

# Mesa Redonda

## La Salud de los Niños: Personal Perspectivas de Pediatra de un País Capitalista y Desarrollado

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November 18, 8:30-10:00

Lucile Packard  
Children's Hospital  
AT STANFORD



**STANFORD**  
SCHOOL OF MEDICINE  
*Stanford University Medical Center*

# Principales Características de la Atención de Salud de EE.UU

- Seguro médico comenzó en la década de 1930
- Al principio, todo seguro vino del empleador
- en la década de 1960 comenzó a los sistemas públicos (Medicare, Medicaid)
- Hay muy pocos servicios públicos, ni los hospitales ni las clínicas; excepciones hospital para los veteranos, el ex militar
- Seguro médico del empleador comenzó a costar más y la cubierta inferior, entonces el número de personas sin seguro aumentó
- Seguro médico público basado tiene buenos beneficios, pero el reembolso pobres a los médicos y hospitales hay muy pocos servicios públicos, no los hospitales y las clínicas no

# Resumen de Salud Medica de EE UU: Enfoque sur los Ninos

## Características Positivas



- Advanced science and technology applied to care of illnesses
- Outstanding outcomes for complex problems, such as survival of extremely preterm infants
- Generous research funding
- Providers becoming increasingly responsive to consumer demands
- Highly valued by those patients with ready access

## Características Negativas



- *Las desigualdades por motivos de raza, origen étnico, y los ingresos*
- Reliance on high cost procedures rather than low cost options
- Limited focus on prevention and public health, especially child health
- Reliance on private health insurance with complicated rules
- Very expensive

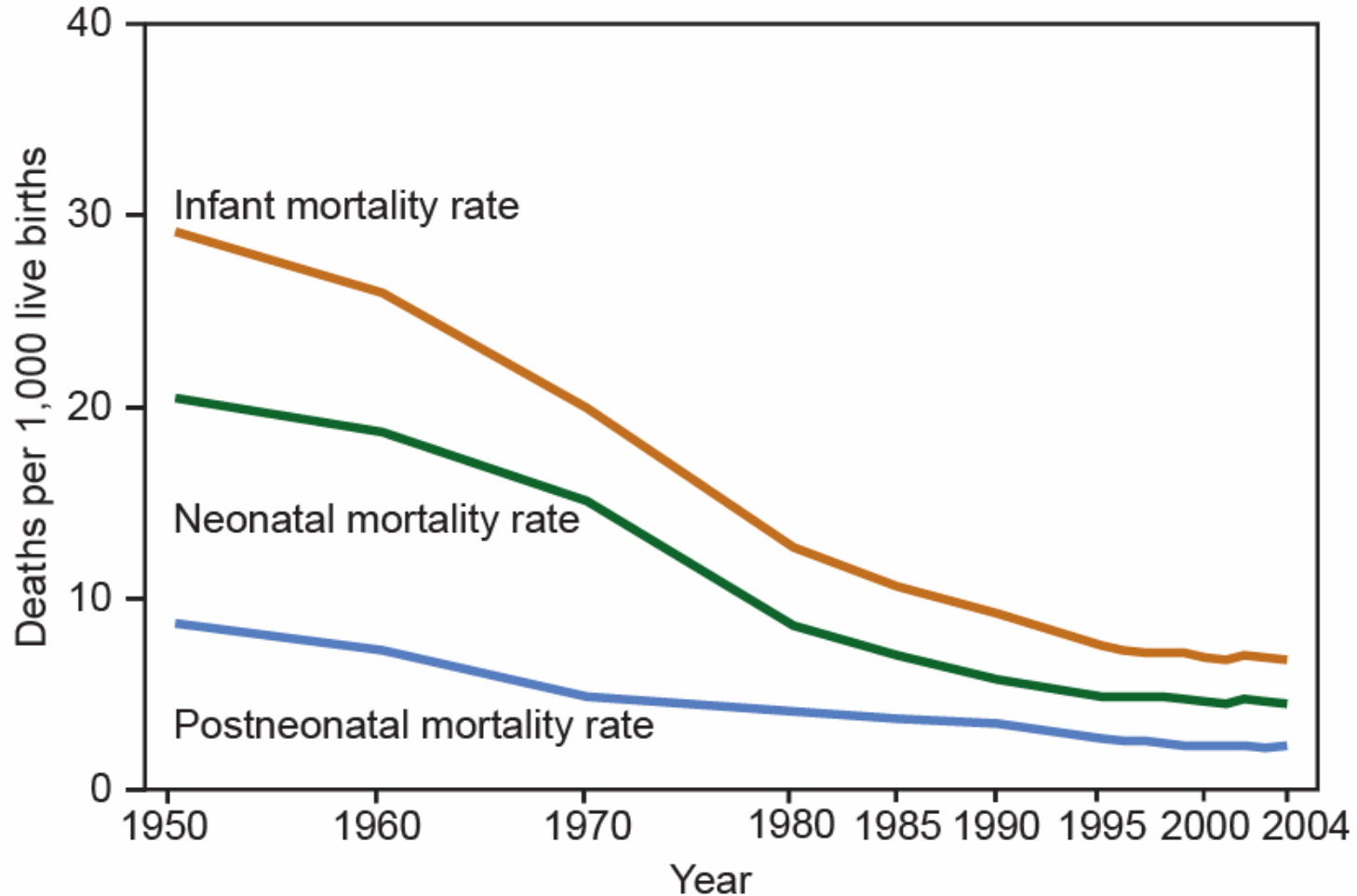


# 1. La Ciencia y la Tecnología Avanzada

- *EE.UU. es líder mundial en la creación de nuevos tratamientos diagnósticos y terapéuticos*
  - High use of MRI scans (3X 1996-2006)
  - Transplantation used not only kidney and liver, but also heart, lungs, multiple organs
  - Surgical correction for complex congenital anomalies, such as heart disease; many staged procedures done in one operation
  - Assistive Reproductive Technology (*Auxiliares de Tecnología Reproductiva: ART*)

