



TREASURE COAST DERMATOLOGY

Specializing in the Treatment of Skin Cancer

January 26, 2015

DEAR FRIENDS:

Many of you are new and don't know some of the traditions at Treasure Coast Dermatology.

Every year, I write a letter regarding some of the things I think are important to the practice. I also announce the date and time of our annual picnic.

I usually review some of the past letters; however, we recently put copies of these on our website: www.TCDermatology.com. I hope you'll take the time to read some of them.

This year, our picnic will be held on ~~Saturday, February 20th,~~ between 11:00 a.m. and 2:00 p.m. at Tradition Field (527 NW Peacock Blvd. Port St. Lucie, FL 34986). There will be food, music, and hopefully good weather. We've been having the party for 16 years now, and we've only been rained out once!

There is one sad note regarding this year's party: Roger and Suzie, our husband-and-wife team who've been providing our music since the very first party, won't be able to entertain. Please send your best wishes and prayers to Suzie as she is dealing with some health issues. With God's help, hopefully she'll be singing and dancing with us at the next party. If you do see her at the picnic, please say hello and thank her for all of the joy she and Roger have given us over the years.

Dr. Cynthia Golomb has been working with Treasure Coast Dermatology for many years now. In 2013, she joined us locally and began seeing patients in our Port St. Lucie and Stuart offices. Her practice is growing and thriving. I can't tell you the number of patients who have called to let me know what a great physician she is. I've known Cindy for years. We trained together as residents at the University of Miami, and I, too, can vouch for her. She is not only a good physician but a good friend and good person as well. I think we're lucky on the Treasure Coast to have her working with us.

As for me and my family, we're all doing well. CC, at three years old, is the light in her daddy's eyes. She is growing fast, and she is a joy. Though she talks back to me a little bit, she's good - the good kind of good: kind, smart, and beautiful.

Our son George is also growing quickly. He recently started walking. Chasing him across the house and watching him grow is a delight.

My wife Cammy and I are also doing well. She is the pillar of my life, and after more than 8 years of marriage, she's still my best friend.

As many of you know, our practice has specialized in the treatment of skin cancer and has primarily taken care of Medicare patients. It's almost a cliché to hear that fewer and fewer physicians are accepting Medicare. I think this is a sad reflection on our community and our country.

Taking care of the generation that preceded us is our duty. If we want those younger than us to care for our generation, we should care for those in our community who are older and who've helped build and defend this country.

One of the ideas of people who oppose Medicare and try to restrict the quality of care it provides is that there are simply not enough resources to take care of everyone.

I disagree with that, and I'm going to go into it further. I hope you'll take the time to read what I've written.

"Lack of resources" is an interesting term. But what it really means is allocation of resources. Though the resources of this country are, of course, limited, we are still a wealthy nation. I know many people feel we are going bankrupt, and I'm not going to get into a political discussion, but I will say the resources going into Medicare are being misappropriated.

Some years ago, we heard about "death panels" and the like during some of the presidential debates, etc. I never really worried about things like that because the discussions were out in the open, and of course, these "panels" never occurred.

When political things happen outside of the public eye, that's when I worry.

When I was in high school, I was nominated to become a page in Congress at the U.S. House of Representatives. I went, and when people later asked me what I had learned, I told them I learned I never wanted to become a politician. As a page, you're a fly on the wall, and the little I saw I didn't like.

There have been some changes going on with Medicare in dermatology, and besides one small blurb in the newspaper, there was little mention of it.

Here's what happened: Mohs surgery is a type of surgery that has the highest cure rate of any type of treatment for skin cancer. This fact has been shown time and again. The major groups responsible for the training of Mohs surgeons got together and formed an Appropriate Use Criteria. Though Mohs has the highest cure rate, and could arguably be used for most any skin cancer, these groups got together, and after much wrangling, came up with the instances where it would get the most "bang for the buck" as it were.

Put in more simple terms, they came up with a minimum standard of care. Well, the administrators of Medicare in Florida came out and said it was too high a standard.

They weren't going to allocate the resources for it.

The dermatologic community and some skin cancer patients (the ones that knew about it) went up in arms, and literally, during the last days before the rule went into effect and under considerable pressure to at least provide a minimum standard of care, the administrators relented.

There was no reason for the back and forth on this. The standards were set and agreed upon by the experts in the field, and the cost cutters, under the banner of "lack of resources," tried to undermine them.

Let me say further: I get tremendous flak on some of the issues I write about in my letters. I expect this to be one of them.

Now, more on this alleged "lack of resources."

There is a scandal in the costs of medication going on with little being said about it.

The phrase "price is what you pay, value is what you get" is especially pertinent to this issue.

