



***We Need an International Clearinghouse on Better Health Care Practices***

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Better practices in health care save lives and money. That's something that everyone within government and private health care agree on, from President Barack Obama to retired Speaker of the House Newt Gingrich to America's Health Insurance Plans. The current focus on national health care reform speaks to the question of better ways to deliver health care and contain costs. Yet today, our world has no formal system for implementing better practices in health care systems around the globe, no recognized dissemination channels for better practices, and no formal system for identifying emerging better practices. We need an international clearinghouse that includes clinical best practices as well as best practices on consumer health engagement, provider pay-for-performance and health benefit design.

There is no more important institution to implement a formal system for the identification and adoption of better practices than the medical profession. Currently, thousands of standard protocols are followed daily in pursuit of improving the delivery of health care services and improving patient outcomes. The challenge has been to identify these new and emerging practices and then share them with the rest of the health care universe. At present, The Institute of Medicine estimates that there is an 18- year time lag between conception of a better practice and implementation of a new medical practice. It takes between 10 and 17 years for even the most basic of innovative practices to be shared and adopted by the health community. Without a formal international clearinghouse, 17 years slipped by before adoption of the infection control practices currently used in hospitals.

Imagine the people who could be helped, and the early deaths that could be spared, in the span of two decades. For example, in the mid-1980s, after decades of steadily falling rates of tuberculosis, there was a substantial increase in cases and large outbreaks of highly drug-resistant strains. "DOTs" – or directly observed therapy – emerged as a significant better practice in treatment, as a nurse or health aide watched to make sure the patient actually took the drug. This greatly improved patient outcomes and reduced health care costs, and has been used successfully since in HIV therapies as well. The expansion in the use of DOTs in the United States was followed by dramatic decreases in multi-drug-resistant tuberculosis.

We need a public and private collaboration to develop a process through which this kind of better practice and many more, can be adapted and have the greatest impact. We need an international clearinghouse made up of representatives from the Administration, from private industry, from governments, and from the medical communities – groups like the American Medical Association and Centers for Disease Control who not only embrace this mission but can get things done.

One step in the right direction took place last year, when The Global Knowledge Exchange Network was created to identify and promote the awareness and adoption of existing and emerging better practices and promising new health system models across

industrialized nations. Members are a collective brain trust of leading health experts who represent the best interests of the medical, business, government and consumer sectors around the world devoted to slowing the growth of health care costs, reducing medical errors, and minimizing procedures that have no measurable positive impact and improving outcomes and health care quality.

But their best and brightest ideas will not be of use to anyone without a formal global process to put them into practice. Health care, regardless of how well it is organized, will suffocate under the weight of increasing numbers of patients and costs unless there is a system to identify, verify and adopt better practices in an orderly and timely manner. We must create an international clearinghouse for better practices as an essential component of health care reform, with a clear pathway to vet, adopt and disseminate those practices. We can't afford to let another generation go by without the benefit of the better practices that can spare our citizens from disease and early death.

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