

INFINITE WISDOM

INSIDE THIS ISSUE:

Lab Corner—Crack Pots 2
World Health 2
Match Day 3
Show & Tell 3
Zika Update 3
COPD Screening 4

Special points of interest:

- Individualized health care when you need it.
- Same day or next day appointments.
- Want to talk to your own doctor? Call.
- See your doctor, not a random on call doc in the office

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POLITICS OF HEALTH INSURANCE

The Paul Ryan authored bill known as the American Health Care Act failed to come to a vote in late March as the GOP realized there were not enough votes to pass. So where does that leave us? The ACA (Obamacare) certainly cannot sustain itself and must be repealed. The only way for it to work is for premiums to rise on everyone who pays their own insurance in order to subsidize others. Repealing will take 60 votes in the Senate but the Democrats are not likely to vote to repeal. This creates a situation where 50 votes can make certain changes but not an outright repeal. One trick all parties play is confusing health insurance with health care. Anybody



and everybody can get health care. Firstly that starts with self-care. We all can do that. Additionally, patients can go see a doctor whenever they want even if they don't have insurance. Like I say, people buy soft drinks even though they don't have soft drink insurance. The price of Infinity Health is less than most people's soft drink budget. So where do we go from here? Health care and health insurance needs to be removed from the pur-

view of the federal government. Once the federal behemoth starts some program, it takes over, even if it is horrible. That function should be returned to the states, where there is more local control and voter input. The closets thing to that now is a bill authored by our own Senator Bill Cassidy. He has created the Patient Freedom Act of 2017. It is NOT perfect and needs some financial recalculation. It DOES make it where people can pay for their membership fees from their Health Savings Account as the IRS is confused about this. It also establishes that direct primary care (the model that Infinity Health and myself are) are not classified as an insurance. It also gives more flexibility to the states to adapt to each unique situation.

STATINS AND DIABETES

Statins are medications used to control high cholesterol levels. In a large number of studies, the main benefit is that they have been shown to reduce the risk of heart attacks and strokes. They are very useful in that regard. They are easy to spot as the generic name for those medications all end in "statin." The most commonly reported side effect



is muscle aches. It is very rare for muscle damage to be seen but we hear at times that some people say it makes them ache. The only way to remedy that is

to stop the medication. Another issue that is being monitored is whether statins may increase the risk of diabetes. This is somewhat difficult to tell as most diabetic folks are placed on a statin anyway because diabetic individuals may also have high cholesterol or need cardio-protection.
(Continued on pg 2)

*“So how can we
diagnose the crack pots
that are around us? ”*

LAB CORNER...PORCELAIN LEVELS

We all know people who are a little bit strange. Sometimes we call them “crack pots.” Through a complex test we can measure the amount of porcelain in their blood stream. Porcelain is a ceramic material made under intense heat in a kiln. It is used to make various forms of glassware and pots. It is very resilient but can often crack with the appropriate amount of force. This form of pottery manufacturing is very prominent. We all know knuckleheads around us. It’s not you!



Trust me!
So how can we diagnose the crack pots that are around us? It is not as simple as simply using the Washington DC Zip Code to identify these people. We need something more objective. We can’t biopsy them (although that would be nice). Some of these people are part of normal

society and only exhibit “crack pot” behavior during certain times. I know you must be thinking to check the www.crackpots.com website but there is nothing on that. It is not that easy. So we developed a serum porcelain blood test. If you have a lot of porcelain in you, then YOU may be a “crack pot.”
Ooops, sorry. This was an April Fools article, It won’t happen again!
Crack pots...you know them when you see them.

WORLD HEALTH DAY

World Health Day is April 7, 2017. April 7 is also the World Health Organization’s birthday. I must admit that I didn’t know this until I was researching this newsletter.

The main focus for WHD is depression. Depression is a major cause of people feeling bad. WHO can’t really do much about depression except to remind



**World Health
Organization**

folks that if you have feelings of sadness, suicide, or desire to drink alcohol, you should tell your doctor. That doc does not need to be a psychiatrist. Family

Medicine docs know how to treat this. I am a strong advocate in referring patients to license professional counselors too. They can be a big help. Medications can result in dramatic improvements too. Frankly, depression is rewarding to treat because we can see dramatic improvements in how a person feels.

*“found an increased risk
of diabetes in those who
used statins”*

STATINS...CONTINUED FROM PAGE 1

In the journal Nutrition, Metabolism & Cardiovascular Disease, researchers reported on a study where they pooled 20 different studies and examined the data. They found an increased risk of diabetes in those who used statins. It seemed to be more prevalent in those who used the more potent statins (Crestor, rosuvastatin and

Lipitor, atorvastatin). The lead investigator, Manuela Casula, PhD at the University of Milan reported these findings but pointed out that there is NO evidence that statins CAUSE diabetes. There just seems to be a statistical association. It is possible that folks with high cholesterol may have a tendency to develop diabetes over

time. Also, this was not a classic double blind study that can accurately measure. The study did NOT show that statins can worsen diabetes.

The take home message is to monitor glucose levels on those who take statins. Most docs do that anyway whenever we order a cholesterol level.

