Read *AMA Morning Rounds®*’ most popular stories in medicine and public health from the week of Nov. 29–Dec. 3.

**COVID-19 vaccine demand growing amid Omicron variant fears, expanded booster eligibility**

The New York Times (12/4, Patel) reported, “Many vaccination clinics and local officials are reporting long lines and delays in booking [COVID-19] vaccination appointments recently, the product of expanded eligibility on booster shots and fears of the Omicron variant, experts said.” According to the Centers for Disease Control and Prevention, “vaccine demand has spiked from an average of under a million doses a day for much of October to an average of 1.5 million a day in recent weeks.” These “stresses on the U.S. vaccination program are also worsened by the broader labor shortage that is affecting many sectors, including health care.”

The Washington Post (12/5, Timsit) reports health care “providers administered 2.18 million doses of coronavirus vaccines on Thursday, according to the Centers for Disease Control and Prevention – the ‘highest single-day total since May,’ the White House said.” The CDC data suggest that “the increased demand for coronavirus vaccines is largely driven by demand for booster doses.”

**Blood pressure of nearly a half-million U.S. adults rose during COVID-19 pandemic, study finds**
According to the New York Times (12/6, Rabin), researchers “reported that blood pressure measurements of nearly a half-million adults showed a significant rise last year, compared with the previous year.” The study, published in Circulation, “found that blood pressure readings changed little from 2019 to the first three months of 2020, but increased significantly from April 2020 through December 2020, compared with the same period in 2019.” The study revealed “that the average monthly change from April 2020 to December 2020, compared with the previous year, was 1.10 mm Hg to 2.50 mm Hg for systolic blood pressure, and 0.14 to 0.53 for diastolic blood pressure.”

HealthDay (12/6, Mozes) reports, “Women appeared to be particularly vulnerable.” Study data “included blood pressure readings of nearly 464,600 adults – average age 46 – who participated in employee wellness programs across all 50 states.”

**Surgeon General warns on “devastating” mental health effects young people are facing**

According to the New York Times (12/7, Richtel), on Dec. 7, in a “rare public advisory,” U.S. Surgeon General Vivek H. Murthy, MD, MBA, “warned that young people are facing ‘devastating’ mental health effects as a result of the challenges experienced by their generation, including the coronavirus pandemic.” Murthy, “in a 53-page report [PDF],” delineated how “the pandemic intensified mental health issues that were already widespread by the spring of 2020,” citing “significant increases in self-reports of depression, anxiety and emergency-room visits for mental health challenges.” For example, in the U.S., emergency department “visits for suicide attempts rose 51% for adolescent girls in early 2021 as compared to the same period in 2019,” while “the figure rose 4% for boys.”

**CDC recommends that physicians talk to all adult, adolescent patients who are sexually active about PrEP**

CNN (12/8, Christensen) reports, “The U.S. Centers for Disease Control and Prevention is encouraging doctors to talk to all sexually active people about drugs that can help prevent HIV and to prescribe these drugs – known as pre-exposure prophylaxis or PrEP-- to anyone who asks for them.” On Wednesday, the CDC updated its guidelines “in the hope that these conversations will encourage more people to protect themselves from getting HIV, Dr. Demetre Daskalakis, the director of CDC’s Division of HIV Prevention, told CNN.” Last year, “only a quarter of the people who could benefit from the treatment were taking it, according to the CDC.”
Hospital, physician groups sue federal government over surprise billing ban

The New York Times (12/9, Sanger-Katz) reports, “Three weeks before a new ban on surprise medical billing is set to start, hospital and doctor groups have filed suit to block part of it.” The lawsuit, “from the American Medical Association, the American Hospital Association and a handful of individual hospitals and providers, argues that regulators in the Biden administration have misread the law’s language – and that their faulty interpretation will harm medical providers.” The suit “does not seek to gut the law’s consumer protections, but could influence contract negotiations between insurers and health care providers,” and if successful, “could influence which doctors and hospitals choose to go in network with insurers, and could lead to higher insurance premiums.”

Modern Healthcare (12/9, Goldman, Subscription Publication) reports, “The organizations asked the U.S. District Court for the District of Columbia to block only the provisions of the interim final rule that require arbitrators assisting payers and out-of-network providers through a billing dispute should first consider a plan’s median in-network rate when parties can’t resolve the situation themselves.”

RevCycle Intelligence (12/9, LaPointe) reports AMA President Gerald E. Harmon, M.D. said, “Congress established important patient protections against unanticipated medical bills in the No Surprises Act, and physicians were a critical part of the legislative solution. ... But if regulators don’t follow the letter of the law, patient access to care could be jeopardized as ongoing health plan manipulation creates an unsustainable situation for physicians. Our legal challenge urges regulators to ensure there is a fair and meaningful process to resolve disputes between (health care) providers and insurance companies.”

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