Diabetes Complications Decline Despite Increase in Disease Prevalence

Although the number of U.S. adults diagnosed with diabetes mellitus more than tripled from 1990 to 2010, rates of five diabetes-related complications declined during that time, according to a recent study. These complications include the incidence of lower-extremity amputation, end-stage renal disease, acute myocardial infarction, stroke, and deaths from hyperglycemic crisis.

According to CDC researchers, possible reasons for the decline include an increased emphasis on integrated care management for patients with chronic diseases that incorporates team-based care, patient education in disease management, and clinical decision-making support paired with enhanced patient self-management of risk factors. The greatest relative decreases in complications were observed for acute myocardial infarction and death from hyperglycemic crisis, both of which declined by about two-thirds, according to the study. The largest declines in complications were observed among adults 75 years and older, with the exception of end-stage renal disease, which declined in adults 20 to 64 years of age, but not in those older than 64 years. For more information, go to http://www.aafp.org/news/health-of-the-public/20140505diabetescomps.html.

Family Physicians in Rural Areas Could Get Pay Hike Under New Medicare Rule

The Centers for Medicare and Medicaid Services has issued a final rule that establishes a new Medicare prospective payment system for federally qualified health centers. The rule is expected to increase payments and potentially improve access to care for an estimated 21 million patients. Beginning October 1, 2014, federally qualified health centers will receive a single payment for all services provided to each patient in a single day, with some exceptions. Under the new system, some facilities could receive as much as a 32% increase in payments for care provided to Medicare beneficiaries. Federally qualified health centers are safety net institutions that are typically located in medically underserved areas such as impoverished urban neighborhoods or remote rural locations. A component of the Patient Protection and Affordable Care Act, the new payment model is intended to support a more coordinated approach to medical care while moving away from the traditional fee-for-service payment method.

For more information, go to http://www.aafp.org/news/government-medicine/20140514fqhcpayhi.html.

Study: Concussion Rates in High School Athletes Doubled Over Seven Years

Concussion rates among U.S. high school students increased from 0.23 to 0.51 per 1,000 athlete exposures between 2005 and 2012, according to a recently published study. Researchers analyzed data from the High School Reporting Information Online injury surveillance system, which contains data from 100 U.S. high schools that have at least one certified athletic trainer on staff. The system, which contains data from 100 U.S. high schools that have at least one certified athletic trainer on staff, contains data from 100 U.S. high schools that have at least one certified athletic trainer on staff. The upward trend in reported concussions is most likely a result of heightened national awareness of concussions, particularly given that the rates went up most steeply after the 2008-09 academic year, when states began passing legislation promoting education about concussions, the researchers said. The study was published in the April 16, 2014, issue of the American Journal of Sports Medicine and is available at http://ajs.sagepub.com/content/early/2014/04/14/0363546514530091.abstract.

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