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Health System Magazine for consumers
Sidebars: Pharma topics

How do we get "safe & effective" prescription meds?

"With any medication, you need to understand what it can do, what the risks are and how much relief it can offer," said Morris Jones, PharmD, Registered Pharmacist at Memorial Hospital.

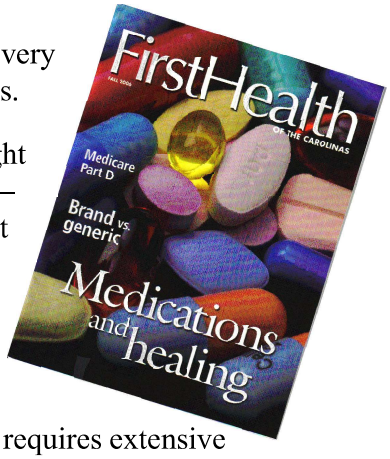
That's precisely the goal of the U.S. Federal Drug Administration (FDA). Though their goals--to ensure that drugs are "save and effective"--can be stated simply, the process is costly and complex:

1. Drug development and purification by the manufacturers can involve hundreds of staff and 100,000 or more ingredients, with no promise of success.
   "This is one reason medications cost so much," said Jones.
2. Short and long-term animal testing can span weeks or years.
3. Clinical studies on human volunteers, several thousand in all, are complex. Researchers evaluate safety, effectiveness and side effects at each of three levels of testing.
4. New Drug Application review, or NDA, is the final step. If it passes NDA review for safety and effectiveness for specific uses, the manufacturer begins production.

Does the FDA truly ensure that drugs are "safe and effective"?

Some critics say drugs are released without thorough research and with sometimes deadly consequences. Others claim people die when new treatments are held up in the approval process, which takes about eight years, according to the FDA.

Officials in other countries experience the same conundrum. Canada's review process is less stringent but more lengthy, according to the *Canada Medical Association Journal*. Europe "has lagged a long way behind the US" in getting lifesaving cancer drugs into the marketplace, according to a European medical journal. Government-controlled pricing and reimbursement issues have also kept drugs and patients apart.



New drugs are great, but every drug--new or old--has risks.

"A tried and true drug might be a better—and cheaper—option, or a new one might have side effects that actually help the patient in more ways than one," Jones said.

The bottom line: the FDA requires extensive research, but every drug has its own risks and benefits, specific to each patient and each condition. So, do your own research, and talk to your doctor or pharmacist.

Vaccinations:

Making movies and vacations safer

Is the community swimming hole or the local movie theater a danger zone? They were in the 1950s, when highly-contagious polio killed or paralyzed 33,000 people.

And measles kept people indoors when it attacked almost half a million people in the Americas during one outbreak.

Vaccinations, however, have quickly made it safe to come out to play. For public health officials, "Community Immunity" is the mantra. The more people who are vaccinated, the more protection there is for everyone, including infants and others who cannot be vaccinated.

"Vaccines aren't really drugs, but they can protect you and others," said Morris Jones, PharmD.

Thanks to vaccines, measles cases, for example, went down to about 40 last year, and there's not been a case of polio in the U.S. in 20 years.

Global travel, too, makes vaccines important.

As a case in point, one unvaccinated and infected tourist in 2003 caused a measles outbreak involving over 700 people --and killing three--in the overseas community he visited. And 1,200 people contracted polio in other countries last year.

Today in the U.S., **whooping cough (pertussis)** is at a 50-year high though vaccines are available.

Immunizations for it, as well as **measles, smallpox, rubella, tetanus and chickenpox** are all part of standard childhood vaccinations in the U.S.

Get immunized to protect yourself and your neighbors from preventable diseases that are in your backyard, or just a plane ride away.

Copy by Amy@AveryWrites.com
By-lined feature included in award-winning series
Audience: "Highly educated" consumers

Part of award-winning publication: Gold Winner: Aster Awards for excellence in medical marketing for a publication series

Exploring the twists and turns of the DNA helix

Both practical and promising research is emerging from virtually every twist and turn of the DNA helix. Discoveries are quickly advancing our understanding of the relationships between human genetics and disease.