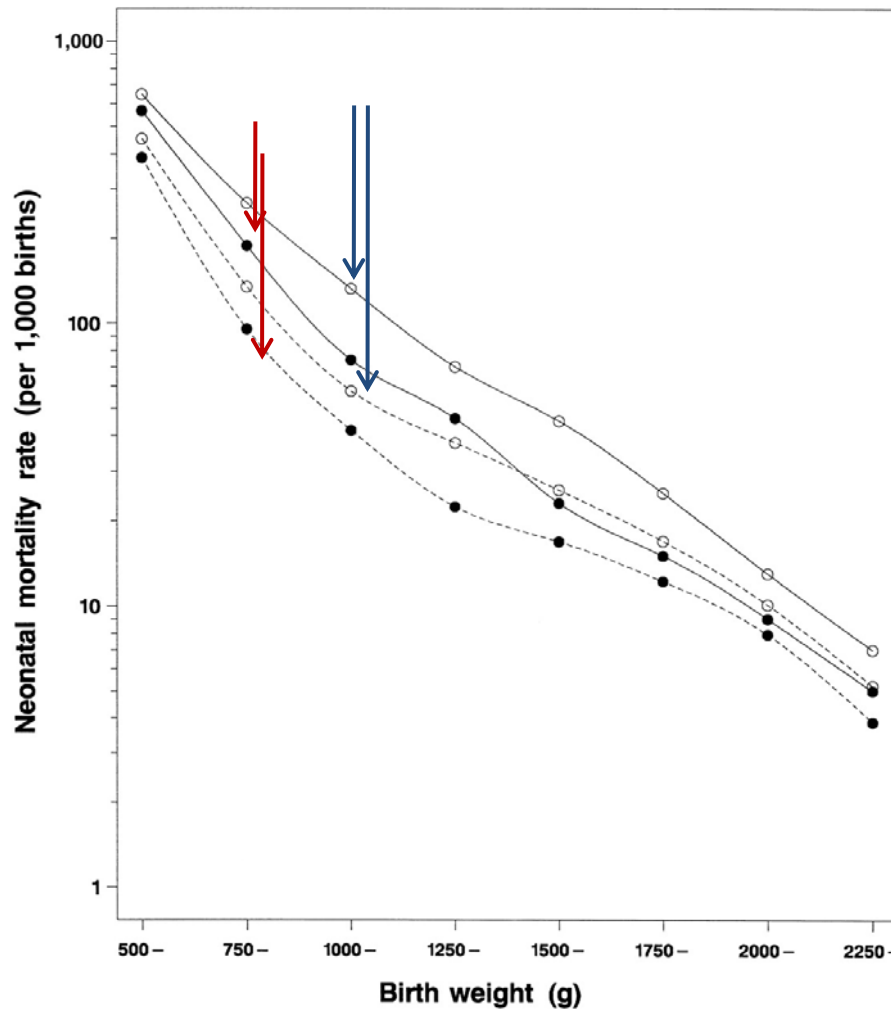


## 2. Resultados Exceptionales



SOURCES: Centers for Disease Control and Prevention, National Center for Health Statistics, *Health, United States, 2007*, Figure 19. Data from the National Vital Statistics System.

# Mejor tratamiento des los bebés prematuros



Solid lines 1989  
Dashed lines 1997



# 3. Financiación de la Investigación

- Main research funding in US comes from National Institutes of Health (NIH)
  - NIH annual budget \$31.2 billion
  - 50,000 competitive grants
  - 325,000 researchers
  - 3,000 universities
  - 10% of budget goes to 6,000 NIH scientists in the intramural program
- Many other federal and non-federal sources of research support
- Focus on innovation in research



# 4. Responder a los consumidores

**AAP Policy**

American Academy of Pediatrics  
DEDICATED TO THE HEALTH OF ALL CHILDREN™



**AMERICAN ACADEMY OF PEDIATRICS  
Committee on Hospital Care**

**INSTITUTE FOR FAMILY-CENTERED CARE**

**POLICY STATEMENT**

Organizational Principles to Guide and Define the Child Health Care System and/or Improve the Health of All Children

**Family-Centered Care and the Pediatrician's Role**

PEDIATRICS Vol. 112 No. 3 September 2003



# Resultados Favorables de Cuidado de la Familia

The Stockholm Neonatal Family Centered Care Study: Effects on Length of Stay and Infant Morbidity

Annica Örtenstrand, RN, PhD, Björn Westrup, MD, PhD, Eva Berggren Broström, MD, et.al

*Pediatrics 2010;125:e278-e285; originally published online Jan 25, 2010*

Data from this study indicate that parents staying in the NICU from admission to discharge may reduce the total length of stay for infants born prematurely. An individual-room NICU design could have a direct effect on infant stability and morbidity.

