

# 11 new AMA policies patients should know

JUN 15, 2016

Staff News Writer

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At the heart of all policymaking of the AMA is the mission to promote the betterment of public health. Physicians at the 2016 AMA Annual Meeting adopted a variety of policies that will help improve consumer safety and reduce harm—they range from preventing drug overdose to delaying school start times and supporting paid sick leave.

## Medication disposal programs

An unprecedented drug overdose epidemic in the United State could be addressed in part by stronger medication return programs that treat unused medications as hazardous waste. The AMA called for support of medication return programs, funded by pharmaceutical manufacturers, and called for federal laws that encourage medication recycling and disposal.

Estimates indicate that 30-80 percent of patients do not finish prescriptions for common medications, including pain medications, and many patients discard these drugs at home. The U.S. Geological Survey sampled rivers and streams and found that up to 80 percent showed traces of drugs, hormones, steroids and personal care products.

“Many of these unused medications, most notably opioids, are diverted and used by someone other than the targeted patient,” AMA President-Elect David O. Barbe, MD, said in a news release. “Manufacturers should be stewards of their products throughout their lifecycle and provide this critical service to patients and our environment.”

## Protecting children’s eyes with air gun safety

In response to soaring rates of eye injuries among minors as a result of air guns, delegates adopted policy to better protect children and teenagers from injuries that can inflict lasting damages, despite treatment.

The new policy directs the AMA to encourage the use and provision of protective eyewear when using air guns as well as education on the proper use of protective eyewear to avoid ocular injuries.

“The increase in air gun use has not been met with increased safety awareness,” Dr. Barbe said in a news release. “Many of these injuries result in lasting changes in sight and can be avoided by wearing proper eye protection.”

## **Ending sales tax on feminine hygiene products**

The AMA adopted policy to support laws that strip taxes from the sale of feminine hygiene products. These essential products for women’s health are taxed, but delegates noted that many other far less necessary purchases—from cupcakes to circus performances—are exempt from sales taxes.

Five states no longer charge a sales tax on these products and more are considering similar legislation.

“Feminine hygiene products are essential for women’s health, and taxes on them are a regressive penalty,” Dr. Barbe said. “We applaud the states that have already eliminated sales taxes on these products, and we urge every state to follow suit.”

### **The importance of radon testing in rentals**

The AMA adopted policy that calls for renters to have similar protections as home buyers in terms testing for radon. Radon, a radioactive gas and known carcinogen, is the second leading cause of lung cancer and causes more than 20,000 deaths a year.

Only two states mandate that new renters be informed of whether a radon test has been performed and the nature of its results. The new AMA policy calls for transparency and disclosure of prior radon tests and the most recent results of tests for renters entering into a lease.

## **Dangers of detergent packets**

Recognizing that concentrated detergent packets can compromise children’s health and safety, the AMA today adopted policy calling for the redesign of detergent product packages to make them less

attractive to children to help prevent accidental exposure or ingestion.

According to a study published in the *Journal of the American Academy of Pediatrics*, between 2012 and 2013 alone, more than 17,000 children under the age of six were exposed to highly-concentrated laundry detergent pods—resulting in hundreds of hospitalizations from ingestion and one confirmed death.

“While liquid detergent pods were developed for the convenience for consumers, they have also have had unfortunate, unintended health consequences for children who ingested the colorful, candy-like packages,” AMA Board Member William E. Kobler, MD, said in a news release.

“We urge state and federal authorities to enact laws, including the Detergent Poisoning and Child Safety Act, to ensure that these packages are child-resistant, less attractive in color and design, and include clear and obvious warning labels to help deter further child exposure and the harmful health effects that could result,” Dr. Kobler said.

## **Preventing hearing loss in children caused by noisy toys**

From talking dolls to musical instruments, many children’s toys emit intense sound that could cause lasting hearing damage. To help prevent long-term hearing loss in children, the AMA today adopted policy in support of specific noise exposure standards for children's toys.

“Parents need to know that their children’s toys could be producing dangerously high levels of sound that could seriously impair their hearing,” AMA Board Member Jesse M. Ehrenfeld, MD, said in a news release. “We encourage manufacturers to ensure that the toys they produce adhere to pediatric noise exposure standards and include a warning label on any products that exceed safety standards so that parents can make an informed decision when buying sound-emitting toys.”

## **Supporting a ban on powdered alcohol**

With concerns mounting from physicians and public health advocates about the health dangers associated with powdered alcohol, the AMA adopted policy supporting federal and state laws banning this substance.

Excessive alcohol use is the fourth leading preventable cause of death in the United States. Alcohol is responsible for the deaths of 4,300 youths each year, and current AMA policy supports efforts to reduce youth access and consumption. Powdered alcohol, which can be mixed with liquid, poses a particular hazard to youths.