"We're experiencing a paradigm shift in the way medicine is being practiced," says Geoffrey S. Ginsburg, M.D., Ph.D., director of the Center for Genomic Medicine at the Duke University School of Medicine in Durham, N.C. "There's a real opportunity to learn early in our lives about our genetic risks and to proactively plan to avoid illnesses. As a researcher, that's what gets me up in the morning."

The range of genetic research encompasses studies of health before birth and chronic disease later in life; mental health disorders and physical illnesses; inherited traits passed from parent to child and those shared by siblings and cousins.

"Families have a remarkably strong sense already that the kinds of diseases their relatives have can increase their risk for those diseases," says Elizabeth Hauser, Ph.D., Interim Chief of the Division of Medical Genetics at Duke.

"If we can understand the genetic components of that risk, we can offer more targeted treatment, and maybe even prevention," she says. "Genetics puts some specificity in the phrase, 'it runs in the family.'"

Encouraging breakthroughs

Study of the human genome and increasingly specific components of genes is offering solid medical strategies to diagnose, treat and predict disease. In the past two years alone, scientists have pinpointed around 50 new genes related to chronic conditions that had been previously impervious to research, according to experts.

Hauser and fellow researchers, for example, have been following the genetic trail of over 900 families who have histories of early-onset (before age 50) coronary artery disease (CAD).

"We've been doing this study for 10 years, and I'm starting to see light at the end of the tunnel," she says. "I'm starting to see ways our research can help these families, how it can give family members a more complete risk profile that they each can use individually."

Hundreds of studies

Scientists are exploring the relationship between diseases and genetics across a broad array of medical disciplines.

They have identified different genetic risk factors for neural tube defects, multiple sclerosis, age-related macular degeneration and cardiovascular diseases, for example.

Researchers are also investigating potentially inherited dermatological conditions such as eczema; ophthalmic conditions such as eye movement disorders; neurological disorders such as Alzheimer's disease, restless leg syndrome and multiple sclerosis; plus others related to severe obesity and septic shock.

Other scientists begin with studies such as these, then explore how external factors like exercise, diet and stress affect genes to cause disease.

"We used to sit around and postulate about the role of genetics and of the environment," Hauser says. "But with the increase in information available today, we're developing the ability to stratify patients, to group them with risk factors and identify ways to reduce health risks."

Dramatic choices

As research leads to more definitive diagnoses, it also leads to therapies. As reported this year in the *Journal of the American Medical Association* (*JAMA*), in one study of overweight patients, scientists found that half of the patients who received nutrition counseling based on results of individual nutrigenomics testing lost significantly more weight on average than those who received conventional nutritional counseling.

Research also enables geneticists, pharmaceutical researchers and physicians to proffer preventive treatments even before a disease produces its first symptoms. Another *JAMA* study on genetic mutations related to osteoporosis offers insights that might lead to drugs that target the disease.

In addition, discovery of the "BRCA" gene mutations that lead to specific types of breast cancer defines important options for those who inherit the gene. Some choose to keep a tight schedule for regular screenings. Others choose preventive mastectomies even before cancer develops.

Early diagnosis

In other cases, DNA research offers patients and their physicians the chance to catch diseases early, when treatment and prevention can be most effective. The Duke study on early-onset coronary artery disease is one such example.