## 5. Satisfacción

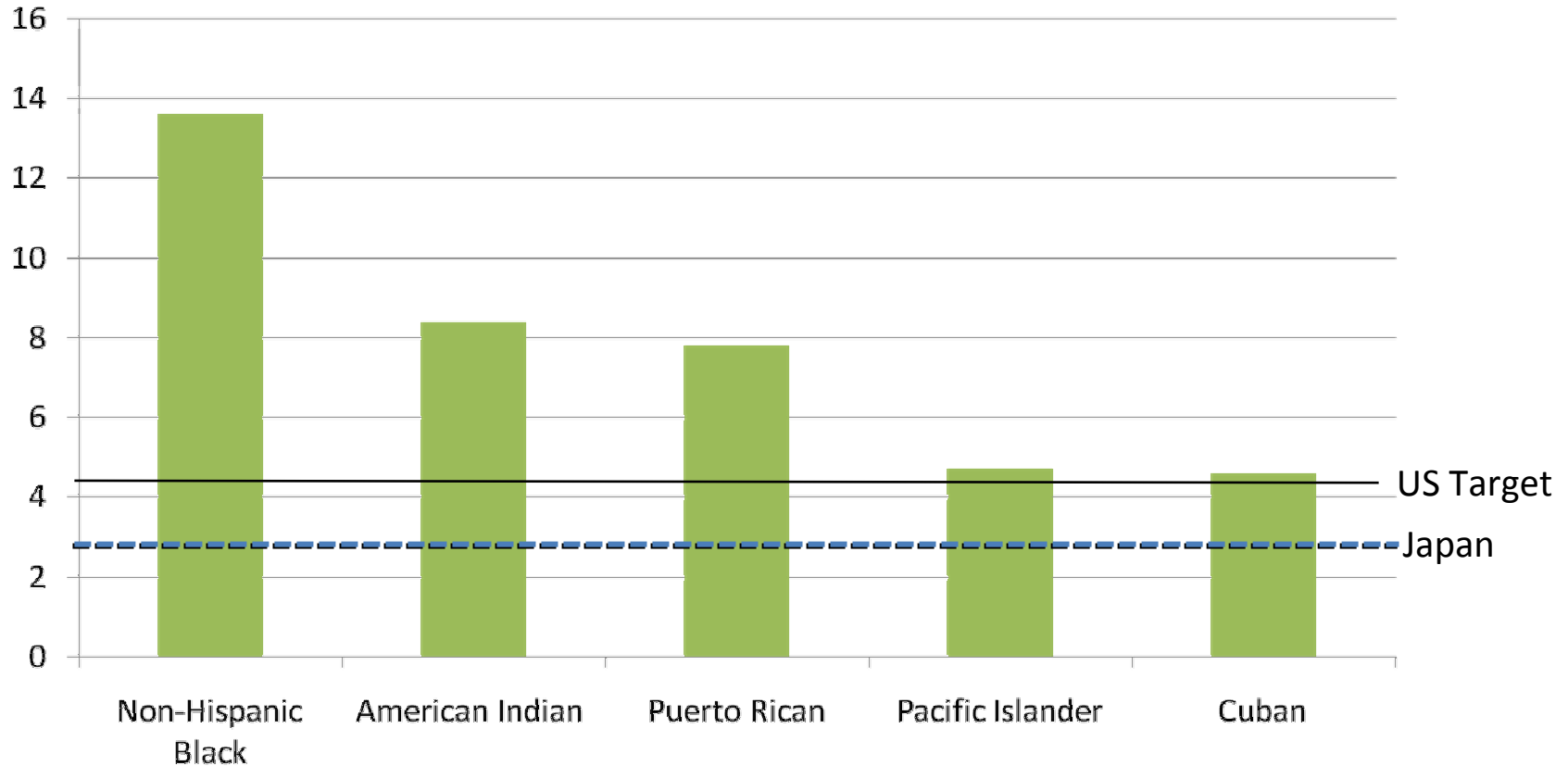
- Majority 67% of parents whose children have regular source of care report that physician did excellent job and listened well
- Physicians meet expectations of white, non-poor, insured families
- However, national survey found that 36% of parents had not discussed one of 6 topics of strong interest to them and recommended for inclusion in WCC
- Nearly all parents had  $\geq 1$  unmet need for guidance, education or screening



