California and National News

Redding Hospital's Cardiac Surgery Scandal Revisited in Book: Coronary: A True Story of Medicine Gone Awry, written by Stephen Klaidman (former editor and reporter for the New York Times and Washington Post, and research fellow at Georgetown University's Kennedy Institute of Ethics), recants an outrageously unethical series of events that occurred in Redding, California, within this past decade. The events took place at the Redding Medical Center, at that time part of Tenet Healthcare Corporation, which since has paid over \$300,000 to settle lawsuits from patients of Chae Hyun Moon, a cardiologist, and Fidel Realyvasquez, cardiac surgeon. Basically, patients said they were coerced by Moon to have cardiac surgery performed by Realyvasquez, claiming that standards for surgery were not met and that the surgeries were unnecessary. No criminal prosecution followed, but the reason for this is not delineated (neither physician is believed to be practicing currently). Tenet has since sold the hospital, but allegations against Tenet are reminiscent of other charges made against the corporation on numerous occasions, reflecting efforts to achieve profits unlawfully and overarching corporate greed. Tenet had required its executives to produce revenue to exceed Wall Street projections, and with the help of the monies generated by RMC, among others, Tenet's stock price, indeed, ballooned. As our CSA Legislative Counsel succinctly stated, "Tenet's role is an object lesson in the need for the bar against the corporate practice of medicine." (Adapted from an article written by Jonathan Curiel, from his article in the February 18, 2007, San Francisco Chronicle.)

Mortality Associated with Aprotinin During Five Years Following **CABG Surgery:** Dennis Mangano, M.D., Ph.D., and colleagues reported that, in addition to the previously reported (2006, also by Mangano and associates) acute renal and vascular safety concerns, aprotinin (an antifibrinolytic serine protease inhibitor) use is associated with an elevated risk of long-term mortality following CABG surgery. These authors concluded that aprotinin use for CABG surgery patients "does not appear prudent because safer and less expensive alternatives (aminocaproic acid and tanexamic acid) are available." Aprotinin had first been approved in the U.S. in 1993 for use in high-risk patients needing CABG surgery. Even though the original FDA approval had observed renal toxicity, the highly aggressive marketing of aprotinin by the manufacturer had skyrocketed its use. In fact, of the 600,000 patients receiving aprotinin worldwide in 2005, 246,000 were in the United States. The 2006 Mangano study also had raised concerns regarding the association of aprotinin with cardiovascular and cerebrovascular events. Since then, other reports had reached similar conclusions, and a series of case studies indicated disproportionate in-hospital deaths due to pulmonary vascular thromboses. Nonetheless, regulatory and other reviews claimed that the adverse outcomes were transitory and not ones of long-term sequelae. Mangano's 2007 study

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disproves those conclusions and certainly is confirmatory of the considerable evidence that had accumulated regarding acute coronary graft occlusion that could become clinically manifest over months to years, long after hospital discharge. The larger issue of adequacy of postmarket surveillance and safety evaluation of drugs and devices in the current medical environment is raised by this study. Dr. Mangano (former professor at UCSF Department of Anesthesiology), and several of his co-authors are affiliated with the Ischemia Research and Education Foundation in San Bruno, California. (*From JAMA*, *February 7*, 2007, *Volume 297*, pp. 471-479.)

Governor's Friends Put Chiropractic Board Out of Whack: Governor Schwarzenegger's recent appointment of two friends from his bodybuilding days to the Board of Chiropractic Examiners may have him a bit out of joint these days. Shortly after taking office, and finally enabling the 7-member Board to convene a quorum, the two led what some termed a "coup." At a March 1st meeting the newly constituted Board fired its Executive Director, ejected the Deputy Attorney General (assigned under state law as counsel to the Board) and approved a resolution supporting manipulation under anesthesia (MUA) as part of the chiropractic scope of practice. No matter that state law requires prior notice of such a firing or that a Board approved regulation allowing chiropractic MUA was rejected by the Office of Administrative Law in 2005. For good measure, the new Board chair, who launched the Governor's bodybuilding career in 1968, was named "Interim Executive Director." The Governor added fuel to the fire when he declared that "the Chiropractic Board represents the chiropractors ... each Board represents their profession." Indeed, according to the Center for Public Interest Law, this "represents a fundamental misunderstanding of these boards [which exist] to regulate the chiropractic profession in the public interest, not in the interest of the chiropractic profession." (The Board was established under an Initiative Act passed in 1922 which also authorized and defined the practice of chiropractic. The Board's official Mission Statement is to protect Californians from fraudulent or incompetent practice, examine applicants for licensure and enforce the Chiropractic Initiative Act and regulate chiropractic practice.) In less than three weeks the Governor's friend, now the Board's chairman, was forced to quit his (second) post as Executive Director when the Governor's lawyers declared that holding the two positions simultaneously probably was illegal. The fired Executive Director accused the Board of attempting to undermine a criminal prosecution of several chiropractors (for MUA) in San Joaquin County and interfering with disciplinary actions against members of the chiropractic profession. Moreover, both the Assembly and Senate are scrutinizing the Board's performance and its \$3 million annual budget. With friends like the two appointees, the Governor may face some heavy lifting.

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