

BACK BONE



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President's Corner

Research Data vs. Marketing Hype

Michael Marks, M.D., M.B.A. - President



The recent Food and Drug Administration (FDA) "crisis" concerning COX-2 inhibitors brings to light the issue that we as orthopedic surgeons must continue to wrestle with during our professional careers – scientific data versus marketing hype.

Unfortunately, too many of us jump on the bandwagon when something new arrives on the scene. We do this because our personalities lead us to be early adapters or we feel pressured to look for a marketing advantage for our practices. Without a crystal ball, there is no way to know what the longitudinal studies will demonstrate – until sometimes it is too late. There is very little in medicine or society where the terms always or never apply. We must remember to keep in mind what the true indications are for a particular drug or prosthetic device.

The most sage statement on this subject I heard was at an AAOS meeting in the 1980's, when a paper on the Kennedy LAD ligament was preceded by the statement, "Why is it that when we get a new hammer, everything looks like a nail?" The Kennedy LAD ligament was developed as salvage for the multiple-operated ACL deficient knee. Many complications arose when it was used as a primary device.

Spine surgery seems to be at the forefront of new innovations. In the 1990's the Ray and BAK cages were marketed as easy devices to achieve spine fusions. They literally were being thrown in both front and back. As a result, too many cases were being done with many complications and subsequently, malpractice cases.

A long held adage has been that probably only 10% of all patients with disk herniations ultimately need surgery. It is also documented that with surgery, the infection rate is roughly 1%. If we then start with a population of 1,000 patients, operate upon 100, then only one patient should be unfortunate enough to get an infection. However, if we are overzealous in our surgical indications, and operate upon 500 patients, there will be 5 infections. Still an acceptable 1% infection rate, but now with a 500% increase in the surgical population.

Many of us probably remember Zomax and/or Duract – earlier anti-inflammatory medications that were excellent pain relievers, but they were taken off the market because they caused severe end stage liver failure. Like Toradol, they were designed for short-term use, but physicians kept on writing prescriptions that lasted weeks and months. We must be vigilant in checking laboratory work in patients we keep on anti-inflammatory medications for long durations.

It is apparent that COX-2 inhibitors are not the panacea that was marketed to us. They however do provide a choice in cases where there is truly no drug alternative – patients unable to tolerate the gastrointestinal side effects of NSAIDs, those on coumadin and in the perioperative period. I applaud the FDA for using common sense on this issue and leaving these drugs in the armamentarium of physicians. It is now time for physicians to likewise use similar common sense and judgment in their prescribing patterns.

COX-2 inhibitors were marketed to both physicians and the public. We have also been barraged by marketing on minimally invasive techniques for joint

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Legislative Update

Status of Bills Impacting Medicine

The 2005 Legislative Session is well underway and it will be a long session especially for medicine as the battle continues in the liability reform arena. The Connecticut Orthopedic Society and its members are working diligently this legislative session to protect physician members and to augment the political activities of other specialty societies and the Connecticut State Medical Society.

Liability reform will be a major focus once again this session. There are numerous bills currently being considered that focus on various aspects of liability reform and a public hearing on all the bills is scheduled for **Wednesday, April 6th** at the Legislative Office Building. For more information and/or to sign up to provide testimony, please contact the CT State Medical Society at 800-635-7740.

Other major focus areas that are important to physicians and the practice of medicine include the following bills:

Expand Podiatry Scope of Practice to include the ankle (SB 544 – introduced by Senators Duff & Gunther). A public hearing was held earlier this month and thanks to your colleagues, Drs. Aronow, Cimino and Berson for taking the time to testify on behalf of all orthopedic surgeons. We anticipate legislators requesting the Society and podiatrists mediate this issue outside of the political landscape and the Society will work to ensure that patient safety is held to the highest standard.

Establishing Standards in Contracting for Physicians which would prohibit insurer's from unilaterally changing a contract and require full fee schedules to physicians considering the contract (SB 929 – introduced by Sen. Crisco). This bill continues to work through the Committee with many legislators favoring relief for physicians.

Patient Access to Physical Therapy to revise the definition of physical therapy to permit physical therapists to treat patients without a referral for up to 30 days and would establish minimum continuing education requirements for therapists (HB 6767-referred to Public Health Committee). The Society will be fighting this bill and provide testimony once a public hearing is scheduled.

Cooperative Healthcare Arrangements to allow physicians to jointly negotiate with insurers (HB 6759 – referred to Committee on Labor & Public Employees)

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President's Corner

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replacements and just around the corner – total disk replacements. One currently is FDA approved, with more to come. All of these pharmaceutical and device implant companies are designed to improve the quality of our patients' lives but they also produce profits for their publicly traded companies and that we should never forget. DePuy Spine paid \$325 million for the Charite Disk, Stryker paid \$360 million for the Flexicore Disk, Synthes paid \$350 million for the ProDisc and Medtronic paid \$270 million for the Bryan Disk. The average lifespan for a spinal implant is 3 years. I'm sure that these companies expect a good return on their investment, which means that many cases will have to be done for a return on their investment. The mentality of these companies is no different from the automotive industry – products must constantly be changed and innovations added to maintain market share.