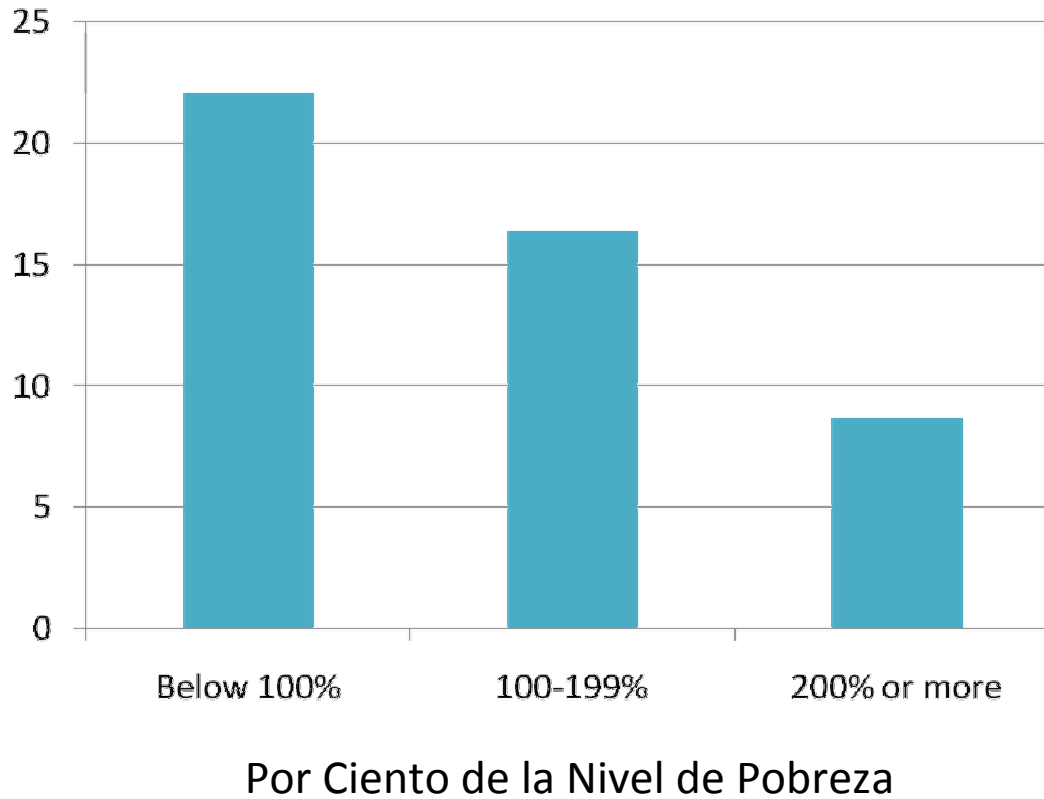
# 1. Las desigualdades

- Unequal health care including access and outcomes
- Substantial disparities exist by race, ethnicity, and income
  - Access to healthcare is an important prerequisite to obtaining quality care
  - Significant disparities in the use of evidence-based preventive services
  - Targeted improvement efforts have been shown to significantly reduce healthcare disparities, suggesting that comprehensive efforts not yet in place

# Mortalidad de Ninos 2004



# Limitaciones de las Enfermedades Crónicas 1997-2006





## 2. Alto Costo de la Atención Médica

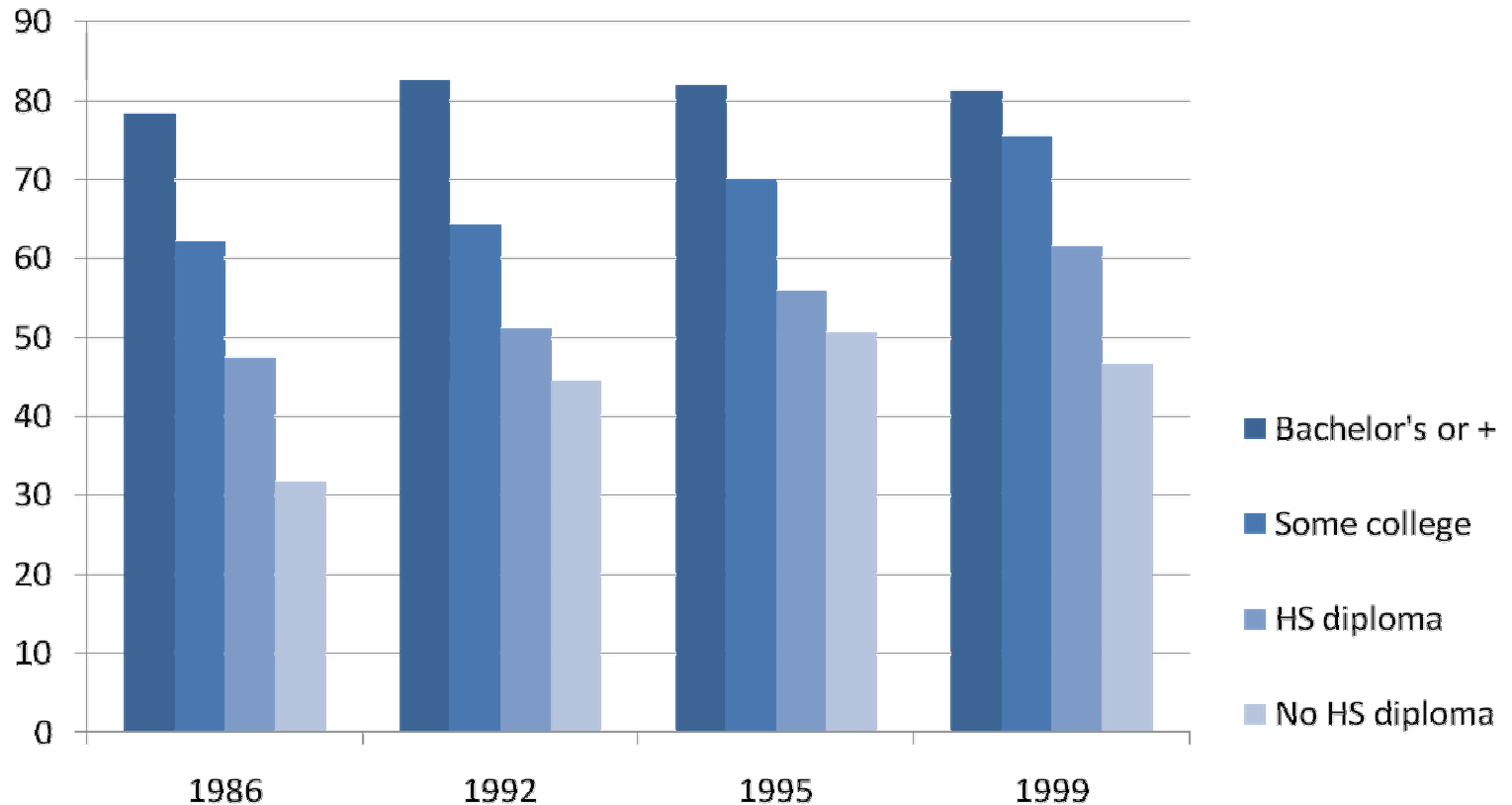
- Example
  - Bariatric surgery costs \$18,000-\$35,000
  - Now being used for adolescents
  - Generally the surgery is covered by insurance
  - Primary care physicians receive minimal reimbursement for obesity counseling
- Example
  - Limit to durable medical equipment, such as a wheel chair, that sustains function for children with cerebral palsy; no consideration of child's growth



