

A Big Lie

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A recent article in the *Peoria Journal Star* by Lee Bowman of Scripps Howard News Service proclaimed with bold headlines that doctors miss 50 percent of problems and that poor quality of health care puts everyone at risk, even the insured.¹ The headlines were based on a “landmark study” appearing in the *New England Journal of Medicine*.² The study involved nearly 7,000 individuals in 12 metropolitan areas. I am certain that the same message has been echoed in almost all newspapers across this nation.

Isn't it amazing how bad medical care has become in the United States? I was under the impression that the care we receive is the best in the world. I guess doctors are just not to be trusted with our medical care. Perhaps lawyers, congressmen, governmental bureaucrats, statisticians, and various philanthropic foundations can do a better job. No, they cannot provide medical care; they can only denigrate our profession.

Unfortunately the vast majority of individuals in our society will accept the newspaper article at face value. They will never recognize its absurdity or the fact that they are being manipulated. Sadly, most doctors are so apathetic that they will not even care that the article has been written. Still other doctors will be so self-righteous that they will agree with the article's assertions and work diligently to correct these alleged shortcomings in our profession with no further investigation.

Physicians who are truly interested in our profession will study this issue very carefully, because they realize that our profession is under a massive attack by leftist elements in our society that desire to socialize medicine. I personally always examine articles that denigrate our profession for any mention of the Robert Wood Johnson Foundation. Is the Foundation mentioned in this article? The answer is yes. They sponsored the study! By the way, they were also very involved in the Clintons' health plan several years ago.

According to the newspaper story, lead author Elizabeth McGlynn feels that electronic patient records and automatic prompts for “health providers” will help alleviate the problem. It is of interest that the Institute of Medicine (IOM) is also an advocate for the electronic patient or medical record. Moreover, the Institute is also interested in “quality care” and has publicly stated that between 44,000 and 98,000 deaths in hospitals occur each year because of medical errors.³ Is there an association between the Institute of Medicine and the Robert Wood Johnson Foundation? Again the answer is yes. The Robert Wood Johnson Foundation recently gave a \$3.7 million grant to the Institute to carry out a series of activities regarding the uninsured.⁴ Do they have a common agenda? I think so.

The electronic patient record will just add another level of documentation to the already overly cumbersome medical record. However, the record will now be in a box that will not be as accessible—to physicians—as the patient's chart. I suppose every doctor will eventually have to carry around a computer in order to access patients' records. How impersonal! The treatment of the computer “documentation” will become more important than the treatment of the patient. The art of medicine will suffer significantly. Nursing care will also be compromised because of the massive documentation that will be necessary to satiate the appetite of the medical bureaucrats.

Despite the computer prompts, medical errors will still occur. The validity of the data in the electronic record will depend on the

accuracy of those who enter the data. As computer experts warn, “garbage in, garbage out.”

Then there is the issue of privacy. The electronic medical record along with the recent HIPAA “privacy regulations” will without a doubt facilitate the development of a massive federal computer database involving everyone in this country. That will be the end of privacy. Nazi Germany demonstrated the potential uses of such a database.

The study underlying the recommendations was flawed in several respects. First, it was a retrospective random study based on telephone interviews in twelve metropolitan areas. Medical records were also obtained after the interviews in many cases. The memories of most patients are notoriously inaccurate, and patient records almost never contain every instruction regarding care and/or preventive measures that were discussed by a physician and his or her nursing staff. Even if preventive care is discussed with patients they usually do not heed the advice. I can say this with absolute certainty because of my experience with patients regarding ultraviolet light protection.

Finally, the authors' assertion that patients were treated inappropriately may well be true in some instances, and we should work as a profession to improve any deficiencies in patient care. However, recommendations for appropriate care change over time and what is correct treatment today may be considered totally inappropriate in the future. A knowledgeable, caring, and intuitive physician provides the very best patient care. The doctor and the patient should decide what is the best care in a given situation and not a computer prompt. The art of medicine still plays a very important role in patient care.

Unfortunately the art of medicine is being subjugated to technology and statisticians in the name of “quality care,” and this is a tragic loss. I am afraid the computer will lead to a total depersonalization of the practice of medicine and to a total loss of privacy. We will all suffer because of non-caring medical care. The depersonalization has already started because of the volumes of paperwork that are currently required to satisfy governmental regulations, managed-care directives, and other legal requirements. Unfortunately the treatment of the chart is becoming more important than the care of the patient.

The *New England Journal of Medicine* article is beneath the dignity of a fine medical journal. It is insulting to physicians and a disservice to our patients. The article will not improve patient care, but it will diminish the patient-physician relationship by leading to distrust of physicians by our patients. It is an excellent example of “The Big Lie.”

We must never allow the art of medicine to be destroyed. Without it our profession will have lost its heart and soul.

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REFERENCES

- 1 Bowman L. Study: Doctors miss 50% of problems. *Journal Star*, June 26, 2003, A3.
- 2 McGlynn EA., et al. The quality of healthcare delivered to adults in the United States. *N Engl J Med* 2003;348:2635-45.
- 3 Institute of Medicine: *To Err is Human: Building a Safer Health System*. Washington, D.C.: National Academy Press; 2000.
- 4 Shine KI. President's Report to the Members. Institute of Medicine Annual Meeting, October 17, 2000.