

THE PREPARED PATIENT

Do You Need a Yearly Check-Up?

We've all heard about well-baby visits, but if you're a healthy adult, you probably have no plan to see a doctor. When there's nothing to complain about, many of us go years without a comprehensive medical check-up.

John Biersmith feels healthy and hasn't seen a doctor "just because" for more than five years.

"I may have a 40-year-old guy come in and he's doing well, he has no risk factors, all his family members have lived to 108. He's a perfect weight, he eats well, I'm not going to tell him to come back in next year for a physical," he said. "I'll say 'Hey, why don't I see you back here in five years.'" - *Dr. Thomas Weida*

The 36-year-old is a regional manager for a toy manufacturer and has health insurance through work. Biersmith goes to the dentist without fail every six months but hasn't felt a similar need to check in with his physician.

"I probably should schedule an appointment, but I'm a little hesitant about what he's going to ask, about how I eat, whether or not I exercise," Biersmith said.

Does he really need a yearly check-up? Do you?

"There isn't a one-size-fits-all recommendation," says Dr. Christine Sinsky, an internist at Iowa's Medical Associates Clinic and Health Plan. Sinsky considers a patient's sex, age, medical history and risk factors before setting up an exam schedule.

Dr. Thomas Weida, a family physician with the Hershey Medical Center in Pennsylvania, weighs similar factors.

"I may have a 40-year-old guy come in and he's doing well, he has no risk factors, all his family members have lived to 108. He's a perfect weight, he eats well, I'm not going to tell him to come back in next year for a physical," he said. "I'll say 'Hey, why don't I see you back here in five years. There's some age appropriate screenings that we'll need to do at that age. Come on in and we'll see how you are doing then.'"

Weida says the need for a regular check-up grows with age.

Check Ups or Not? Guidelines for Healthy Adults

Too Young for Yearly Check-Ups

You're in your 20s or 30s and feel fine. However, women this age should get regular Pap smears and breast exams.

Time to Start Building a Medical "Home Base"

You're 40 and fit but need to learn about timing for preventive tests OR you have a family history of chronic disease (cancer, diabetes, heart problems).

Routine Maintenance Is Called For

You've hit your 50th birthday or you struggle with health risk factors (overweight, smoking) at any age.

"I think 50 is a real watershed year for folks. Certainly if they haven't established a personal medical home by that age they really should because it is so important in coordinating their care, and helping them enjoy the next 50 years of their life," he said.

An initial physical can be a good way to find a "personal health home," a central point for consistent, integrated health care.

But when patients call asking for an annual check-up, Weida says, they have wide-ranging notions about what the preventive health exam visit will include.

"I tend to look at that as being a good, detailed history, a review of systems, a social history, past medical history and family history, doing a good nose-to-toes exam, and then age-appropriate screening and blood work," he said. Dr. Robert Centor, a general internist and researcher at the University of Alabama School of Medicine, said even doctors can be confused about what a check-up should entail.

"I structure my entire practice around the annual examination. It is when I address prevention, coach patients on healthy lifestyles and do the annual review of each chronic medical condition." - *Dr. Christine Sinsky*

The recommendations from the U. S. Preventive Services Task Force are very conservative, according to Centor, while advocacy groups like the American Cancer Society set more aggressive guidelines. "As usual, family doctors and general internists are caught in the middle," he said.

There's even less consensus about how frequent these "periodic" exams should be, especially since different preventive health screenings are recommended at different ages.

It's difficult to say what's routine, Centor said, because so many people end up with some sort of health issue that should be followed by a physician. "As soon as you have medical problems, it's no longer routine, even for something like hypertension," he said.

While a specialist might focus on a specific problem, Sinsky says a family physician takes a global perspective on a patient's care, balancing the risks and benefits of competing conditions and therapies.

"I structure my entire practice around the annual examination. It is when I address prevention, coach patients on healthy lifestyles and do the annual review of each chronic medical condition," she said.

That kind of check-in and coaching can take 30 to 45 minutes, or even longer if a patient is new. The extra attention often costs. Many patients have to foot the bill for a comprehensive, every-year check-up because health insurance coverage varies greatly.

In 2005, the federal government added a "Welcome to Medicare" physical exam to its program. It's an opportunity for beneficiaries to receive health education, recommended screenings and shots. But the exam is a one-time benefit and has to be completed within the first six months after someone becomes a Medicare recipient -- and opts into and pays for part B. Sinsky says Medicare members need more frequent monitoring.

Paying for an annual exam would be "the single most important step" that Medicare could take to improve care quality and lower costs, she said.

The cost of annual check-ups costs could be reduced if doctors and their patients could be persuaded to do away with urinalysis, electrocardiograms and x-rays in periodic health exams — three tests that are not recommended by the U.S. Preventive Services Task Force.

Dr. Allan Prochazka, a University of Colorado physician, says many doctors like the annual exam because it relieves

the time crunch of a typical 15-minute office visit. “They can deal with preventive issues in a time that’s not pressurized by, let’s say, the care of a sprained ankle,” he said.

Dr. Daniel Reinhardt, a New York physician, says annual check-ups can also build trust between patient and doctor. Over time, brief, regular discussions about things like weight gain, smoking and stress can have significant influence, he said. “We know a lot about what’s best for people, but getting them to do it is a major hurdle,” Reinhardt said.

Ultimately, patients have to decide what they want out of a periodic exam. “‘Necessary’ is a difficult word to apply to annual physicals,” Reinhardt said. “I tell them that they’re part of standard care, that they stand to gain more than

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they lose, and that I recommend them. I then leave the decision to them.”

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