

## To Your Health!

By Judy Hargis, P.A.



### OUR HEALTH IN CRISIS: Changing the future of Health care in America.

The United States Healthcare system is in crisis. The health of our citizens is in trouble. I think it is important for all Americans to begin looking more in depth at the reality of our situation. We need to begin thinking critically about the issues, and become more knowledgeable about the facts.

This is an emotionally charged issue on all sides, but looking at health statistics in the U.S. is alarming.

We rank 38th in life expectancy, 39th in infant mortality and #1 in obesity worldwide. These are just a few of the statistics that reflect a downward trend in the health of Americans. The U.S. is falling farther behind other countries each year. Our country ranks 37th in the performance of our health care system. We lag behind many countries in providing timely and effective care. We have a vast number of preventable deaths attributed to obesity, heart disease and diabetes each year. We fall short in health maintenance and prevention. We pay the most for healthcare with some of the poorest outcomes.

We argue against government involvement in our healthcare, but often don't question the control that health insurance companies have over our choices, and our access to diagnostic tests and treatments when we are ill. In our country 45 million people do not have access to healthcare due to the lack of, or inadequate health insurance. There are many myths floating around about universal health coverage available in other countries. A good example of this is the myths surrounding Canadian health care. Listed below are a few.

**Myth #1:** Canadians are flocking to the United States to get medical care. Only 0.5 % of Canadians seek elective care in the U.S. Approximately 0.11% receive emergency care in the U.S. They are often tourists, or here for other reasons, when an emergency occurs. The remaining 99.39% do not actively seek care in the US.

**Myth #2:** Doctors in Canada are flocking to the U.S. to practice. The thought is that it is more satisfying to practice medicine in the United States. The reality is that there are varying degrees of provider satisfaction and dissatisfaction in all healthcare systems. I looked at some recent research into provider satisfaction in 10 countries; U.S. physicians came in 7th with 64% satisfaction behind Canadian physicians with 75% satisfaction.

**Myth #3:** Canada rations healthcare. That is why hip replacements and cataract surgeries happen faster in the U.S. The truth is that when people have cancer or need emergency care, it is given in a timely manner. Most people who get hip replacements in the U.S. are older Americans on Medicare, which is a single payer system, like the Canadian system.

**Myth #4:** Canada has longer waits because it is a single payer system. Wait times in Canada are not a result of a single payer system. They are a result of Canadians making a conscious choice to keep costs down. Wait times are attached

to elective procedures and surgeries, otherwise outcomes are comparable to the U.S.

**Myth #5:** Canada rations health care, the U.S. does not. The U.S. is more likely to withhold healthcare because of cost. In a recent survey, 42% of Americans did not express confidence that they would be able to afford health care, if seriously ill. The U.S. has the highest rate of people avoiding needed care because of cost.

In the U.S. we have the most costly healthcare with the poorest outcomes. We are all entitled to our opinions on health care, but we need to take the time to do our homework, and know the facts, before we make decisions that have a significant impact on each of us, and the future health of our children. Every health care system has its strengths and weaknesses. There is not a magic bullet or quick fix. Our current system is broken and needs to change. We must take a realistic approach to making change in our current system, so every American has access to affordable, high quality and equitable care.

There is one thing I believe we can all agree on, something needs to change. We have to turn the tide and begin to make good health and health care an important focus in our lives. The alternative is a continuing decline in access to healthcare, and poor health outcomes. I encourage everyone to do their homework and get the facts on health care reform. Canadian health care is one example of a single payer system. There are many examples in other countries. We currently have the Affordable Care Act, which has sparked controversy. It isn't perfect, or cast in stone. It is a start in a long process that needs to take place to deal with health care issues in our country.

I have listed some resources below to get you started; [www.who.org](http://www.who.org), [www.nih.gov](http://www.nih.gov) and [www.aarp.org](http://www.aarp.org).

## New data on cause of obesity

Obesity rates in Oregon have jumped 121 percent among adults since 1990, driven by a lack of physical activity and poor nutrition, a new Oregon Health Authority report has found.

More than 1.76 million people, or 60 percent of the adult population, were overweight or obese in 2009, according to Oregon Overweight, Obesity, Physical Activity and Nutrition Facts, developed by OHA's Public Health Division. View the report at <http://public.health.oregon.gov/PHD/ODPE/HPCDP/PAN/>.

"The story behind these numbers is that in every part of our state, Oregonians are struggling with the health issues that come from this health crisis," said Katrina Hedberg, M.D., M.P.H., state epidemiologist.

"Obesity-related illnesses kill about 1,400 Oregonians a year, making obesity the second leading cause of preventable death after smoking."

The Oregon report comes on the heels of a Duke University and Centers for Disease

Control and Prevention study published online May 7 in the American Journal of Preventive Medicine predicting that obesity rates will rise to 42 percent by 2030. The study also projects that if things stay on their current path, the prevalence of individuals with severe obesity will more than double to 11 percent in that time.

Addressing the nation's obesity problem was the focus of the CDC's "Weight of the Nation" conference held last week in Washington, D.C., and attended by policy-makers, health officials and researchers. Cable network HBO teamed with the CDC and the National Institutes of Health to produce a documentary series of the same name that began airing May 14.

According to the report, obesity-related chronic diseases cost Oregonians about \$1.6 billion in medical expenses each year, with \$339 million of that paid by Medicare and \$333 million paid by Medicaid. Obese people are estimated to have annual medical costs that are \$1,429 higher than those of non-obese people. Obesity can lead to diabetes, heart conditions, stroke and high blood pressure, taking a toll on families and the health care system.

Reducing overweight and obesity is one of the state's public health priorities. "Our goal is to become one of the

**See New on page 10**

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[bunny.girt.b71g@statefarm.com](mailto:bunny.girt.b71g@statefarm.com)

<b>Columbia County</b>	<b>Domestic Abuse</b>
<b>Mental Health</b>	<b>Hotline</b>
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<b>784-2433</b>	<b>Military Helpline</b>
or	<b>888-HLP-4-VET</b>
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