## 3. Atención Preventiva es Baja

- US health care retains **acute care** orientation
- No life span perspective
  - Minimal attention to public health of children
  - Short-sighted with increasing evidence of early roots of conditions such as cardiovascular disease
- Employer-provided health insurance plan must be renewed annually
  - No incentive for payers to prevent complications because consumers may move on
  - Prevention until recently not covered by insurance

# La Lactancia Materna 15-44 years



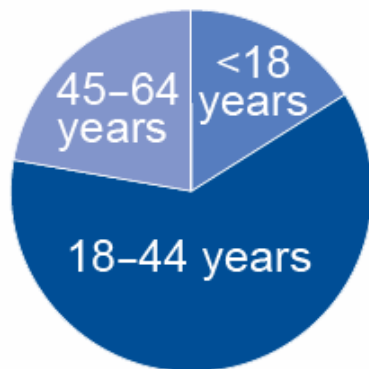


## 4. Seguro Privado de Salud Médica

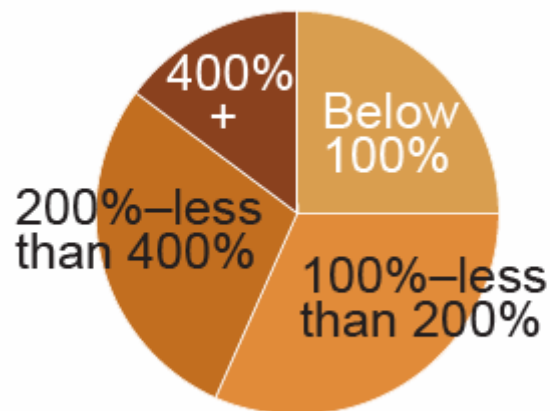
- According to IOM, United States is "only wealthy, industrialized nation that does not ensure that all citizens have coverage" (i.e. some kind of insurance)
- Lack of health insurance responsible for 18,000 to 44,800 unnecessary deaths per year
- Health insurance provided primarily in the private sector through employers
- Limits access of adult immigrants, foreigners, students, young adults, and self-employed; also limits families
- Multiple policies to get health insurance to children whose families are above the poverty line

