When you practice medicine, you are often tethered to your smartphone. This is not simply for patient care purposes, but also for required access and availability to maintain your medical license and hospital affiliations, receive local or national health department announcements as well as many listservs commanded for credentialing purposes.

Multiple mandated email accounts and alert lines later, and your device delivers a constant flurry of messages that alternate between knowledge that an Ebola case arrived in NYC or there is a water main break on the third floor to announcements that a new “groundbreaking” study shows eating well and exercising promotes longevity.

All the while, you are running between hospital beds or exam rooms actively dealing with patient management issues and awaiting highly anticipated laboratory or test results.

The sheer volume you receive is endless, but your need to triage the urgent or emergent information becomes essential and gets constantly intertwined with studies of the obvious like that longevity example. And your eyes roll out of frustration at yet another distraction away from patient care.

Moments ago, as I was checking Twitter, another such instance flashed before the screen. This time from the Department of Health and Human Services (HHS) about a “new study using [the Centers for Disease Control and Prevention (CDC)] data found that regular physical activity can help improve your mental health.”

Which leads to an obvious question; when does repeating research studies surpass confirming
known findings, for the purposes of validating legitimacy, and enter the world of the redundant and wasteful? When does more become less?

A quick search of “mental health and exercise” on Google Scholar which catalogues published scientific works yielded 2,620,000 results (25,700 already in 2018). When important data analyses from 2014 by the CDC often take until 2018 to publish, with such delays typically undermining relevance, it might be time to step back and determine if allocating resources to the clearly redundant is the best way to cut down on such lag time for the more invaluable work.

The science is clear that physical activity can positively impact mental health and well-being. This doesn’t mean it should never be re-examined, but at present we have comfortably probed the topic. Taking a pause might be reasonable for now.
Resources aren’t unlimited which leads to much strife and political battles. Though redundant, it appears we may need a Chief Scientific Officer whose sole purpose is to run the Office of Redundant and Repetitive Reports (ORRR). Minimizing distractions for busy health practitioners can only benefit patients and freeing up funds for higher risk, higher reward research or even lower risk efforts in new frontiers or those of limited understanding might just pay greater dividends.

When we cling to status quo, who really wins?

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