NAMCS Special Supplements: Asthma and CAM

2012 National Conference on Health Statistics
Monitoring Health Care Reform through Provider-Based Surveys: New Initiatives from the NAMCS & NHAMCS

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NAMCS 2012 Supplements

• Asthma

• Complementary and Alternative Medicine
Introduction to Asthma

• Chronic respiratory disease

• Symptoms caused by inflammation and narrowing of small airways

• Strategies to control and prevent symptoms exist but are under-utilized
Asthma Prevalence – United States, 2010

Source: CDC/NCHS, National Health Interview Survey.
Asthma Healthcare Utilization – United States, 2009

Source: CDC/NCHS, National Hospital Ambulatory Medical Care Survey.
Source: CDC/NCHS, National Hospital Discharge Survey.
Asthma School and Work Absences – United States, 2009

Source: CDC/NCHS, National Health Interview Survey.

- Work Absences: 14.2 million
- School Absences: 10.5 million
Management of Asthma

- National Asthma Education and Prevention Program (NAEPP) commissioned an Expert Panel to develop clinical practice guidelines
  - EPR-3 Full Report 2007: Guidelines for the Diagnosis and Management of Asthma

- Recommendations organized around 4 key components of asthma management
  - Assessment and monitoring
  - Patient education
  - Control of environmental factors
  - Pharmacologic treatment
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• Objectives
  – Assess physician use and acceptance of the NAEPP Guidelines for the Diagnosis and Management of Asthma
  – Understand barriers to implementation of Guidelines
  – Inform strategies to increase effective implementation of the Guidelines
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• Partners
  – Centers for Disease Control and Prevention
  – National Institutes of Health
  – Environmental Protection Agency
  – American Academy of Allergy, Asthma and Immunology
  – Merck Childhood Asthma Network

• Respondents
  – Physicians who manage and treat asthma
  – Increased sample of pulmonologists and allergists
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• Questions evaluate physicians’ acceptance and use of recommended strategies

• Acceptance of strategies
  – Assessment of effectiveness

• Use of strategies
  – Confidence in their ability to use strategy
  – Percent of visits where strategy is performed
  – Reasons for not using strategy
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• Content
  – Patient population
  – Practice workflow
  – Assessment and monitoring
    • Use of spirometry
    • Assessment of control
  – Patient education
    • Observation of inhaler technique
    • Use of written Asthma Action Plans
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• Content
  – Control of environmental factors
    • Assessment of home triggers
    • Recommendation to avoid secondhand smoke
  – Pharmacologic treatment
    • Use of inhaled corticosteroids

• Related additions to Patient Record Form
  – Asthma severity and control assessment
  – Asthma Action Plan provided
Health Care Reform and the NAMCS Asthma Supplement

- Asthma supplement data will help inform strategies to increase use of the Guidelines and improve patient outcomes
- Consistent with aim of health care reform provisions to improve the quality of health care
Introduction to Complementary and Alternative Medicine

- CAM encompasses a group of diverse medical and health care systems, practices, and products not generally considered part of conventional medicine

- Complementary medicine refers to use of CAM together with conventional medicine

- Alternative medicine refers to use of CAM in place of conventional medicine
Introduction to Complementary and Alternative Medicine

• CAM Use - 2007
  – 38% of U.S. adults
  – 12% of U.S. children

• CAM Cost and Spending, US Adults - 2007
  – $33.9 billion out-of-pocket on visits to CAM practitioners and purchases of CAM products, classes, and materials

Source: CDC/NCHS, National Health Interview Survey.
Introduction to Complementary and Alternative Medicine

- CAM checkbox was added to NAMCS Patient Record Form in 2005

- In 2009, CAM was ordered or provided at 5.38 million visits to office-based physicians
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- Objectives
  - Determine extent to which conventional providers integrate CAM into their patient treatment plans
  - Assess physician reasons for recommending or not recommending CAM therapies to patients
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• Sponsor
  – National Institute of Health’s National Center for Complementary and Alternative Medicine

• Respondents
  – Full NAMCS sample
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• Content
  – Recommendation of specific CAM therapies to patients
  – Discussion of specific CAM therapies with patients
  – Symptoms for which CAM is recommended
  – Factors influencing decision to recommend CAM
  – Factors preventing recommendation of CAM
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- Herbs and other non-vitamin supplements
- Mind-body therapies
- Chiropractic or osteopathic manipulation
- Acupuncture
- Naturopathic therapy
- Massage therapy
- Homeopathic treatment
- Biofeedback or hypnosis
- Yoga
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• Uses
  – Office-based providers who recommend CAM therapies
  – Specific CAM therapies most frequently recommended and/or discussed with patients
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