

Docs Face Up To It: We're All Connected

BY TABATHA CRAYON

NEW YORK—Jordan S. Josephson, M.D., has this idea that the nose bone is connected to the chest bone and the chest bone is connected to the throat bone and nobody wants to know about it.

Okay, so that's a fanciful, unscientific explanation, but what he means is that sinusitis, allergies and asthma are all connected and that physicians, pharmaceutical companies and hospitals should treat them as such.

Oddly enough, allergy physicians don't always want to be in the same room with ear, nose and throat (ENT) doctors, he says. There is some sort of medical-political-economic snobbery at work here, and Josephson wants to eliminate it.

"What happens is the pulmonologists treat asthma, the allergists treat allergies and sometimes asthma and sometimes sinus problems, and the ENTs treat sinus problems and sometimes allergies," he told *The Medical Herald*.

"But very often you get a patient who needs all three of them to sit down together and say, okay guys what are we going to do with this patient? But they don't for various reasons." Josephson has tried to bring these medical disciplines together, he said, "But allergists say well, if ENTs are involved then we are not getting involved."

Money for Research

This non-cooperation or treatment barrier must be knocked down, he said, because sinus disease, allergies and asthma are huge problems in the United States, and the problems appear to be getting worse with aggravating environmental factors, such as air pollution. Medical experts in the relevant fields agree that the problem is reaching epidemic proportions.

James Hadley, M.D., the president of the American Rhinologic Society, told *The Herald* that sinus disease, allergies and asthma affect about one in every four Americans, and that asthma is the leading cause of death in American children.

David A. Sherris, M.D., the chairman of the Department of Otolaryngology, SUNY at Buffalo, further noted that "these disease disorders have a huge negative impact on the quality of life of patients everywhere."

Josephson speculated that, in Brooklyn alone, asthma-related costs probably amount to billions of dollars. Josephson noted that the government has recently given a hospital in Brooklyn \$450 million to research just one asthma project. Congressman Ed Towns of Brooklyn, New York, told *The Herald* that sinus disease, aller-

gies and asthma are affecting members of the Brooklyn community in epidemic proportions.

"According to the statistics that I have seen," said Congressman Towns, "Brooklyn is probably one of the areas in the country worst affected, but other major cities are not far behind. We have to do something. It is about time that industry, government and the community got together to put an end to this epidemic."

The desperate need to deal with the scourge of asthma has set Josephson and his colleagues on a mission to unify the unnatural separation of disciplines in a Sinus and Nasal International Foundation, or SNIF.

Josephson sees SNIF as an all encompassing, organized assault on asthma and other related diseases that devastate children, especially the poor and minorities. The problem is massive and the response should also be massive. Separate disciplines treating separate ailments, he says, does not attack all the separate elements.

The nose, the ear, the throat, the lungs, like the bones in that song, are connected, and SNIF advocates want to see the problem connected to the head bone of the medical profession. "If we could get the drug companies, the doctors and the hospitals and the patients together and start treating this, we could probably knock out all of the inefficiencies and everybody will benefit because sinus disease, allergies and asthma are really subsets of the same disease process" said Sherris.

Jens Ponikau, M.D., a leading researcher and authority on fungal sinusitis, agrees that the various disciplines must work together. According to Ponikau, "We are only starting to understand that the inflammation in the upper airways leading to chronic rhinosinusitis and in the lower airways leading to asthma are similar and coexist in the majority of the patients."

How to mobilize SNIF, which already exists, into a massive, operational program doesn't sound simple. Josephson envisions millions of patients being organized and educated and supported by physicians, hospitals and insurance companies. "There should be a consortium of drug companies, hospitals, doctors and patients sitting down and figuring out the best and most efficient way to treat patients so they get the most out of their care, because we are spending billions," he explained.

Only a national foundation such as SNIF seems capable of assembling the various professions into an assault team large enough and with enough expertise from all necessary practitioners to treat the pandemic of asthma, sinusitis and allergies that plague so many Americans, he declared.

"I would like to get all of the



Jordan Josephson, M.D.

drug companies working together. I want the hospitals working together. I want all of the patients working together. I want to create an unprecedented network that would educate patients, save patients money, and save insurance companies money," he told *The Herald*.

"If the patients take their medicine and become compliant because they understand the importance of it, then the drug companies will make more money. The insurance companies would save more money because the patients would be healthier."

As is obvious, Josephson and his colleagues at SNIF have big plans, but they need cooperation and money to support their educational and research goals. Ponikau warns that "research money is drying up" and that "patients and patient care would strongly benefit from an organization which represents their interest and links patients, physicians, government, pharmaceutical and insurance companies and agencies which fund medical research."