MATCHING PROGRAM

Fourth (last) year medical students have to pick what specialty they want to go in. They tour various programs in the country. The student sends in a list indicating their order of preference of where they want to do their residency. The various residency programs send in their list of preferred students they would like to have based on interviews, grades, and test scores. In the end of March, the two lists are matched. Students are informed of what residence specialty location they will be going to. This is the anxiety-provoking



"Match .Day." One day you're in medical school in New Orleans, the next day finds that they are going to a training program in Tucson after they graduate. This year my specialty had 3400 hundred available "spots" throughout the US. Those openings were filled with 3200 docs who will be starting their Family Medicine residency training. Of

that number 1500 are from US medical schools. The other 1700 are from foreign medical schools and US osteopathic schools (folks who get a "DO" instead of an "MD") This is disturbing in that not many US students are attracted to primary care like Family Medicine. Over half of the training spots are filled by those from outside the country. While many of those are highly qualified, we need a better system to attract our US medical school grads to family medicine . If not, the primary care shortage will be worsening.

"not many US students are attracted to primary care "

SHOW & TELL

Gather up the animals and hide the kids, it's time for the 6th edition of the "Watch This" series. "Watch This 6: Show & Tell" will be produced and hosted by Dr. Karl with my quartet, Southern Tradition. It is a musical variety show with this edition's theme being tunes from small and big screen. The concert will again be



held at St. Matthew's United Methodist Church located at 6017 Camphor St. in Metairie (sort of close to West Metairie and David Drive

area). It is FREE and will be at 4:00 PM on Saturday April 8th. Show might be a smidge over an hour long. We are having it before the Jazz Fest weekend so as not to deplete Jazz Fest attendance. Music will be from our quartet, a chorus, a band, solos and duets. Dancing is not prohibited.

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ZIKA UPDATE

Spring brings mosquitoes. Mosquitoes bring Zika. As a reminder, the *Aedes aegypti* mosquito transmits the virus. If a female becomes pregnant while having the virus present ,it could lead to birth defects in her child. The Centers for Disease Control and Prevention (CDC) have an updated



report where they followed over one thousand pregnant females who have the virus. So far seven women have lost their unborn to the virus

while fifty four have been born with Zika-related neurologic defects. This underscores the need to protect ourselves from mosquitoes by using repellent and eliminating convenient breeding places. This applies to all of us but especially to pregnant ladies and those who are planning to become pregnant.

Infinity Health, LLC
200 W. Esplanade Ave.
Suite 307
Kenner, LA 70065

Phone: 504-467-3404
Fax: 504-467-3244
E-mail:
contact@infinityhealth.md

We are on the web!
www.InfinityHealth.MD

*An Invitation:
If you know of a friend or family member that would be interested in becoming a member, please have them contact us for a free non-medical meet-and-greet visit.*



A

Direct Primary Care
Practice

Newsletter

written and published
by Karl N. Hanson, MD

Previous Newsletters

www.InfinityHealth.MD/documents

Infinity Health is a Direct Primary Care practice developed by Dr. Hanson. Dr. Hanson has been in medical practice since 1987 and has been a solo practitioner since 1990 in the conventional insurance-based model.

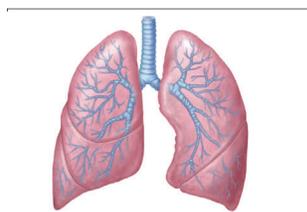
The concept of dealing or contracting directly with the patient is a bit of a throwback but it places the relationship where it should be, with the patient. There is no point in Dr. Hanson or our office wasting time interacting with insurance companies unless it directly contributes to your health. Instead we developed a medical home which has its focus on the patient's health regardless of their insurance status. Infinity Health is a product of Dr. Hanson and is not affiliated with any other organization. We are a membership-based practice. Direct Primary Care is not the same as typical "Concierge" practices which charge a fee AND bill your insurance company.

Dr. Hanson is Board Certified by the American Board of Family Medicine, a Fellow in the American Academy of Family Physicians and a member of the Alpha Omega Alpha Medical Honor Society. He completed his recertification process in April 2016.

USPSTF CORNER: COPD SCREEN

The lung diseases we hear commonly about are chronic obstructive pulmonary disease (COPD) and emphysema. The two are different but typically are a result of long term smoking. They both can cause shortness of breath. Typically COPD leads to increased cough and phlegm production on a regular basis with occasional flare-ups. Emphysema is destruction of lung tissue with shortness of breath as the primary issue. Some folks with these need inhalers or even oxygen. Chest x-rays can be used to diagnose these but a breathing test is almost always necessary.

So if you have no symptoms, should we do a chest x-ray or breathing test to find it "early" so we



can start treatment before symptoms appears? If you are feeling fine, should you ask your doctor to do a chest x-ray and pulmonary function test (PFT) to check you out?

No. There is no evidence that routine screening for emphysema or chronic bronchitis is of any benefit. We can't do anything to slow its progression so early detection is not valuable. Smokers should quit smoking, but we tell them to quit smoking anyway even if there are no obvious symptoms yet. None of the pills or inhalers we

use do anything but make people breath a little better or cough a little less. Some may reduce the chance of hospitalization related to their COPD but those are people that know they have the disease. It is not a subtle disease.

Before one is "officially" diagnosed with any type of COPD, they should be tested as part of the evaluation to find the reasons for shortness of breath.

The U. S. Preventive Services Task Force (USPSTF) is an expert panel which reviews the current evidence to help us docs recommend counseling, medical screenings and preventive medications. It is funded by the U.S. Department of Health and Hu-