

Good Behavior



Center for Advancing Health

Some Effects of Our Unfamiliarity with Health Care

Last week I had my blood drawn at a commercial laboratory in Chinatown in New York City that serves mostly new Asian immigrants. I asked the young African American phlebotomist whether she spoke any Chinese. "A little," she said. "We have Mandarin, Cantonese and Vietnamese staff. But you know, many of our clients aren't familiar with Western scientific medicine, so it doesn't really matter what language we speak. If we take more than a couple tubes of blood, they think we are trying to kill them and they get very upset - they try to pull the needle out and they shout or cry."

Most native-born Americans aren't particularly familiar with scientific medicine either, but we have great faith in science and we particularly [believe that most medical care is based on research evidence](#). We think that more medical procedures and tests are better than less, that newer ones are better than older ones and that expensive interventions are more effective than cheaper alternatives, according to a recent paper published in *Health Affairs*.

"Here! Take as much of my blood as you need so you can tailor my drugs to my genes," we say.

Our lack of understanding of the gaps in medical evidence and the scientific lags in practice leads us to hold unrealistic expectations of what our doctors can do and what the tools of medicine can deliver. This means many of us are learning through painful personal experiences that treatments fail and errors are made; that sometimes new evidence shows a drug that is meant to cure instead causes harm. It means that the ability of my doctor to calibrate my chemotherapy to the milligram doesn't mean that she can predict my survival with the same precision.

Despite these experiences, many of us maintain our belief in our physicians to deliver to us evidence- based procedures and technologies that will cure our diseases and ease our

suffering. A recent CFAH report found that [most of us act consistent with this belief](#): we expect that our doctors will tell us everything we need to know and are [reluctant to ask questions](#) because the answers may be too technical to understand. Unaware that all evidence is provisional, we favor binary information (Should I stop smoking? Yes. Should I get a lumpectomy? Yes.) And so rather than learn about and weigh trade-offs of testing and treatment alternatives, all too often we [defer decisions about them to our physicians](#).

Just as some patients in the Chinatown clinic struggle to adjust to a Western approach to diagnosing and treating illness, we US nationals are going to struggle with the challenges posed to us by health care today. *The same wave of scientific advances in medicine that seem to promise more cures and a better quality of life simultaneously demand more from us.*

It is rare that there is only one clear approach to treating a condition, which means that we have choices. So not only do we have to get the tests, take the pills and change our lifestyles in order to realize the promise of those advances, we must work with our doctor to decide whether and which tests, pills, and devices will work best for us.

We should start first by simply asking more questions about what we might do, what we must do and how we will benefit...or we may find ourselves doing some shouting and crying of our own.

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From the Health Behavior News Service

The Health Behavior News Service regularly distributes stories summarizing new research on health behavior issues. These stories can be found online at <http://www.cfah.org/hbns/news/>

May News Stories:

- **ANOTHER EXERCISE BENEFIT: YOU WON'T FALL AS MUCH** Remaining physically fit and sticking to a regular exercise routine could lower your risk of taking a tumble - at any age.
- **DENTAL TREATMENT MIGHT LOWER GLUCOSE LEVELS IN TYPE 2 DIABETES** Routine dental treatment can reduce blood glucose levels in people with type 2 diabetes who have preexisting gum disease.
- **RELATIONSHIPS CAN LOWER SUBSTANCE USE IN YOUNG PEOPLE** Although researchers aren't ready to start a dating service, they say romantic relationships can reduce substance use in young adults.
- **SMOKING HITS NEW LOW FOR WHITE CALIFORNIA KIDS** California kids are less likely than ever to start smoking, thanks to the most ambitious, longest-running anti-tobacco program in the world.
- **BLACKS, HISPANICS LESS LIKELY ELIGIBLE FOR MEDICARE PRESCRIPTION HELP** Medicare's Part D prescription medication management program could be off limits to some of the patients who need it most - older African-Americans and Hispanics.
- **PRESCRIPTION COSTS MORE LIKELY TO DETER HISPANICS IN STUDY** A new study of Medicare beneficiaries finds that cost concerns are more likely keep Hispanics away from the pharmacy counter than non-Hispanics.
- **OUT-OF-POCKET COSTS PUT ARTHRITIS DRUGS OUT OF REACH FOR SOME** High insurance costs keep many arthritis sufferers from using expensive - but highly effective - biotech drugs.