. . . .continued *(available upon request)*

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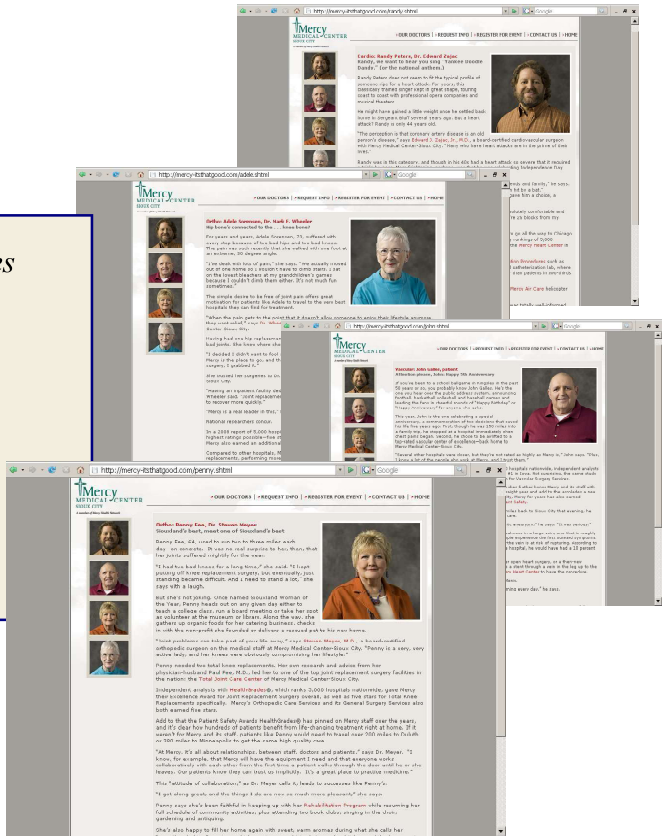
Webpages: "Sioux City Stories of 5-star care"

Patient Vignettes for Health System Service Lines



Siouxland's best, meet one of Siouxland's best

Web-based series: patient vignettes promoting service lines:
- *orthopedic surgery: knee (excerpt shown here)*
- *orthopedic surgery: hip*
- *vascular surgery*
- *cardiovascular: bypass surgery*
- *cardiovascular: emergency balloon angioplasty*

Penny Fee, 64, used to run two to three miles each day—on concrete. It was no real surprise to her, then, that her joints suffered mightily for the wear.

"I had two bad knees for a long time," she said. "I kept putting off knee replacement surgery; but eventually, just standing became difficult. And I need to stand a lot," she says with a laugh.

But she's not joking. Once named Siouxland Woman of the Year, Penny heads out on any given day either to teach a college class, run a board meeting or take her spot as volunteer at the museum or library. Along the way, she gathers up organic foods for her catering business, checks in with the non-profit she founded or delivers a rescued pet to his new home.

"Joint problems can take part of your life away," says Steven Meyer, M.D., a board-certified orthopedic surgeon on the medical staff at Mercy Medical Center-Sioux City. "Penny is a very, very active lady, and her knees were obviously compromising her lifestyle."

Penny needed two total knee replacements. Her own research and advice from her physician-husband Paul Fee, M.D., led her to one of the top joint replacement surgery facilities in the nation: the Total Joint Care Center of Mercy Medical. . . ..

Considering the awards HealthGrades has pinned on Mercy staff over the years, it's clear how hundreds of patients benefit from life-changing treatment right at home. If it weren't for Mercy and its staff, patients like Penny would need to travel over 200 miles to Duluth or 380 miles to Minneapolis to get the same high quality care.

"At Mercy, it's all about relationships, relationships between staff, doctors and patients," says Dr. Meyer. "I know, for example, that Mercy will have the equipment I need and that everyone works collaboratively from the first time a patient walks through the door until he or she leaves. Our patients know they can trust us implicitly. It's a great place to practice medicine."

This attitude of collaboration leads to successes like Penny's.

"I got along great, and the things I do are now so much more pleasant," she says.

Penny says she's been faithful in keeping up with her Rehabilitation Program while resuming her full schedule of community activities, plus attending two book clubs, singing in the choir and gardening.

She's also happy to fill her home again with the sweet, warm aromas from "marathon baking" sessions, which require several trips between her kitchen and the basement pantry.

"Before, my knees just slowed me down too much. Now, I don't even think about it," she says. "I now have my life back."