However, we must still applaud these companies for spending large sums on research to bring us new products. We should and must keep our offices open to the company sales representatives – we have a symbiotic relationship, but remember "Buyer Beware." The relationships would work better if there wasn't direct to consumer advertising of pharmaceuticals and device products. As physicians we are getting hit by both sides (patients and manufacturers) to adopt new products and prescribe new drugs.

Part of the Hippocratic Oath stresses that the physician should do no harm. I have always found that by asking one simple question I can sleep comfortably at night. Would I recommend to a favorite family member to take a drug or have a particular surgical procedure performed?

These are difficult times for the practice of medicine. It gets somewhat easier when we remember the scientific basis of our profession. Mark your calendar to attend our Annual Meeting, April 29, 2005 at the Farmington Marriott for a collegial time with scientific enrichment. I hope to see you there.

Doctors of Interest

EDITOR'S NOTE: The Society appreciates the assistance of Dr. Ron Ripps, Immediate Past-President, as the contributing editor for this column.

Dx: Stress

Rx: Become a Mentor

Special thanks to contributing writer, Steven Schutzer, M.D., Orthopedic Associates of Hartford, Hartford, CT, for sharing his special interest.

OK...who is feeling a little stressed out with the increasing day to day pressures of our busy practices, hectic family schedules and mega baud pace and expectations of our high tech society? Count me in. Finding and maintaining optimal balance has become quite a challenge these days but is, perhaps, more important now than ever before. Fortunately, I've discovered several outlets that have helped me, enormously, to remain "centered". We all have some.

My martial art training has, for many years, provided a roadmap for self-discovery and personal growth. A ride on my Harley Davidson Road King down some windy country road can surely do it for me. Yet, for some reason I felt compelled to inquire about becoming a mentor with the Nutmeg Big Brother/Big Sister program. My interest in becoming involved was based on a variety of personal factors (but certainly NOT to fill a void in my time or daily schedule). After a comprehensive screening and training process, I was finally "matched" with a "Little Brother" just over 3 years ago. Colleagues,...it has paid off in so many ways that I couldn't possibly have anticipated!

Volunteering to become a "Big Brother" was at first a bit nerve wracking. Did I really need the added responsibility? Did I have the time? Did I have the fortitude to make it work and not let my "Little Brother" down? Could I deal with his family? Am I supposed to be his father, brother, or just a friend? How could I get out of it if it proved to be a disaster? Why should I think that I have anything to offer some less fortunate kid? These were just a few of my many concerns.

Truth be told, the first few months were not always easy. It was reassuring to know, however, that a Nutmeg Big Brother/Big Sister match advocate was always available for counsel and advice. As with any new relationship, it also took time, patience, perseverance, and a healthy dose of experiential/parental child psychology. As surgeons, we're accustomed to and expect immediate results. This very special bonding process, however, takes time. I soon found that in sharp contrast to my worrying about making the relationship WORK, I

couldn't wait till our next outing. I was actually having a blast! Going places and doing things that my wife would certainly never do, and which my teenage boys wouldn't do with me anymore proved to be incredible FUN. My "LB" and I enjoy going to the movies... although none have been Oscar winners, I think I laughed harder watching "Johnson's Family Vacation" than any other film in many, many years. We have a natural "Big/Little" rivalry that has led to some fierce competition at the bowling alley, on the basketball court, at the batting cage, at laser tag, and on the go-cart track. Last year, he finally caught a few more bass than I did.

Teaching the value and importance of hard work, success and achievement has been one of my goals. Consequently, we spend some afternoons working on school projects or reports, reviewing books that we've both read or discussing local, national or international current events. I've been somewhat surprised to find that my "LB" actually soaks up the life lessons that I've tried to impart to him, even across our cultural barriers. Most importantly, it has become quite clear to me that this isn't work at all, but a rather remarkable way to improve and positively influence a young person's life...and have a lot of fun doing it. From a self-serving perspective, I *receive* more than I give, and I often wonder who's helping who? As our friendship has grown, my "LB" has become part of our family and me a part of his. Having shared many interesting, personal experiences, we've both grown tremendously from this friendship.

Hey, you got stress? Want to see it evaporate every week ? Rx: become a mentor now! For information on the Big Brother/Big Sister program, contact Ms. Laura Green, Executive Director, at Lgreen@bbbsnutmeg.org.

Do You Have A Story?

The Connecticut Orthopedic Society would like to hear from any member who has an interesting hobby, pastime or anything of human interest to your fellow colleagues. If you would like to share your story, please email your 500 words (or less) article to the BACKBONE Editor, Ron Ripps, M.D. at ronripps@att.net. If your story is selected for the next issue, you will be notified. All submissions should be in Microsoft Word format and sent to Dr. Ripps prior to June 15th for the SUMMER issue of BACKBONE. We look forward to hearing from many of our members.