Josephson agreed that "we really need to put some money into this. Every drug company makes billions off of these diseases. I would like these drug companies to earmark financial resources to support SNIF's cause."

"I would like the drug companies and insurance companies to get together and help us to raise our nationwide membership to 10 million patients."

"Considering that there are 70 million sufferers, this should be possible, but we need everyone to help. If we have that kind of money," said Josephson, "we can give seminars in schools."

Josephson himself has had sinus problems since he was a kid, he says. In fact, he might have become a veterinarian instead of a physician if his love of animals wasn't interrupted by his allergies to them.

"I wanted to be a veterinarian when I was a child," he said. "I was allergic to animals. I had bad sinus problems ever since I was about 8. I grew up with dogs, cats, fish, gerbils, hamsters, bunny rabbits, turtles. I tried to convince my

dad to get a chimpanzee but that didn't go over too well."

While in high school on Long Island, he volunteered at an Emergency Room at one of the local hospitals and decided to become a doctor, which led him to the State University of New York at Albany and then to SUNY Downstate Medical Center in Brooklyn. He was the first fellowship-trained sinus surgeon in the United States in 1989 at the prestigious Johns Hopkins Medical Center.

He presently is an attending physician at Lenox Hill Hospital and has a private practice on 77th Street between Park and Lexington Avenue in Manhattan. He is also on staff at the Manhattan Eye, Ear, Nose and Throat Hospital and St Luke's-Roosevelt Hospital. He was on the consulting staff of the National Institutes of Health for about eight years where he studied various treatments for patients with very complicated nasal disease.

Along the way, Josephson wrote book chapters and articles about sinusitis and other aspects of the ears, nose and throat, did symposiums, and was the invited expert on Lifetime Television's Internal Medicine Updates episodes on sinusitis for about five years.

Josephson and his colleagues formed SNIF, which is a non-profit (501-C3), with a few patients and a few physicians around the country.

Patient membership is growing, and the group now has about 80-100 signatures of leading doctors in different specialties who are on board. To date, the doctors and a few patients have funded SNIF with their own money. In addition, one or two drug companies gave about \$1,000, but SNIF is in need of significantly more funding.

SNIF is building its website at <<http://www.snif-us.org/>> www.SNIF-US.ORG, but can be currently contacted via e-mail at snif-us.org.

The senior people involved with SNIF include Stuart Young, M.D., a renowned allergist who has written many allergy books, and Jim Hadley, M.D., who is president of the American Rhinologic Society. There are people both in and outside of medicine, including Mark Painter, CEO of the Relative Value Studies based in Denver, Colorado, and Sherris, formerly a professor at the Mayo Clinic.

Young, a board member of SNIF, agreed with Josephson that an organization like SNIF uniting the various medical disciplines, drug companies and insurers is necessary.

Young looks forward to the time when healthcare providers, drug companies and insurers will be partners. According to Young, "It's about time that there is an

organization to unite everyone in a partnership to treat these patients that suffer from these terrible diseases.

"Although the foundation has many functions," said Josephson, "the primary function is education. Education of the patients. Education of the physicians. Education of the hospitals. I am proposing that in today's world, your best consumer is an educated consumer. I think that if we could educate people we could improve people's quality of life."

"Everyone is a winner in SNIF," Barry Sheehy, a sinus disease sufferer and member of the board of SNIF, told *The Herald*. "The patients win because they will have somewhere to go for information and support. And hopefully they will use this information to become better partners in their own treatment, thus improving outcomes and lowering costs."

As a consultant to various Fortune 500 companies, Sheehy knows the value of healthier employees at lower cost to the employer.

The medical community would also benefit from improved results and from having a platform for dialogue with both patients and other medical professionals. The pharmaceutical industry will also benefit mightily from the access SNIF provides to both clinicians and patients through conferences and on its web site.

Need Access

"The opportunity to educate consumers and medical practitioners on various treatments and medications will be invaluable to any provider of equipment or therapies related to sinus or respiratory ailments," said Sheehy.

He also explained that patients need access not just to medical information support, but also education around a host of related subjects covering everything from air purifiers to hypo allergenic carpets.

Sheehy continued, "Payers, insurance companies and self-insured employers, state and federal government agencies, all benefit when outcomes improve and costs are reduced as a result. The money involved is so huge that we only need a small improvement in outcomes to generate hundreds of millions in savings."

"As a long-time sinus sufferer," said Sheehy, "I applaud the prospect of a truly customer-centric and cross-functional center where sinus, allergy and asthmatic sufferers can go for information and support. What makes SNIF so exciting is that it puts the patient at the center of the process."

But to get SNIF in full operation, Josephson said, "Barriers must come down among the various disciplines. It is very fragmented. We've got it to the point where these guys are now willing to work together."