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Professional Issues

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MARK BLACKWOOD, MD, sent his pregnant patients elsewhere until a short-term insurance fix let the OB deliver again.

Cleveland, Miss. IT'S 10 A.M. ON A Monday and the magazines in the office shared by obstetrician-gynecologists Mark Blackwood, MD, and Bradley Baugh, MD, are still neatly fanned out on waiting room tables.

The cushioned chairs sit empty. No one stands in the hallway waiting to call patients in, The five examining rooms are vacant.

A steady stream of patients — some visibly pregnant, others bare-

ly showing — does come out of the sweltering 90plus heat and into the air-conditioned office. But they don't stay long. And they don't see their doctors.

Instead, they grab a copy of their medical records or drop off instructions for where they should be sent.

A letter posted to the large wooden front doors leading into Delta Ob/Gyn explains it all: "It is with much regret that we must inform you that our office will be closed effective 7/14/02 until further notice. Due to the current malpractice crisis in the state of Mississippi, our liability insurance has been canceled."

ACCEPTING NO DELIVERIES

When medical liability insurance drives physicians out of rural Mississippi, pregnant women are left feeling the pain.

STORY BY TANYA ALBERT / PHOTOS BY STEVE JONES

"I feel real bad for my patients because they need me," said Dr. Blackwood, days after he and his partner had to stop seeing patients. "Their access to care has been compromised."

The scene has been repeated in OB waiting rooms across the state.

In the past year, more than half of physicians who deliver babies in an area of the Mississippi Delta that spans from Clarksdale in the north to Greenville in the southwest and Greenwood in the southeast have had to quit. Cleveland falls in the center of that triangle, roughly 45 miles from its surrounding cities. Drs. Blackwood and Baugh's temporary departure left no OBs in Cleveland. One family physician continues to deliver babies at the local hospital, which is walking distance from the Delta Ob/Gyn office.

Women who used to walk or make a short drive for both prenatal visits and delivery now face a 45minute drive.

That's too far, said Dr. Blackwood, who worries about patients who experience complications on

the way to the hospital.

Doctors also worry that patients without a car won't get prenatal care if they aren't within walking distance of a doctor. "The patient is the big loser here," said Greenwood ob-gyn Terry McMillin, MD. He couldn't find liability insurance either. His last day of practice was Aug. 2.

More stress for moms-to-be

NEWS THAT DR. BLACKWOOD WOULDN'T BE able to deliver their first baby put Ambur and Brian Peterson through the emotional wringer. Dr. Blackwood closed his office just weeks before **Continued on next page**

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her due date.

She had already envisioned driving to the hospital 10 minutes from home. She was comfortable with Drs. Blackwood and Baugh. "Now I have to rethink the game plan and the star players," Peterson said.

The Idaho native called other women she met since moving to Mississippi less than a year ago and got some referrals.

She set up appointments with three physicians still delivering babies. One doctor was an OB in Clarksdale, another was an OB in Indianola — each about a 45minute drive. A third appointment was with the Cleveland family physician still delivering babies.

"What do we do?" Peterson asked. "It's shell-shocking. I'm getting familiar with this community, but I felt completely lost."

She chose Clarksdale ob-gyn Bo Marley, MD, to be her new obstetrician and mentally prepared herself for the drive she faced when she went into labor.

"If we stayed in Idaho we would have had a 30-minute drive to the hospital," Peterson reasoned.

Across town, Carol Roark started making similar mental preparations.

Unlike Peterson, though, Roark went into labor on July 12 — two days before Dr. Blackwood closed his office — and gave birth to a 6-pound, 6-ounce girl.

"The scariest thing was that the baby wouldn't come before the weekend and Dr. Blackwood wouldn't be able to be there," Roark said.

Little margin for losing physicians

PHYSICIANS SAY PATIENTS' FEARS AREN'T unfounded.

"A state like Mississippi ... is a place where we see lives being affected now as opposed to some point in the future," said Albert Strunk, MD, vice president of fellowship activities for the American College of Obstetricians and Gynecologists.

Earlier this year, ACOG recognized Mississippi as one of the nine "hot states" where a liability insurance crisis threatens physicians' ability to deliver babies.

And although the departure of more than half of the state's physicians would be a challenge anywhere, it's a particularly huge problem in Mississippi. The state is already considered underserved.

Mississippi ranks 50 out of 51 in the nation for the number of physicians per 100,000 people, according to the American Medical Association. Only Idaho has a lower ratio.

There were 152 practicing physicians per 100,000 people in Mississippi in 2000, according to the AMA statistics — well below the national average of 230 practicing physicians per 100,000 patients. There are even fewer doctors in the Delta.

