

US malpractice premiums soar again

After years of relative stability, medical malpractice premiums are soaring across the US, forcing thousands of physicians to “go bare,” shut their offices, relocate or accept double-digit increases.

In New York, Texas and Florida, where litigation is most rampant, insurers are increasing their rates by 30% to 50%. In southeast Florida, higher-risk specialists such as obstetricians are now paying \$200 000 a year for \$1 million in coverage. Neurosurgeons in Long Island, NY, who are already paying \$150 000 annually for \$1 million in coverage, have already been told they will be paying even more. In Corpus Christi, Tex., a pediatric neurosurgeon saw his premium increase from \$32 000 in 1999 to nearly \$120 000 last year.

Not only is insurance becoming unaffordable, it is also becoming unavailable in some regions. Three insurers have recently stopped insuring physicians. St. Paul Companies of Minnesota has refused to renew policies for 42 000 doctors spread across the country. PHICO insurance company liquidated, leaving hundreds of Vermont physicians uninsured. And the Princeton Insurance Company opted out of the medical liability market in Pennsylvania, leaving more than 1000 physicians scrambling for coverage.

The American Medical Association (AMA) says 14 of 16 neurosurgeons in Broward County, Fla., now practise without insurance either because they could not find it or afford it. In Las Vegas, 10% of practising MDs are expected to leave in the face of escalating premiums. Dr. Donald Palmisano, the AMA's secretary treasurer, has heard from many physicians faced with “difficult decisions to limit services and in some cases retire early or leave the state. We are also hearing ... that the liability lottery is negatively affecting patient access to care.”

A major factor is the cost of litigation. For every dollar collected in premiums from Nevada doctors, St. Paul insurance lost \$1.88. And even though the number of malpractice cases litigated has been relatively stable, average jury awards are rising once again. Jury Verdict Research, a firm that analyzes such trends, found that the median jury award in 1999 was \$800 000, up 7%

over the previous year. But when all awards, including the most catastrophic ones, are tallied, the average 1999 award came to \$3.49 million, up from \$1.95 million 6 years ago.

Another critical factor is that during the 1990s a soaring stock market allowed insurance companies to subsidize their malpractice business by investing heavily in a soaring stock market. When that bounty dried up, insurers went back to their MD clients to help cover losses.

To a degree, Canadian physicians are insulated from similar pressures. Dr. John Gray, CEO of the nonprofit Canadian Medical Protective Association,

says the CMPA raises fees only to cover the cost of awards. However, these fees represent only half of its revenue — the rest comes from investments made possible by the organization's huge war chest. In this respect, adds Gray, the CMPA is not insulated from the market performance of its investments.

In Canada, Ontario obstetricians pay the highest annual fees — \$69 360. (The province pays almost all of this because of an agreement with the Ontario Medical Association.) An obstetrician in Quebec pays only \$15 199, mainly because court awards are less generous there. — *Milan Korcok*, Florida

STDs become part of plot on TV soap for UK teens

Writers of a soap opera aimed at 16-to-24-year-old Britons have made venereal disease part of the show's plot. This unusual departure from normal teen-soap fare comes amidst rising concern among British physicians over escalating rates of sexually transmitted disease (STD). The number of infections reported jumped by almost 300 000 between 1995 and 2000, according to the British Medical Association (BMA). Gonorrhoea infection rates rose by 31% in men and 26% in women from 1999 to 2000.

Health authorities are also reporting an increase in cases of syphilis, with outbreaks in north London, Brighton and Manchester within the past year. Manchester's genitourinary clinics saw at least 160 people with syphilis last year, compared with 1 or 2 in previous years.

The BMA responded with a plea for more genitourinary medical facilities that are open longer hours. Its report also stated that a lack of high-profile public health campaigns has contributed to the increase in STD rates. During the late 1980s the number of infections declined after an awareness campaign that warned: “Don't die of ignorance.”

There has been no follow-up program, so the BMA responded by asking broadcasters to present a more realistic portrayal of sex and its potential implications. Thus, the Apr. 15 episode of *Hollyoaks*, a half-hour teen soap broadcast 4 times weekly, depicted a young student experiencing what she thought were flu-like symptoms. She then learned she had gonorrhoea. A spokesperson for the show said that with the rate of STDs increasing, “this storyline is all the more relevant and vital.” The program attracts 5 million viewers per week.

The BMA also called for a survey of TV programs with sexual content to determine how frequently family-planning issues and STD risks are being raised.

Some MDs say a more effective strategy would be to coordinate teaching efforts with the education ministry. Public Health Minister Yvette Cooper indicated that a publicity campaign aimed at this age group will begin this autumn, and will employ some of the strategies used in a teenage pregnancy prevention program. Following that program's launch in 1999, pregnancies fell by 7% among British girls under age 16. — *Mary Helen Spooner*, West Sussex, UK