Copy by Amy@AveryWrites.com
Regular contributor to
Baylor University Medical Center's
Innovations **magazine**

Taking Aim (pancreatic cancer)

The newly formed clinical and research team of the pancreatic cancer center at Baylor Charles A. Sammons Cancer Center at Dallas has taken up the challenge of curing one of the deadliest cancers in the U.S.

"In the past 30 years, we have made tremendous progress against many forms of cancer. But nationally, only about six in every 100 people with pancreatic cancer will survive more than five years," says Alan M. Miller, MD, PhD, chief of oncology, Baylor Health Care System, and medical director of the Charles A. Sammons Cancer Center at Baylor Dallas. In addition, the overall number deaths from this aggressive cancer each year have been increasing for decades.

"We intend to change those statistics," Dr. Miller says.

In a major step, a team from Baylor Dallas is launching a new pancreatic cancer center. Located at the Charles A. Sammons Cancer Center at Baylor Dallas, the center's innovative research and a uniquely qualified multidisciplinary team are taking aim at pancreatic cancer.

The Best Hope Today To Cure Pancreatic Cancer

Pancreatic cancer is the fourth leading cause of cancer-related death. For the vast majority of people, the only way to cure it today is through surgery. But not all cancer cells can be removed through surgery. In addition, these cells are very resistant to chemotherapy and radiation therapy. [See sidebar, "Signs and Challenges."]

"We already have excellence in surgery for pancreatic cancer, which is a very important component for our patients' care, but we need more targeted tools to improve survival," says Carlos Becerra, MD, medical director of the Innovative Clinical Trials Center at Baylor Health Care System. "Research into new drugs offers the best hope for a cure for our patients."

Innovative Drugs and Clinical Trials

Nationally, most patients with pancreatic cancer are not in clinical trials, even though some drugs being tested might be more effective than current treatments. At Baylor Dallas, however, patients with pancreatic cancer have access to a range of innovative trials. Though these national and international studies, patients receive promising new therapies, some of which are not yet on the market. In addition, Baylor researchers are testing their own theories for curing pancreatic cancer.

"We're working on developing new drugs to target this cancer at the molecular level," Dr. Becerra says. "We're focusing on the cells that cause cancer, and finding drugs that affect those cells—either killing them or keeping them from dividing and spreading—while leaving healthy cells alone."

This type of treatment, called "targeted" therapy, is often more effective than other types of treatment and is less harmful to normal cells, according to the National Cancer Institute.

"We have the specialists, the research and the experience to focus on cures for pancreatic cancer," says Baylor Dallas surgeon Scott Celinski, MD. "Not every health system is willing to put forth such effort. But for us, that's our strength."

[sidebar]

Signs and Challenges of Pancreatic Cancer

The pancreas is a long gland deep in the abdomen, just above the level of the belly button. It makes insulin to regulate blood sugar and enzymes to help with digestion.

Pancreatic cancer is hard to diagnose. Risk factors include advanced age, smoking and diabetes. But most people with pancreatic cancer do not have risk factors like these or others that are easy to identify. Plus, they rarely have symptoms until the disease has advanced.

Because it is hard to diagnose and treat, experts suggest that people with pancreatic cancer enroll in clinical trials, like those at the new pancreatic cancer center at the Baylor Charles A. Sammons Cancer, where they can receive some of the most advanced drugs available.

Amy@AveryWrites.com

Event planning and promotion:

regional, national, international

Over 6 years for one client, I helped **organize dozens of on-site and virtual events: pre-event planning, speaker and attendee coordination, onsite management, post-event evaluations, etc.**

- **25 events**, in London, Jakarta, Tokyo, Madrid, D.C., Sofia, and more
- **2-4 days each**
- **9-15 educational sessions per event**
- **Consulted with on-location planning teams** to coordinate dates, details, speakers, locations, contracts, agenda, tourism
- **Built event websites and mobile apps**
- **Managed speaker communications** pre- and post-event

With 25 events, one builds on the next

Working as part of a 3-person event staff, our results were impressive: Attendees and speakers found the conferences valuable enough that many attended multiple events each year.