There have been tremendous increases in the costs of certain medicines in this country. These increases are artificial and obviously manipulated. From the New York Times: "The National Community Pharmacists Association called for a congressional hearing on generic drug prices, complaining that those for many essential medicines grew as much as "600, 1,000 percent or more" in recent years."

As an example in dermatology: There's a medicine called albendazole, which we use in dermatology for a certain type of skin infection (called cutaneous larva migrans) that is somewhat more common in Florida. The treatment was usually three pills of albendazole, one a day.

The treatment used to cost about twelve dollars total, four dollars/pill. I recently prescribed this for a patient and was told it was over THREE HUNDRED DOLLARS for three pills. I thought there may have been some miscommunication with the pharmacy.

There was not.

This GENERIC medication, which is distributed in other countries (Europe, Asia, etc.) for FIVE CENTS per pill, costs more than one hundred dollars here.

These facts are not misprints. Here is a quote with references from Wikipedia: "Since 2010, the U.S. price of albendazole has increased by >4000% to over US\$100 per 200-mg tablet. Amedra Pharmaceuticals is the U.S. distributor. GlaxoSmithKline retains distribution rights in all markets outside the U.S. The international wholesale price is typically less than US\$0.05 per 200-mg tablet." If you want to read the entire article, it's on the web at: <http://en.wikipedia.org/wiki/Albendazole>.

Price is what you pay, value is what you get. Well, the pill (the value) is the same whether you get it in the U.S. or in Germany, but the price is a thousand times more in Florida. Issues like this tend to give lie to the lack of resources argument.

One has to question why we have the resources to pay exorbitant prices for medications but lack the resources to pay for the minimum standard of care for the treatment of skin cancer for Medicare patients.

Let's be frank: This is a political issue - one that gets little attention. So, the ones with the lobbyists (the drug companies) are the ones getting the resources.

We patients, well, we know what we're getting.

This happens on many levels. For years, doctors took lunches, dinners, trips, and gifts given to them by drug companies. If you think this was not an incentive for doctors to prescribe more expensive drugs, well, you're wrong. No physician in this practice has ever taken a meal or gift while working at Treasure Coast Dermatology. I've covered this issue in my other letters, and I don't want to be redundant, but please read more about it on our website.

This wholesale robbery of patients goes on in other ways too. Many Medicare plans offer "drug discounts" in order to encourage patients to sign up with their programs. This is a give and take trade off.

Theoretically, these savings on medications can be a lifesaver, but patients often have to give up their choice of doctor (that's the give and take).

But here's the problem: Many times, pharmacies offer the same drugs for less money to those who are NOT on these plans. It goes like this: You're on a plan; you pay your copay of \$30 and see the prescription had a "cost" of \$150, so you feel pretty good about your choice of prescription plan. But the person behind you, well, she has a coupon from the Internet that gets her the same prescription for \$15 TOTAL. She didn't give up her choice of doctor. And further, your insurance company didn't "pay" the pharmacy \$120 dollars for your medicine. They get a bulk discount.

How do you get around this? Luckily, there are some ways. There is a website: www.goodrx.com. Please go to this website and look this information up. If you don't have access to the Internet, please ask a friend who can help. There is even an app for it on most smartphones that will list the cost of various medications at the pharmacies in your area. You can print a coupon and save, potentially, thousands of dollars each year.

I have no connection to this company and make no money from providing you with this information. However much you have, I'm sure you've worked hard for it. Don't give it away to a system that's scamming you.

One of the issues I got flak from in the past was recommending to my patients to go to Canada to get their medicines. I was told that it was "inappropriate" to suggest that people go outside the U.S. and it could lead to liability. So while I am definitely NOT recommending you use this company in Canada to get your medicines if they are too expensive, many of my patients do and seem to get good results. Here's the number and website for the Canadian pharmacy: **(800) 891.0844 / www.canadapharmacy.com**.

Again, I'm not suggesting you use it (I don't want any more letters from lawyers), and I make no money if you do or if you don't, and I am making no claims about it at all. I am providing this information as a public service.

In closing, I want to emphasize how Treasure Coast Dermatology is run. It is tailored specifically to people in the Medicare age bracket. When physicians are dropping Medicare patients left and right for a variety of reasons, we are going to be here as long as we can.

As I am sometimes asked - we are a MEDICAL practice. We know how to allocate our resources. We don't offer Botox, or hair removal, or wrinkle treatments. We think this would interfere with our first job, which is to take care of our patients' medical problems. Skin cancer and medical diseases of the skin are what we treat. If you do want cosmetic treatments, we are glad to refer you to those we think do it best.

Every time you come to Treasure Coast Dermatology, you'll be seen by a board-certified dermatologist who's focused on caring for you.

Thank you for your continued support and for taking the time to read this letter.

I hope to see you at the picnic.

Sincerely,

Tim Ioannides, M.D.

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Cynthia Golomb, M.D.

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