"It was in dire need already and when you put on top of that the insurance crisis, it's an added burden," said AMA Board Chair J. Edward Hill,

MD, a family physician from Tupelo, Miss., who started his career in the Mississippi Delta and spent 27 years there. "It's a real tragedy. Shortly we're going to see the access problems become a loss-oflife problem."

Mississippi State Medical Assn. past president, Hugh Gamble, MD, a thoracic surgeon, has similar fears. "We don't have the reserves to keep plugging the holes. Literally every week that goes by, we find another doctor's office or another hospital in trouble."

The state is on pace to have 10% fewer physicians at the end of the year than it did in 2001. The medical liability climate has made it nearly impossible to recruit new physicians to fill the vacancies, physicians say. The AMA in June listed Mississippi as one of 12 states in the midst of a liability crisis.



AMBUR PETERSON began lobbying for tort reform after her OB halted practice weeks before her due date. The doctor got emergency insurance and delivered her son. But the experience left Peterson continuing to seek real changes.

Most neurosurgeons, emergency physicians and general surgeons in the state struggle to find insurance. There are not enough neurosurgeons or surgeons north of Jackson to adequately serve trauma patients. On the Gulf Coast, only two neurosurgeons remain to cover seven facilities, according to an MSMA spokeswoman. Just this spring there were six.

The shortage has already resulted in delayed care for some car crash victims. And obstetricians worry about what is going to happen to their patients who face longer trips to the hospital while already in labor.

"If a woman develops an OB emergency and is 45 minutes away, a lot can happen in those 45 minutes," said Dr. Marley, one of five OBs at the Women's Clinic in Clarksdale who has been able to keep his insurance.

Help on the way?

WHILE PHYSICIANS AND PATIENTS COPE WITH the current situation, an appointed panel of Mississippi representatives and senators held hearings on civil justice reform this summer.

They heard from doctors, insurers, lawyers and others around the state. Physicians believe Mississippi's legal climate — especially out-ofcontrol jury verdicts — is to blame for exploding medical liability insurance costs. Lawyers disagree on this point. Mississippi Gov. Ronnie Musgrove was expected to call a special session because the Legislature otherwise wouldn't



BO MARLEY, MD (LEFT) and Charles Cesare, MD, were able to get insurance, but for many of their new patients, the drive to The Woman's Clinic is long and potentially dangerous.

Lost in Delta Triangle

During the past year, more than half of the physicians delivering babies in part of the Mississippi Delta had to stop because they couldn't afford — or couldn't get — liability insurance. For many communities, that means fewer physicians offering obstetric services.



* TWO OF THESE PHYSICIANS CLOSED FOR 10 DAYS IN JULY, BUT RECEIVED INSURANCE THROUGH THE END OF THE YEAR. ** ONE PHYSICIAN CAN'T ACCEPT HIGH-RISK PATIENTS

convene until January 2003.

The state's physicians hope legislators can help bring relief through tort reform. They say it is very difficult to watch the health care system they built over the past 30 vears deteriorate.

"The damage done ... in the past six months will take us five years to repair and get back to where we were," said Dr. Gamble, who had seen the Delta's health care system improve during his career. "If it's like this another six months, it will probably take us another 10 years."

"Health care in the Delta has taken a huge step backward," added Dr. Marley, who said he has also witnessed improvements in his 23 years.

But some physicians are leery.

"I don't have a lot of hope it's going to get better. I really don't," said Bay Springs, Miss., family physician A. Keith Lay Jr., MD. "We've got too many foxes guarding the hen house."

The morning Dr. Lay testified to the legislative committee he received a FedEx package that contained a lawsuit one of the committee members filed against him. Another committee member has also sued him. Dr. Lay added that none of the suits have to do with him harming a patient; rather, he is named along with drug manufacturers so the case can be tried in a Mississippi court.

Mac Gordon, a spokesman for the Mississippi House, said he doesn't believe concerns about too many lawyers on the panel will hold much sway. Only three or four trial lawyers are on the 26member panel, he said.

Meanwhile, back in Cleveland

AFTER SHARING THEIR STORIES WITH LAWMAKers, things have taken a slight turn for the better for Dr. Blackwood, Dr. Baugh and Ambur Peter-

son. About 10 days after Delta Ob/Gyn closed its doors, the physicians got temporary relief, what Dr. Blackwood calls "Band-Aid insurance."

The physicians re-opened their office and Peterson and her husband were able to go back to their original delivery plan with Dr. Blackwood. He delivered their son Jaden at the hospital in Cleveland.

Ambur was relieved, but doesn't plan to stop lobbying the Legislature.

"It's going to affect us in the long run," she said.

Dr. Blackwood, who doesn't want to leave the area where he grew up or to stop practicing obstetrics, also plans to keep fighting for a long-term solution.

"I feel like it's good until the end of the year," said Dr. Blackwood, echoing other colleagues who are still practicing. "But I don't know what will happen after that." •