One example: Madrid, Spain

- **3 days**
- **9 educational sessions**
- **3 pre-event half-day workshops**
- **26 speakers and tutors**
- **375 attendees**
- **from 20 countries**
- **4-6 networking events, with several at off-site locations**

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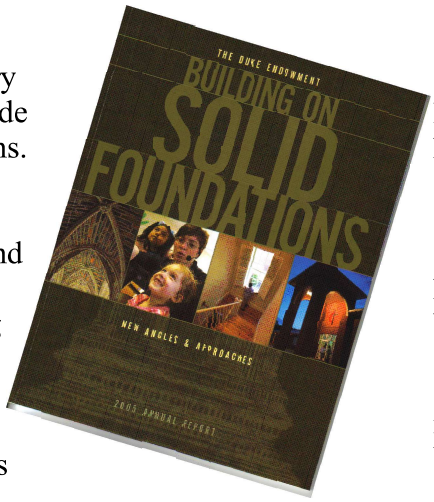
The Duke Endowment/Foundation
UNC-Chapel Hill School of Medicine
Annual Report Feature (excerpt)



In church sanctuaries throughout the country every week, parents stand alongside their children, singing hymns. It's routine, maybe even mundane for many.

For parents like David and Shell Keim, however, hearing all six children sing with them was not something they even imagined to hope for. Their fourth child, Micah, is hearing impaired.

"Probably one of the toughest things someone can tell you is that there's something wrong with your child," said David Keim, of Cary, N.C. . . .

The Keims dove immediately into research, and what they learned added urgency. Speech and language delays can permanently limit learning, especially in young children.

"Early intervention is a one-way track," said Craig Buchman, M.D., professor of otolaryngology at the University of North Carolina School of Medicine in Chapel Hill and Medical Director of a unique early intervention program. "If a child doesn't get help early on, the brain gets trained in a way so that it can no longer use sound signals." . . .

Learning to hear is hard work

A team of professionals who specialize in hearing and speech for the deaf embraced Micah and his family. Staff provided focused, intense therapy to help him first with hearing aids and later with a cochlear implant, a permanent device that electronically translates sound into digital information that the brain can understand.

"It's hard work to interpret sounds heard through 'electronic hearing,'" said Carolyn Brown, Program Coordinator for the Carolina Children's Communicative Disorders Program (CCCPD), an affiliate of CASTLE.

CASTLE's on-site educator, three speech-language pathologists, a teacher for the deaf, and assistant teacher all help preschoolers understand the meaning of sounds they've never before heard, and to speak in ways past generations could not.

"Deaf kids can talk," Brown said. "When we blend the new technology with advanced teaching interventions, it really does happen." . . .

Top Award Winner:
Silver Quill for feature writing
International Association of Business Communicators, Southern Region

Teachers become students

North Carolina is on the cutting edge of speech-language programs, and CASTLE and its affiliate CCCPD, both part of the UNC School of Medicine, support professionals across the state.

"We have a two-fold approach," Brown explained. "We provide services directly to children who are deaf and hard of hearing and also provide professional training to those working in the schools."

Said one 24-year veteran teacher, "What CASTLE has done for me is raise the bar for what my students can accomplish through listening. When I left the Center [after training], I had really gained customized skills that I could take back to my schools and my students." . . .

New sounds, this time for the family

From Micah's initial evaluation, to finding support and information, to his learning to listen and then to speak, the Keims give credit to CASTLE for bringing great changes to their lives.

Even for an untrained observer, the impact is clear.

Micah, now 7, busies himself with a drawing, but stops to delight in the click, click, click, click of the spring-loaded button on an ink pen. His speech, too, comes more and more easily.

"I'm going to be a pediatrician," he told an observer, nimbly and clearly pronouncing the complex name of the profession.

