Are medications from an online pharmacy as safe as those from your local pharmacy? How do language barriers relate to hospital readmission? Read these stories and more.

Online Buyer Beware

You can buy anything online, even prescription drugs, but when you don't know who is filling your prescription or where the drugs are coming from, you could be taking a big risk. Charles Seifert, PharmD, a pharmacist and toxicology expert at Texas Tech University Health Sciences Center, told the Lubbock Avalanche-Journal that it's **important to order from a registered online pharmacy in the United States** and to know how to recognize counterfeit drugs.

“If they don't require a prescription, that should be a big red flag that something's wrong,” he said. Although a drug might be cheaper or more convenient when you buy them online, you might get a fake or look-alike drug; it's hard to tell where drugs purchased from outside the United States were manufactured and even what is in them, especially if you order from an illegal or unknown website that follows different standards or isn't regulated at all. For example, drugs sourced from Mexico may be counterfeits produced by drug cartels and contain dangerous amounts of controlled substances, like fentanyl or methamphetamine. Conversely, all U.S. drug manufacturers provide the Food and Drug Administration (FDA) with a unique identifier for their products, which can all be tracked through wholesalers who distribute them to pharmacies throughout the country.

It is much safer to go with a pharmacy on the FDA's approved list, and to carefully review your prescription medications and those of older loved ones to make sure they are correct. “If you just blindly take drugs, it can have serious consequences,” Seifert said.

*Source: Lubbock Avalanche-Journal*
Patient Perspective — Lost in Translation

We know that language barriers are a challenge in healthcare, making it difficult for non-English-speaking patients to communicate with their providers—increasing their risk for longer hospitalization, infections, and falls. However, a new study by Allison Squires, PhD, et al. indicates that language barriers also have a negative impact on patients receiving care in their own homes.

In analyzing electronic health records of 87,000 New York City patients receiving home healthcare following a hospital stay, researchers found that those who spoke a language other than English had a 20.4% hospital readmission rate within 30 days compared to an 18.5% rate for patients who spoke English. Spanish and Russian speakers were at a higher risk than those who favored Chinese and Korean. The reasons for this disparity with English-speakers include greater difficulty in applying interpreting services outside of the hospital setting, due to the lack of internet access or phones in many patients’ homes.

Providing better care transitions and translation options, for example with home care providers who speak the patient’s preferred language, could help close this communication gap and consequently decrease the number of hospital readmissions. 
Source: NYU

Mental Health — Improving Maternal Mental Health

Although many are aware of the dangers of postpartum depression, still not enough is being done to support new mothers not only following childbirth, but also during pregnancy. Sarah Barnes, project director of the Maternal Health Initiative, says that 15–20% of women worldwide suffer from perinatal mental health conditions. However, 75% of them never receive the care they need, according to Neerja Chowdhary of the World Health Organization (WHO).

Some perinatal mental health conditions might manifest as feelings of guilt, shame, and worthlessness, and if they go untreated, the results could be dangerous for mom: Women are at their highest lifetime risk for anxiety and depression in the first year after giving birth, a time when suicide and overdose are the leading causes of death. There also could be serious consequences on the long-term mental health and development of their children.

To address this problem, which has only been compounded by the pandemic, we need to talk more about maternal mental health rather than ignore it. Healthcare providers need to focus on early identification, prevention, and treatment, and help develop community support systems for mothers—and co-parents. Some currently available resources include the WHO Mental Health Gap Action Programme (mhGAP) Guideline for Mental, Neurological and Substance Use Disorders, and INSPIRE (Involve Others; Nourishment and Exercise; Spirituality and Prayer; Patience, Identify and Initiate Change; Rest and Relaxation; and Each Day is a New Day to Start Again) Method training.

Source: New Security Beat
Long-Term Care — A New Lease on Home Life

*Although many patients might prefer to receive care in their own home rather than a long-term care facility,* if they rely on Medicaid, that simply wasn't an affordable option—until now. The recently introduced American Rescue Plan *allocates funds to states to expand home and community-based services*, which will allow patients to stay where they're most comfortable and be cared for by family members or other providers they trust. And this federal funding also may be able to cover additional benefits that Medicaid doesn't, such as internet connectivity, giving patients greater access to telehealth.

While the new financial support gives the home care model a big boost, to the tune of $12.7 billion dollars, it's limited to only a year; however, the budget bill Congress is currently working out will hopefully make it permanent.

*Source: NPR*

Surgery — A Pig Step in Organ Transplantation

*For the first time, surgeons successfully attached a pig’s kidney to a human body with no signs of rejection*, representing a milestone in transplanting animal organs to human patients.

The team at NYU Langone Transplant Institute performed this experimental procedure using a kidney donated from a pig that was genetically modified with human genes, to reduce the likelihood of graft rejection. They attached the kidney to blood vessels in a deceased patient on a ventilator and observed that it functioned normally for 54 hours. While this is a promising first step, much more research and experimentation will be needed to study the long-term effects, such as risk of infection, before “xenotransplantation” of nonhuman organs into humans is a viable alternative to using human organs—which always are in short supply.

According to the Centers for Disease Control and Prevention, around 75,000 people on the transplant waiting list every day, but only 8,000 deceased organ donors are available each year. As studies on pig organ donation continue, it's important for everyone to register as an organ donor to help save lives.

*Source: Healthline*
Infection Prevention — Stopping the Spread at Home

The pandemic has given many of us a crash course in basic infection prevention; however, stopping the spread of diseases at home involves more than just washing hands. Knowing how to prevent and control infections is important, whether you're bringing home a newborn or caring for a sick family member—or yourself.

Kathy Dempsey, RN, chief of Infection Prevention and Control and healthcare-associated infections advisor at the Clinical Excellence Commission in New South Wales, Australia, told Hospital + Healthcare, “Homes can introduce new risks that aren't as prevalent in hospitals—pets, shared washing and eating facilities, and reduced medical surveillance, for example.” While it may be easier to isolate sick people from others at home, you still must be vigilant about understanding how viruses spread and take precautions, like disinfecting surfaces.

And while some people believe that exposure to microbes early in life can be beneficial to the immune system, when a serious infection like chicken pox or COVID-19 is introduced to your environment, you must make every effort to protect unvaccinated individuals from getting sick.

Source: Hospital + Healthcare
General Interest — Short on Nurses—and Schools to Train Them

This is one of the toughest times ever to be a nurse, and one of the toughest times to become one. Since before the pandemic, there have not been enough nursing teachers, due in part to the advanced degree requirements and much lower pay compared to clinical nurses. Much of the U.S. nursing faculty is also reaching retirement age—and compounding all these factors, the pandemic prompted some nurse educators to switch to better-paying jobs. Meanwhile, there aren’t enough nurses to fill hospitals’ needs, particularly in acute care, particularly in COVID times.

And yet, the number of people applying to nursing schools has also been increasing, but they are all competing for the same, few slots in training programs which have also been dwindling—along with opportunities for clinical experience—in order to reduce the risk of infection. According to the American Association of Colleges of Nursing, more than 80,000 prospective students were turned away last year, qualified applicants who could otherwise have helped meet this shortfall of clinical staff. Still another barrier to potential nurses of tomorrow: the financial strain of attending a nursing degree program.

The need for more nurses is urgent enough that hospitals are eagerly hiring new graduates, sometimes before they even graduate and with offers of bonuses and incentives. They are also making scholarships available, providing loan repayment, and working with nursing schools to expand their faculty by offering nursing staff time off to teach—whatever it takes to ensure that anyone who wants to be a nurse has the chance to follow their calling.

Source: NPR