

AAFP News: AFP Edition

Policy and Health Issues in the News

Study: Early Prediabetes Interventions Work

In an article published in the November issue of the *Journal of the American Osteopathic Association*, researchers outlined three interventions that could delay or prevent type 2 diabetes mellitus: lifestyle interventions, medication, and surgery. They cited one study of 3,200 participants randomly assigned to routine care, metformin (Glucophage) therapy, or an intensive lifestyle intervention focused on reducing net calories by reducing fat intake and engaging in physical activity. After more than 2.5 years, the incidence of type 2 diabetes was reduced by 58% in the lifestyle intervention group, 31% in the metformin group, and 17% in the routine care group. The authors noted that even though metformin was less effective than lifestyle interventions, it substantially decreased the incidence of diabetes: 18% at 10 years compared with placebo. They also stated that metabolic surgery is the most effective way to prevent diabetes, but highlighted the danger of adverse events and the requirement for long-term follow-up and observation for nutritional deficiencies. For more information, go to <https://www.aafp.org/news/health-of-the-public/20181114diabetesprev.html>.

CDC Focused on Unraveling Acute Flaccid Myelitis Mystery

The Centers for Disease Control and Prevention (CDC) recently published a *Morbidity and Mortality Weekly Report* (MMWR) that outlines the recent increase in acute flaccid myelitis (AFM), a condition that affects the nervous system, causing spinal cord gray matter lesions and weakness in the arms and legs. From January 1 to November 2, 2018, there were 80 cases of AFM confirmed in 25 states, which is three times the number of cases confirmed during the same period in 2017. During a recent media briefing, Nancy Messonnier, MD, director of the CDC's National Center for Immunization and Respiratory Diseases, updated the number of confirmed cases to 90 in 27 states from among 252 case reports under investigation. The CDC has created several resources on AFM, including a frequently asked questions document, case definitions, instructions for specimen collection, a data collection form, and interim considerations for clinical management. Although there still is not enough evidence to endorse the use of any targeted therapies or specific measures to treat AFM, the CDC recommends that clinicians expedite neurology and infectious disease consultations to discuss treatment considerations. For more information, go to <https://www.aafp.org/news/health-of-the-public/20181119mmwr-afm.html>.

AAFP Applauds FDA Move on E-cigarette Flavors, Menthol

The U.S. Food and Drug Administration (FDA) recently announced that it would seek to confine the sales of most flavored electronic nicotine delivery system (ENDS) products to age-restricted locations and require more robust age verification for online sales. The agency also aims to ban menthol in combustible tobacco products, as well as all flavoring agents in cigars. The proposed restriction on flavored ENDS products would exempt mint, menthol, and tobacco flavors, and unflavored pods. These moves “have the potential to impact generations to come and help ensure that the youngest members of society are safeguarded against what we know to be addictive and a deadly public health concern,” said American Academy of Family Physicians (AAFP) President John Cullen, MD, in a statement that applauded the FDA's announcement. The proposed ENDS policy could take effect as soon as early 2019, following a comment period that ends January 2. For more information, go to <https://www.aafp.org/news/government-medicine/20181119fdamenthol.html>.

AAFP Lends Expertise on Social Determinants of Health to Inform HHS

The AAFP recently responded to a request for information from the U.S. Department of Health and Human Services (HHS) that asked a series of questions about approaches for improving health care for Medicare beneficiaries with social risk factors. The AAFP commented on four specific areas: identifying beneficiaries with social risk factors, describing approaches to address the needs of these beneficiaries, sharing evidence about the impact of these approaches on quality outcomes and the total cost of care, and separating and addressing beneficiaries' social and medical risks. The AAFP drew on members' responses to a 2017 survey on social determinants of health (SDOH). For instance, the AAFP told HHS that nearly 60% of family physician respondents already screen patients for SDOH, and 52% follow up by referring patients to community-based social services. Furthermore, the AAFP said it developed its own SDOH screening tool based on other validated screening tools and promotes the tool to members as part of the EveryONE Project. For more information, go to <https://www.aafp.org/news/government-medicine/20181120hhssdoh.html>.

—AFP and AAFP NEWS STAFF

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