# Sin Seguro Menos de 65 Anos

Age

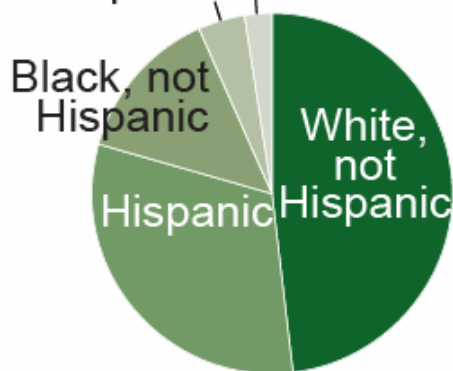


Percent of poverty level

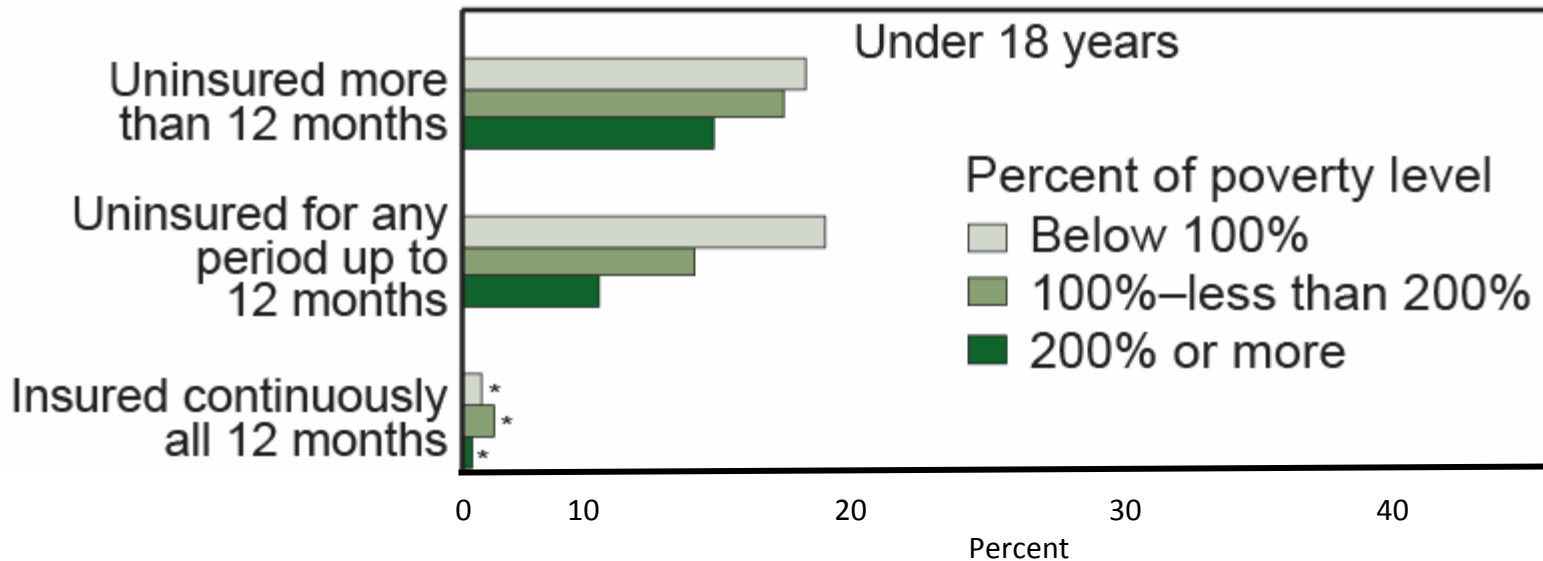


Race and Hispanic origin

Asian, not Hispanic    Other, not Hispanic



# Ninos sin Seguros, 2005



\*Estimates are considered unreliable.

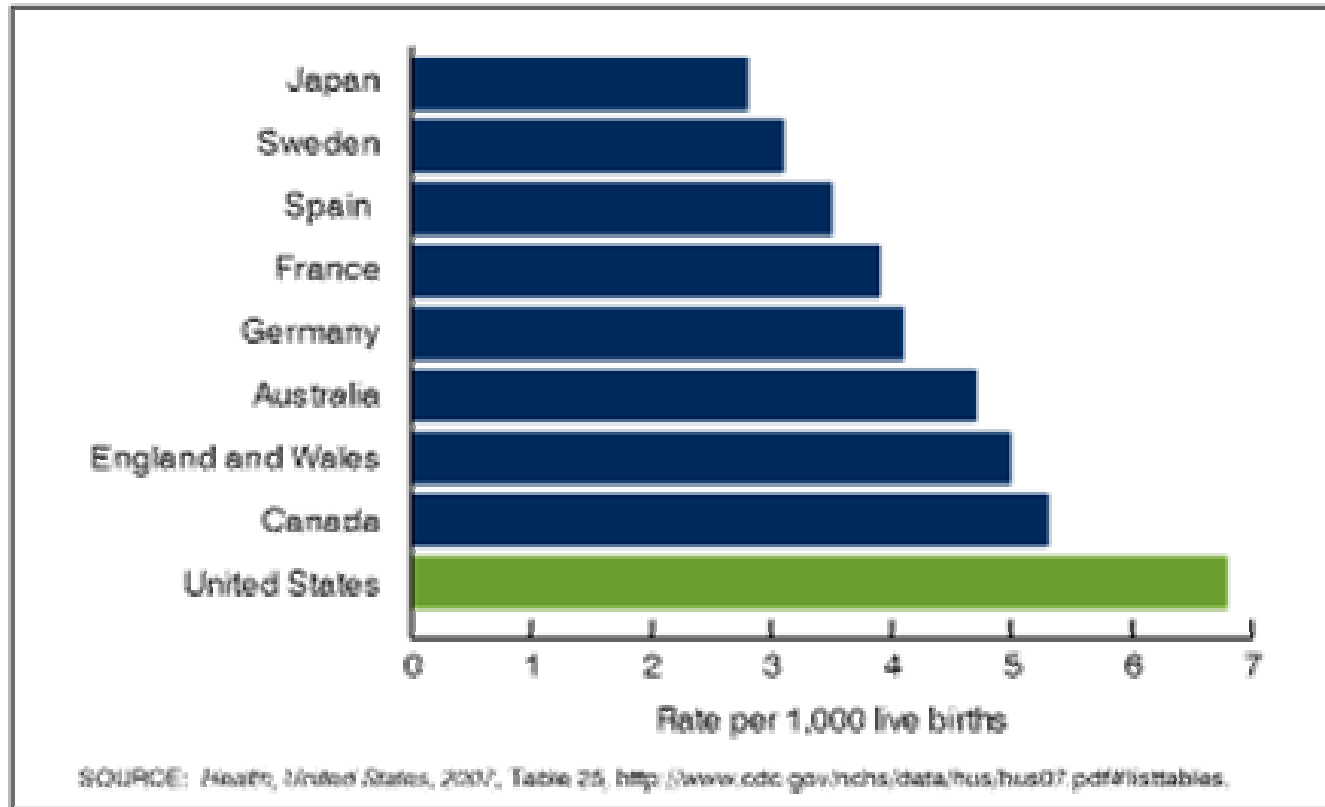
*Chartbook on Trends in the Health of Americans Health, United States, 2007*



## 5. Atencion Medica es cara

- Total US expenditure on health care \$2.3 trillion or 16% national economy
  - British spend 8.7% GDP
  - Average \$6700/person
- Private health insurance paid only 35% total personal health expenditures
- Mental health accounted for 7.5% expenditures and is poorly reimbursed
- 62% of personal bankruptcies due to health costs
- Health outcomes are not commensurate with expenses

# Moralidad Infantil 2004



**US ranked 29<sup>th</sup> in the world, tied with Poland and Slovakia**

MacDorman MF, Mathews TJ. Recent Trends in Infant Mortality in the United States. NCHS data brief, no 9. Hyattsville, MD: National Center for Health Statistics. 2008.

# Resumen: Mi Opinión

- *La sistema de atención de salud de EE.UU. brinda atención excepcional, pero excesiva, en blancos, que no son pobres, y los niños asegurados y sus familias*
- *Atención de salud de EE.UU. no sirve a los pobres, las minorías insuficientemente representadas*
- *Población de los EE.UU. no consigue resultados sustancialmente mejores para el dinero que gastan en atención de la salud*
- *Las reformas son muy necesarias*

Thank you.

