Using a home blood pressure monitor and transmitting the readings to a pharmacist may be an effective way to control hypertension, a condition that affects approximately 30 percent of adults in the United States and costs more than $50 billion annually.

Those were the findings of a study led by Karen Margolis, M.D., M.P.H., director of clinical research at HealthPartners Institute for Education and Research in Bloomington.

The randomized clinical trial involved 450 patients with uncontrolled hypertension from 16 primary care clinics in the HealthPartners system. The patients included individuals with severe uncontrolled hypertension as well as other medical conditions including diabetes, kidney disease and heart disease.

Patients in eight clinics (n=228) received home blood pressure telemonitors that transmitted readings to pharmacists, who could then adjust their medications as needed over the phone. Patients in the other eight clinics (n=222) received usual care.

 Patients used the intervention for 12 months and were followed for six months afterward. Their blood pressure was assessed at six, 12 and 18 months.

Margolis and her team found about twice as many patients in the telemonitoring program (57.2 percent) as in the control group (30.0 percent) had controlled blood pressure at six and 12 months. More than 70 percent of the telemonitoring patients had controlled blood pressure at six, 12 and 18 months. At the 18-month follow-up visit, 71.8 percent of those in the telemonitoring program had their blood pressure under control compared with 57.1 percent of those in the control group.

The study was a follow-up to earlier tests of a similar approach that did not include patients with other conditions or a follow-up visit.

The findings were published in the July 3 Journal of the American Medical Association.

New manual on social media

A new book Social Media in Clinical Practice provides practical advice for physicians seeking to become social media savvy. In an online interview in MedPage Today, author Bertalan Meskó says he wrote the book to get doctors up to speed on the topic. When asked why he wrote a book instead of developed an e-learning platform, he said because physicians “stick with the traditional way of learning new things.”

In the book, Meskó explains how to do such things as podcasting, blogging and tweeting and provides information about how to use apps, Facebook and Google. He also addresses the No. 1 concern for many physicians—privacy.

Meskó believes doctors need to use social media. “Using digital technologies, especially social media, is now an integral part of medical communication, and as more and more patients use these platforms, their physicians must be able to deal with this in an evidence-based manner,” he said in the interview.
The vanishing Rx pad

The physician’s prescription pad is becoming a thing of the past.

According to Surescripts, an e-prescribing network used by more than 95 percent of pharmacies in the United States, 69 percent of U.S. office-based physicians prescribed electronically in 2012—up from 58 percent in 2011 and 10 percent in 2008. Eighty-seven percent of e-prescriptions were sent through an electronic health record system and 13 percent were sent through a stand-alone prescribing system.

One reason for the increase in e-prescribing was the fact that 93 percent of community pharmacies now accept electronic prescriptions (98 percent of chain pharmacies and 85 percent of independent drug stores use them).

Minnesota ranked second in the country in terms of its progress in adopting e-prescribing. The study found 95 percent of physicians in the state were e-prescribing, up from 49 percent in 2010.