Watching his son, happy and drawing intently, Keim said, "I don't know what we would have done without the people there.

"It's hard to find . . .," he started slowly, then hesitated to find the right words.

"A CASTLE," Micah finished for him, never looking up from his drawing.

Micah's practice at preschool has given him a confidence that anyone can hear, and about a month after he began using the cochlear implant, it was his family's turn to hear something new. During church services with the entire family, they were caught by one of the most exciting sounds ever to resonate through the sanctuary.

"Micah was singing along," his father said. "I don't think I've ever heard a more beautiful sound."

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Public Relations Management Plan completed during my tenure *working within the health system's marketing department*

1. Situational Audit: Trends Near and Far

In addition to national trends showing growth in women's health product lines, Manchester Memorial Hospital's own research substantiated the relevance of these trends to our market area and identified the needs and expectations of our target audiences. . .. Further, a competitor 10 miles away had begun promoting their version of a women's center.

Based on this research and input from an Advisory Group of 18 women, the Center took shape: located within the hospital, which is central to our market base, it offers a myriad of health care services by and for women (mammograms, PAP smears, physical examinations, counseling, etc.)

2. P.R. Objectives: Seeing is believing

The role of Public Relations became to communicate two main messages about this product: the concept that it offers a convenient, centralized option for health care services and that the V.I.P. membership would be worth the one-time $10 fee.

National Award Winner:
Public Relations Society of America
Certificate of Merit
for Healthcare P.R. Management
PRSA MacEachern Awards

Visits to the center became our main strategy for introducing this new concept.. . .

3. Results of program launch

We were thrilled that our free on-site programs were sell-outs and that we received 1,100 VIP membership applications within two months of campaign launch. . . .

4. Measuring the success of marketing

To measure success, we turned to projected expectations of staffing needs based on the previous year's research. The Nurse Practitioner position became full-time by month five, 18 months earlier than expected. Likewise, secretarial and mammography staffing increased about 1/4 of an FTE about 18 months earlier than projected.

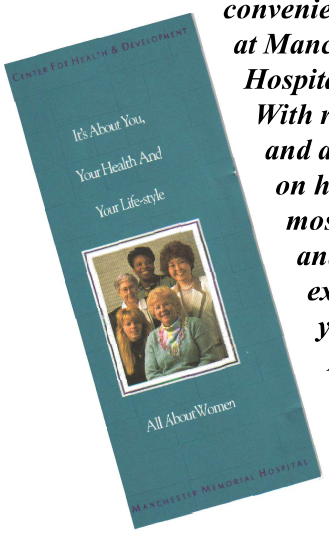
Anecdotes

Women 20 miles outside our market attended the programs and asked if they could join and use the Center's health services. . . .Some of these women drive by three hospitals to reach us.

Hospital staff, including physicians, also joined.

Provider-to-consumer Introductory Brochure (excerpt)

The concept of All About Women is simple: you asked for a central location for your health and educational needs. We've made sure you get it conveniently and comfortably at Manchester Memorial Hospital.



With regular office hours and a nurse practitioner on hand to answer your most intimate questions and provide examinations, we hope you will find that the All About Women center helps you to develop and maintain a healthy life-style.

About Our Staff

The All About Women staff includes a medical director, nurse practitioner, registered dietitians, registered radiology & mammography technologists, mental health professionals, exercise physiologists, massage therapists, and health educators.

About Our Services

To complement both your personal doctor's care and your own busy schedule, All About Women offers you a variety of health and educational services:

- Breast Examinations & Mammography, accredited by the American College of Radiology
- Routine Gynecological Exams
- Pap Smears
- Contraceptive Counseling
- PMS Counseling
- Menopause Counseling
- Personal Cholesterol & Blood Pressure Screenings
- Fitness Counseling

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● *well-researched* ● *accurate* ● *on-time* ● *within budget* ●

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My talent. My experience. Your results.

