
Health-Care Dollars Go Up in Smoke

by Danielle Wuchenich

Historically the moral bases of the Adventist health message have been belief in a personal Creator and recognition of the human body as the temple of the Holy Spirit. Little if any discussion focused on the moral issues raised by the economics of disease and injury.

Enormous sums of money—about \$355 billion last year—are being spent on diseases, illnesses and injuries. Consumers want lower costs without sacrificing excellent care. However, reducing overall expenditure intensifies the competition for a portion of the shrinking health-care dollars with treatment, prevention, research, education, technology and administration all vying for funding.

Unfortunately, most of the discussion of late centers on reducing costs. But even if we do limit patient access, cap provider fees, tax employee health benefits, increase insurance deductibles and trim government-sponsored programs, we do not necessarily reduce the amount of ill health. In fact, we may increase it. Some of these proposals might act as barriers to access and dis-

courage patients from seeking treatment during the early stages of the disease, illness or injury when the prognosis is more optimistic and the cost less.

This approach to reducing costs puts the cart before the horse. Reducing costs will not reduce injury, illness or disease. However, reducing or preventing illness, disease and injury will reduce costs. At issue is whether we should spend billions of dollars to treat preventable diseases, illnesses and injuries while neglecting medical research and education, technological development and the

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treatment of nonpreventable diseases.

This point was unwittingly made by a political cartoon published by the *San Jose Mercury News* when the world's attention was focused on Baby Fae and the thousands of starving Ethiopian children. The one-frame cartoon showed a map of the world. On the left-hand side of the cartoon, a gravestone planted in Southern California

Danielle Wuchenich practices law in Cupertino, California. A graduate of Andrews University, she received her law degree from Boston University and a Master of Public Health from Harvard University. This essay is adapted from a presentation at the first national conference sponsored by the Ethics Center at Loma Linda University, April 1985.

stated "Here lies Baby Fae. The child \$2 million of medical technology couldn't save." On the right-hand side, a gravestone planted in East Africa stated "Here lie Baby Ethiopians. The children \$2 million worth of food could have saved." The cartoon seemed to favor squelching medical research in an effort to save starving children.

The cartoon did not show a gravestone advising us that the \$60 billion we spend annually on tobacco causes 350,000 premature deaths a year. Nor did it mention that we spend \$66.4 billion a year on alcohol, resulting in 27,300 deaths each year in alcohol-related accidents. The cartoon failed to comment on the \$30 billion we spend on soft drinks and the \$8 billion we spend on candy, on Coca Cola's decision to spend \$70 million during 1985 in advertising to promote its new Coke, or on Pepsi's advertising budget of \$50 million for its flagship brand.

Thirteen health problems account for about 80 percent of American deaths. The four leading causes of mortality are heart disease, cancer, stroke and motor vehicle accidents. All of these are linked to controllable factors such as smoking; alcohol consumption; lack of exercise; overeating; and high fat, caffeine and salt diets.

For example, the National Cancer Institute estimates that 29,000 colon cancer deaths could be eliminated every year if we increased the amount of fiber in our diet and reduced our fat intake. The surgeon general commented in his 1984 report that "cigarette smoking is the chief single avoidable cause of death in our society and the most important public health issue of our time." In addition, a recent study revealed that 65 percent of fatal auto accidents in 1983 were alcohol-related. This translated to 27,300 fatalities, or 75 preventable deaths per day.

About 10 percent of health-care expenditures, or \$35 billion a year, is spent on dental care. Dental caries (cavities), the most common disease in the United States, are primarily caused by sugar. If a small cavity is not treated promptly (at a cost of \$35 to

\$50), repair of the tooth in an advanced stage of deterioration could cost close to \$1,000 for root canal therapy, post and crown. Regular brushing, flossing and professional cleaning of the teeth reduce the risk of cavities and periodontal (gum) disease, the major cause of tooth loss after age 35. Expensive replacements of missing teeth such as bridges, partials and dentures are not nearly as efficient as natural teeth and can lead to other health problems.

These are only a few of the statistics regarding self-induced illnesses, diseases and

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injuries, which cost the American public billions of dollars to cure. Yet we blame everybody but ourselves for the high cost of health care. We criticize medical research for spending \$2 million, yet spend \$8 billion on candy. We complain about spending \$355 billion on health care, but think nothing of spending an amount equivalent to half the health-care bill on alcohol, tobacco, soft drinks and snack foods, all of which contribute to ill health.

Before threatening to stifle research and technology, and to create a two-class system of health care because of high medical costs, we should reduce the costs of preventable problems. Moral issues are raised when we decide we cannot afford to treat patients with congenital heart defects, but continue to spend billions of dollars trying to reverse the ill effects of alcohol and tobacco.

If Adventists have not been effective in changing people's health habits based on religious tenets, perhaps we need to become

politically involved in initiating economic incentives to live healthfully.

We could lobby for an additional tax on tobacco with the extra money subsidizing the health-care costs associated with smoking. A Federal Trade Commission study found that when the federal excise tax was raised from 8 to 16 cents per pack of cigarettes, the volume of cigarettes sold fell 8 percent. The year before the tax was

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imposed, the decline had been 1 percent. Teenagers are particularly sensitive to a price increase. For every 10 percent increase in price, there is a 14 percent decrease in consumption by youth.

We could also lobby for a similar luxury tax on alcohol. Some auto insurance companies already give a non-smoker's discount on auto insurance premiums. Why not lobby for a non-drinker's discount?

President Reagan's proposed tax plan eliminates property tax deductions. Why not eliminate alcohol and tobacco companies' deductions for advertising their products?

We could encourage employers to provide dental insurance plans that give incentives to the insured to visit the dentist regularly by not applying a deductible to preventive

services such as examinations, cleanings and diagnostic X-rays.

We could push for health education as part of every local school's preschool through high school curriculum. Vending machines containing high-fat or high-sugar foods and beverages could be removed from school property; cafeterias could serve healthful, attractive and palatable meals.

Health-conscious people could become actively involved in promoting employee-wellness programs. Exercise rooms could be made available. Cafeterias and vending machines could stock healthful foods.

I am not suggesting that we support legislation to abolish detrimental products and services. However, I propose that we not encourage the use of certain products by financially supporting them with government subsidies, tax deductions or insurance premiums. We cannot have the luxury of abusing our bodies indiscriminately and expecting someone else—the provider, insurer and/or government—to pick up the tab for getting us back into shape. We can no longer afford to rob limited health-care funds needed for treatment of unpreventable disease, education and research, using them to support our lazy or undisciplined habits.

To maintain our high standards of health care, we must work to eliminate any illness, disease and injury that needlessly consumes our limited funds. Given the overwhelming evidence that prevention will reduce health-care costs, it seems odd that individuals are not held responsible for their own health. Current policies are forcing providers, insurers and suppliers to be financially responsible. It is time that we require the same of ourselves.