Save The Date Connecticut Orthopedic Society Annual Meeting

Friday, April 29, 2005

Registration 7:45 a.m. Program 8:00 a.m. - 3:00 p.m.
Farmington Marriott Hotel, 15 Farm Springs Road, Farmington, Connecticut

The Connecticut Orthopedic Society, under the direction of Michael Kaplan, M.D., Program Director, has assembled an impressive educational program for its 2005 Annual Meeting. Join your colleagues at this centrally located meeting and learn from the best speakers and educators in their respective fields. You won't want to miss this event which will provide you with important clinical information, updates and an opportunity to earn 4 hours of AMA Category 1 CME Credits.

The Society gratefully acknowledges the generous support of the following companies.

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All Society members (who have paid 2005 membership dues), medical interns and residents are invited to attend this event free of charge. Emeritus Members can attend at the reduced fee of \$40.00. Physician assistants, physical and occupational therapists will be charged \$100.00 for the meeting and luncheon. (*See page 5 for Registration Details.*)

Schedule of Events

Maximizing Motion After Total Knee Replacement
Richard Laskin, M.D.

Meniscal Tissue Transplant
Wayne Gersoff, M.D.

Facilitating Workers' Compensation Claims
Rajiv Pandya, M.D.

Presentation of Orthopedist of the Year Award
Presented to Joseph Zeppieri, M.D.

Treatment of Unicdylar Osteoarthritis
John Repicci, M.D.

OrthopedicTrauma
Mark Vrahas, M.D.

AAOS Update
Karen Hackett, AAOS

Asset Wealth Protection
Joshua Teplitzky, CPA

*This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the American Academy of Orthopaedic Surgeons and the Connecticut Orthopedic Society. The American Academy of Orthopaedic Surgeons is accredited by the ACCME to provide continuing medical education for physicians. The American Academy of Orthopaedic Surgeons designates this educational activity for a maximum of 4 category 1 credits toward the AMA Physician's Recognition Award. Each physician should claim only those credits that he/she actually spent in the activity.

Doctors' Day 2005

The Society is urging all of its members to take part in the Connecticut State Medical Society sponsored "Doctors' Day at the Capitol." This event provides an opportunity for physicians from throughout the state to meet and talk with legislators deciding on key legislative issues impacting physicians and their patients.

Wednesday, April 13, 2005

10:00 a.m.

State Capitol, Old Judiciary Room 3rd Floor

11:00 a.m. - 1:00 p.m.

Legislative Office Building

Contact your County Medical Association to register for Doctors' Day at the Capitol or call the CT State Medical Society at 800-635-7740. Don't forget to wear your white coats!

Fairfield	(203) 372-4543
New Haven	(203) 699-2405
Hartford	(203) 699-2405
Litchfield	(860) 482-3310
Tolland	(860) 243-3977
New London	(860) 447-9408
Middlesex	(860) 243-3977
Windham	(800) 223-9262



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Coding Workshop

On March 10th, over 100 physicians and their office staff took part in a coding workshop at St. Francis Hospital and Medical Center. Thanks to the Society's underwriting of the program, Society members and their staff were able to learn important coding updates and reimbursement tips for orthopedic practices at a fraction of the normal program cost.

This workshop covered updates and changes in coding for 2005 and featured speaker, Ms. Mary LeGrand from Karen Zupko & Associates. She presented practical tips and useful hints for the attendees. This is the Society's 4th year hosting this successful workshop.



(left to right) Michael Connair, M.D., sponsor Art Gelber, HealthCare IQ, Mary LeGrand, Karen Zupko & Associates, Society President, Michael Marks, M.D., MBA, and Frank Gerratana, M.D., AAOS Councilor, discuss coding issues at the workshop.

The Society would like to extend special thanks to

- *Robert Green, M.D., President-elect and Ms. Carol Hornish for organizing the event;*
- *St. Francis Hospital & Medical Center for hosting the event and;*
- *Sanofi-Aventis, Healthcare IQ and Med-Aid for their financial support.*

Legislative Update

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The Society is pleased to provide members, through our lobbying firm, Halloran & Sage, a user-friendly bill tracking report that even provides quick email access to your legislators. To access the current report, log onto www.ctbilltracking.com/HS/ and when prompted for username enter hs-ortho and password ortho6871. The reports are updated every Friday.

We need all our members to get involved. If you are interested in testifying (either written testimony or public) at public hearings or contacting and visiting key legislative members, please contact Susan Schaffman, sasshops@aol.com, 860-561-5205. It is important that the legislators hear our concerns.



Annual Meeting Registration Form

Yes, please register me (us) for the Annual Meeting on April 29, 2005, at the Farmington Marriott Hotel from 8:00 a.m. - 3:00 p.m.

Name _____

Name _____

Practice _____

Address _____

City _____ Zip _____

Telephone _____ Fax _____

E-mail _____

Registration Status (check one)

Connecticut Orthopedic Society Member
(2005 Dues Paid - NO FEE)

Connecticut Orthopedic Society Emeritus
Member (\$40.00 FEE)

Medical Student, Resident or Intern (NO FEE)

Physician Assistant, Physical or Occupational
Therapist (\$100.00 per registrant)

Return form and payment (if applicable) to:

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