As an **award-winning freelance healthcare writer and marketing communications practitioner**, I bring to every project **strong research, a marketing focus, and plain language-health literate copy** to ensure the right messages reach the right audiences in a way they can understand and act on. I support healthcare clients in dozens of US states and multiple countries with **one-time projects and on-going copywriting**.

With **20+ years' experience in healthcare** -- including marcom and patient comms work within health systems for 10 years -- I understand that **completing a project on-time and within budget** is not a luxury; it's a necessity. Planning and research are keys for both the simplest article and the most complex report.

If you need a nationally recognized **healthcare marketer** and **strong writer** who pledges **dedication** to your projects, **put me on your team.**

To reach your target markets in the healthcare, medical and pharma industries, tap into my 20+ years as an industry insider.

Regional, National Awards & Recognition

- **Judge: Healthcare marcom, writing and leadership Awards**
- **Silver Quills for feature** & **for editorial writing**, from the **International Association of Business Communicators**
- **Gold Award** and **Best in Division Award** for writing from a regional communications group
- **Award of Merit** from the **National Health Information Awards**, in the patient magazine category
- **Gold Aster Award** for magazine series
- National speaker and webinar presenter, **Society for Healthcare Strategy & Market Development**, Chicago
- **National recognition** from the **Public Relations Society of America** for healthcare marketing
- **Published** in custom, trade, business, professional, state and regional publications

Providing targeted copy for internal and external audiences: B2B, B2C, B2Patients, B2Clinicians

Categories:
Hospitals and Healthcare Systems
B2B Healthcare & Medtech orgs
Pharma and Physician Groups
National Insurance Companies
Custom Publishers

Client Examples:
Baylor Health System, Texas
BayCare Health System, Va.
Geisinger Health System, Penn.
The Cleveland Clinic, Fla.
Scripps Health, Calif.
Atlantic Health, N.J.

Publications/Media:
Journal of Healthcare Information Management, national
Pharmaceutical Manufacturing & Packing Sourcer magazine, London
Web patient and donor testimonials
e-Newsletters

Education & Special Interests

Master's level study in marketing and healthcare management
Master of arts degree in education, focusing on adult communication and communication theory
Health literacy and plain language communications
Ethical use of AI; 50-hour foundations course (2026)
Industry courses, workshops, webinars

Professional Involvement

American College of Healthcare Executives
Association of Healthcare Philanthropy
Society for Healthcare Strategy & Market Development (Advisory Board; national speaker)
Center for Health Literacy
International Association of Business Communicators
American Marketing Association

Please call for a customized portfolio, or check out my writing samples online: www.AveryWrites.com.

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● *well-researched* ● *accurate* ● *on-time* ● *within budget* ●

Unsolicited comments about my work:

Someone asked who was doing our marcom [marketing communications], and I hesitated to tell him--I don't want you to get too busy and forget me! But I did, and I told him you are a bargain, worth every dime.
-- County Economic Development Director

Excellent. Well written and well researched. A very practical article and a valuable piece for our journal.
-- Reviewer for a national industry publication, for a ghostwritten journal-length article

This is one of the best-written case studies I've ever read. Well done.
-- Marketing V.P., B2B healthcare

Wow! You did such a great job! Thanks for making me sound so amazing. No wonder they hire professional writers for these things! *--interview subject for a branding campaign*

I just wanted to call to say 'job well done.' You took a complicated topic and made it easy to understand.
--Professional interviewed for a feature

I am glad we have you to support our efforts. We just can't do it all ourselves, and I appreciate your help.
--From a client's boss, for on-going contract work

YES!!! This is what I was envisioning. Excellent job!
-From a client regarding fundraising collateral

The client was very pleased. I can't tell you how happy we are. Thank you for all your hard work!!!!
-From a national agency representative

Amy, these are WONDERFUL stories. You're a great addition to our magazine team. . .. Hope you'll be interested in an assignment for the next issue.
--Corporate Magazine Editor