

Testimony to
Maine Joint Standing Committee on Health and Human Services
Augusta
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Sam Zager, MD, M.Phil

Thank you, Senator Brakey, Representative Hymanson, and other committee members.

I am a Maine-trained family physician practicing at Martin's Point in Portland. I see daily the value of (1) preventing problems entirely, and (2) reducing established problems' ripple-effects. Public health nurses can greatly aid both types of prevention, so I support LD 1108.

Prenatal care and early childhood interventions pay the biggest dividends in terms of health outcomes and cost-effectiveness.

Last week, I was scheduled to see a 2½ month-old girl I'll call "Amelia." Amelia was born in January, the second child of a 24-year old woman who dropped out of high school, had a baby, and now works a minimum wage job. After one visit, I grew concerned about both the mother's substance abuse and history of post-partum depression. Two subsequent appointments were no-shows, but we could not reach them.

We requested a public health nurse make a home visit, but were told none were available. Since 2011, the number of PHNs serving the Portland area was reduced from 8 to 3. Statewide, it has fallen from 50+ to twenty-something. Without adequate funding -- and efficient systems and tools -- PHNs can't help young Mainers like Amelia get the start they deserve in life.

Another crucial function of PHNs is infectious disease prevention. Tuberculosis is a dreadful, highly-contagious disease, and multi-drug-resistant TB has been gaining a foothold. Keeping isolated cases from becoming an epidemic has to be our strategy. This requires identifying cases and ensuring completion of the many-months long antibiotic regimen, and PHNs have proven themselves effective. A University of Massachusetts study demonstrated that public health nurses increased completion rate of this treatment course from 32 to 100%.

And what about Influenza? Data from the maine.gov website show that half of the state's deaths from the 1918 epidemic were among working and parenting-age young adults ages 20-40. Maine's cities *and* rural areas were all hit. Aroostook County had the highest reported death rate in Maine.

Fortunately, we now have a flu vaccine, but the ability to *deliver* that vaccine in a crisis rests largely with PHNs. The Emergency Preparedness Team can stand up a rapid immunization network, as well as respond to natural and human-caused disasters.

We cannot rely on the primary care infrastructure to deliver what the *Public Health* infrastructure has delivered for so many decades. After all, so many younger, poorer, and recently-arrived adults are minimally connected to the health system.

I hope this legislature will *favor* and *refine* LD 1108, to improve the funding and efficiency of Maine's Public Health Nursing Program.

Thank you.

The Parable of the Two Doctors

Two doctors meet for a daily riverside walk. One day, floating past was a victim in the throes of drowning. Without missing a beat, the first doctor jumped in and brought the victim ashore; she saved a life.

The next day, strangely, the same thing happened. A second drowning victim drifted down the river, and a second time, the first doctor made a daring rescue. After she and the victim were again ashore and safe, she noticed her colleague was starting to walk away.

"Where are you going?" she wondered, as she tended to the victim.

He replied, "I'm heading upriver to see if we can do anything about why people keep falling in."