# Funding to National Institutes

Fiscal Year	NICHD Child Health & Development	NIDCD Deafness & Communication	NIMH Mental Health
2001	975,766	300,418	1,106,305
2002	1,111,674	341,675	1,246,640
2003	1,205,927	370,382	1,341,014
2004	1,242,361	382,053	1,381,774
2005	1,270,321	394,260	1,411,933
2006	1,264,769	383,458	1,403,515
2007	1,254,707	393,668	1,404,494
2008	1,261,381	396,234	1,412,951
2009	1,294,519	407,125	1,451,053
2010	1,329,027	418,657	1,489,792



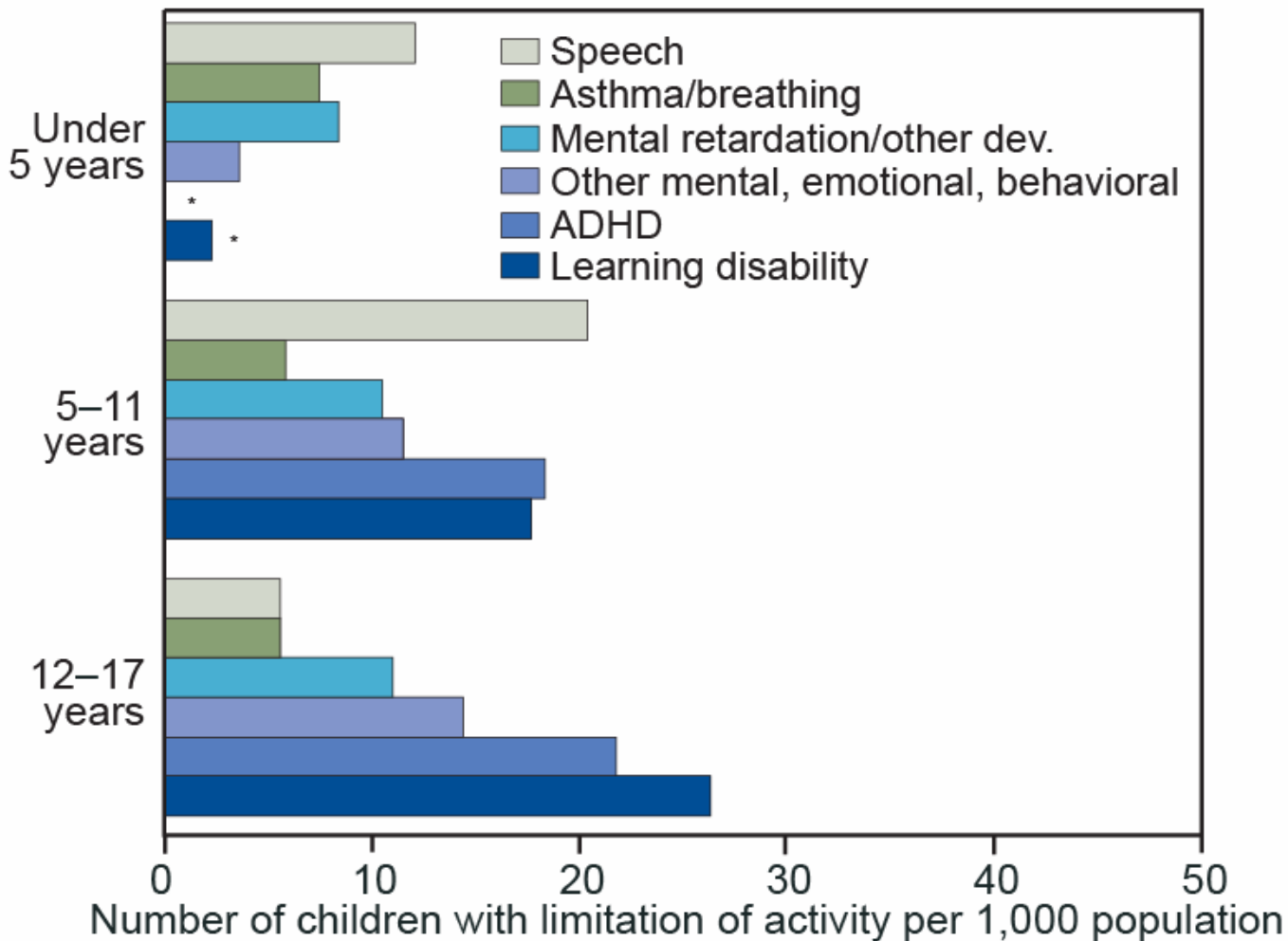
# Principles of Family-Centered Care

1. Respecting each child and his/her family
2. Honoring racial, ethnic, cultural, and socioeconomic diversity and its effect on the family's experience and perception of care
3. Recognizing and building on the strengths of each child and family, even in difficult and challenging situations
4. Supporting and facilitating choice for the child and family about approaches to care and support
5. Ensuring flexibility in organizational policies, procedures, and provider practices so services can be tailored to the needs, beliefs, and cultural values of each child and family
6. Sharing honest and unbiased information with families on an ongoing basis and in ways they find useful and affirming
7. Providing and/or ensuring formal and informal support (eg, family-to-family support) for the child and parent(s) and/or guardian(s) during pregnancy, childbirth, infancy, childhood, adolescence

