting to smaller facilities, and refocusing the agency's caregiving to parts of the country where its patients live. His plans and the future of VA care, which already have been under study for at least four years, were then to be taken up by a blue-ribbon group. But a dozen senators, from both parties, put out a news release that said they were declining to appoint the panel's members.
- Although Americans dread the possibility of experiencing dementia and other debilitating cognitive decline as they age, they can do more than let fear rule their lives — or twiddle their thumbs waiting for Big Pharma to drop billions of dollars more to develop magical and, so far, unworkable pills. Instead, doctors, epidemiologists, and public health officials argue that non-pharmaceutical approaches can be beneficial to patients' overall health and play a significant role in decreasing the likelihood of individuals suffering severe memory loss and more crucially dementia, notably in its most common condition Alzheimer's, the New York Times reported.

HERE'S TO A HEALTHY 2022!

Sincerely, Trick Molone

Patrick Malone Patrick Malone & Associates

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