“Given the variety of flavors that could be enticing to youth and concerns that the final alcohol concentration could be much greater than intended by the manufacturer, we believe that powdered alcohol has the potential to cause serious harm to minors and should be banned,” Dr. Ehrenfeld said in a news release. “We urge states and the federal government to prevent powdered alcohol from being manufactured, distributed, imported and sold in the U.S.”

The AMA is a long-time advocate for reducing youth access to alcohol and is a strong supporter of banning the marketing of alcohol products that appeal to people under the age of 21.

## **The case for delaying school start times**

Given that AMA policy identifies insufficient sleep as a public health issue, and that sleep deprivation has particularly harmful health impacts in adolescents, the AMA adopted a resolution recommending that school districts start school no earlier than 8:30 a.m.

According to recent studies, only 32 percent of American teenagers reported getting at least eight hours of sleep on an average school night. The American Academy of Pediatrics recommends that teenagers between 14 and 17 years of age should get 8.5-9.5 hours of sleep per night to achieve optimal health and learning.

“Sleep deprivation is a growing public health issue affecting our nation’s adolescents, putting them at risk for mental, physical and emotional distress and disorders,” AMA Board Member William E. Kobler, MD, said in a news release. “Evidence strongly suggests that allowing adolescents more time for sleep results in improvements in health, academic performance, behavior and general well-being.”

“We believe delaying school start times will help ensure middle and high school students get enough sleep, and that it will improve the overall mental and physical health of our nation’s young people,” Dr. Kobler said.

## **Paid sick leave can lead to better health**

The AMA adopted new policy recognizing the public health benefits of paid sick leave and other discretionary time off. Citing a growing body of evidence that lack of access to paid sick leave results in the spread of infectious diseases, as well as delayed screenings, diagnoses and treatment, the new AMA policy supports paid sick leave as well as unpaid sick leave for employees to care for themselves or a family member.

Workers without paid sick days are more likely to work sick and are more likely to delay needed

medical care, which can lead to prolonged illness and worsen otherwise minor health issues, according to a report of the AMA Council on Medical Service that the policy is based upon. The AMA noted that the U.S. is the only industrialized nation without a federal law that guarantees paid sick leave. However, the AMA also weighed the impact of sick leave on businesses finances. The AMA pledged to continue monitoring different approaches to sick leave.

“With both dual-earner and single-parent households on the rise in the United States, it is increasingly challenging for workers to juggle family and work,” former AMA Board Chair Barbara L. McAneny, MD, said in a news release.

“Lack of paid leave also has a ripple effect across a worker’s family,” Dr. McAneny said. “Paid sick leave has been shown to aid children’s health, shorten hospital stays and reduce the risk of disease transmission by allowing parents to stay home with sick children. Paid sick leave keeps our homes, offices and communities healthier while ensuring the family’s economic security.”

## **Increasing the use of HIV preventive treatment**

The AMA adopted policy to educate physicians and the public on the use of pre-exposure prophylaxis for HIV.

Tenofovir/emtricitabine (also known as PrEP) is a once-a-day prevention option for HIV-negative men and women that reduces the risk of HIV acquisition. Although the U.S. Food and Drug Administration approved PrEP in July of 2012, a 2015 survey by the Centers for Disease Control and Prevention (CDC) found that 34 percent of primary care physicians and nurses had never heard of PrEP.

“With more than 1.2 million people in the United States living with substantial risk of HIV infection but fewer than 5 percent of them taking PrEP, there is significant ground to gain in stemming the incidence of HIV,” Dr. Ehrenfeld said in a news release. “Educating physicians and the public about the effective use of PrEP and supporting insurers to cover the costs associated with its administration will make the transmission of HIV rarer and our nation healthier.”

The AMA will support the coverage of the treatment—which on average costs more than \$1,500 for a month’s supply

The new policy builds on years of AMA efforts to bolster education and training to combat HIV/AIDS and to increase multi-layer collaboration to increase public awareness.

## **Physicians call for insurance parity for eating disorders**

The AMA adopted policy in support of health insurance coverage for eating disorders. Although current federal law mandates parity in benefit levels for eating disorders, many payers do not offer parity of services, effectively excluding eating disorders from mental health parity.

“Eating disorders have the highest mortality rate of any mental illness, but too often a patient’s care is determined by their insurance company instead of their health needs,” Dr. McAneny said in a news release. “With only one in 10 patients with an eating disorder receiving treatment and with psychological intervention widely accepted as a critical component of care, ensuring mental health parity in benefits will save lives.”

The policy builds on existing AMA policy related to eating disorders, mental health parity and body image. The AMA already encourages payment for physical and behavioral health care services on the same day and for Medicaid to pay for those services in school settings. Additionally, the AMA supports increased funding for research on diagnosis, prevention and treatment of eating disorders, including research on the effectiveness of school-based primary prevention programs for pre-adolescent children and their parents.