# Resources

- Institute for Patient- and Family-Centered Care  
<http://www.ipfcc.org/index.html>
- Family Voices  
[http://www.familyvoices.org/pub/projects/fcca\\_FamilyTool.pdf](http://www.familyvoices.org/pub/projects/fcca_FamilyTool.pdf)  
<http://www.familyvoices.org/pub/general/FCCare.pdf>
- Lucile Packard Children's Hospital  
<http://www.lpch.org/pdf/fcc/providers/forums/forum-newsletter.pdf>

## Activity limitation among children due to chronic conditions, 2004–05

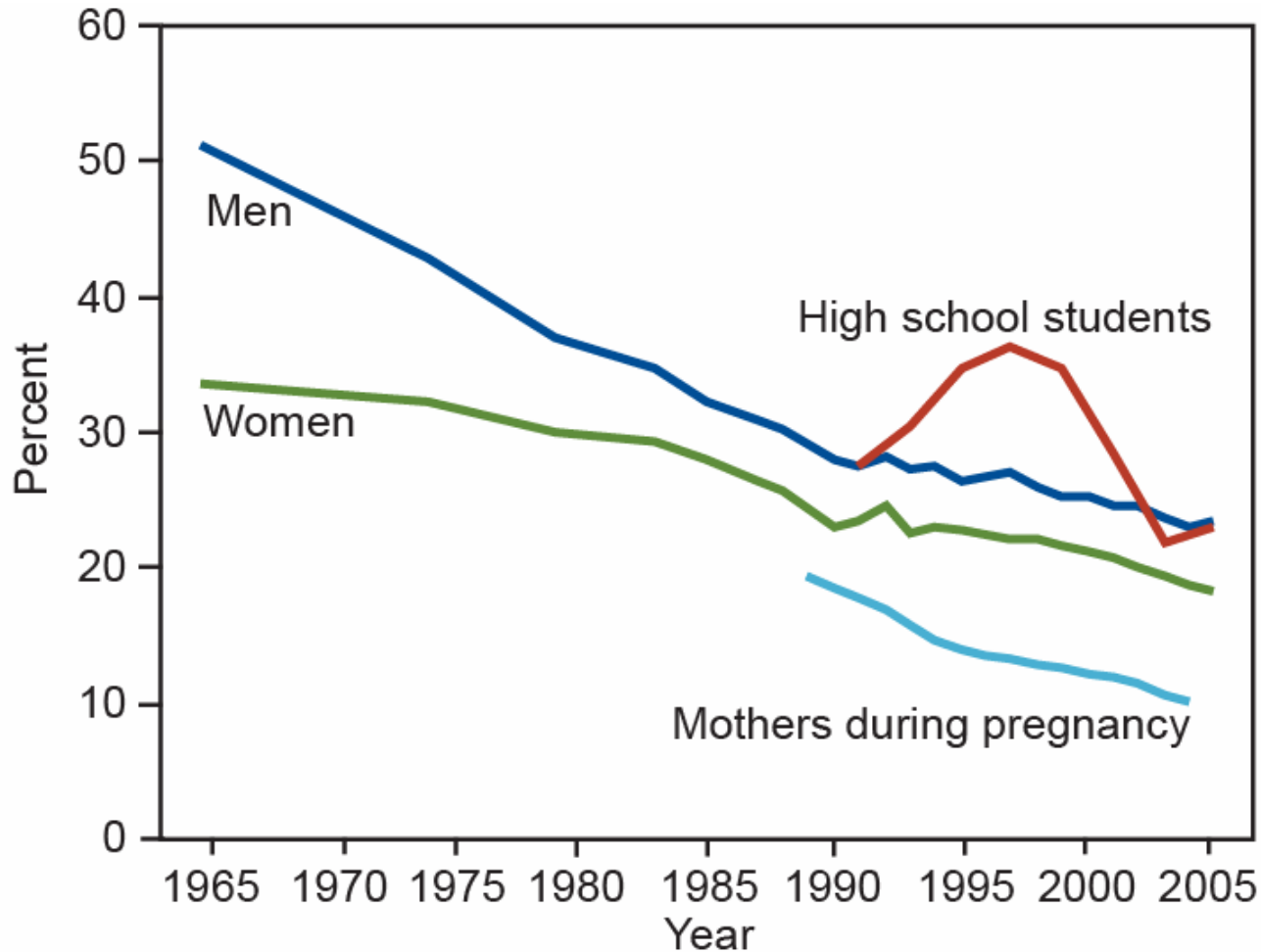


\*RSE 20%-30%. Data not shown, RSE>30%.

SOURCES: Centers for Disease Control and Prevention, National Center for Health Statistics, *Health, United States, 2006*, Figure 14.

Data from the National Health Interview Survey.

# Las Tasas de Tabaquismo



SOURCES: Centers for Disease Control and Prevention, National Center for Health Statistics, *Health, United States, 2007*, Figure 9. Data from the National Health Interview Survey, Youth Risk Behavior Survey, National Vital Statistics System.

# Las Investigaciones de Nuevas Ideas



National Institute of Mental Health  
Transforming the understanding and treatment of mental illness through research

## Director's Posts about Research Funding

October 19, 2010

### [Investing in Innovation](#)

Posted by [Thomas Insel](#)

A recent symposium recognizing new and past recipients of NIH's **Pioneer Awards** provided great examples of the pay-off from NIH's investment in innovative science. The Pioneer Awards are but one example of the mechanisms now in place to support innovation. The **New Innovator awards**, the **Transformative R01 (TR01)** program, **EUREKA**, and the **BRAINS** awards were all designed with the aim of supporting *unconventional, high-risk, high-reward research*.