



## Medicare hotline needs help, study says

Customer satisfaction with a toll-free help line for Medicare beneficiaries appears to be dropping based on interviews conducted earlier this year by the inspector general for the Department of Health and Human Services.

The 1-800-Medicare line is a critical resource used by millions of elderly and disabled Americans, as well as their family members. Tens of thousands of people call the number each day, and on some days, the number of calls can exceed 100,000. Investigators randomly contacted beneficiaries and others who had called the hot line one week in late January. They found a satisfaction rate of 71 percent, which is a drop of 13 percentage points when compared to a similar series of interviews conducted three

years earlier.

The percentage of callers who said they had some difficulty accessing information remained about the same this year as in 2004 — 44 percent. More than one in five callers hung up before having their questions answered. Two-thirds of those who hung up did so because of long wait times. Rep. Pete Stark, D-Calif, said the performance of the private contractors hired to run the hot line disappointed. The name of the contractors was not provided in the report. A footnote in the report said, however, that since the survey was conducted, just one contractor has assumed oversight of all the 1-800-Medicare call centers.

Agency officials stressed that a majority of callers were still satisfied with the help they got, and the agency was work-

ing to improve performance. In the Medicare agency's official response to the inspector general's findings, which was included in the report, officials said they will be conducting a study to help determine why callers are not getting the information they need. The agency will also work to simplify choices they are provided to customers before they are transferred to a live operator. The inspector general's primary recommendation was to reassess whether adequate resources are directed toward improving the capabilities of the automated system. Only five of 206 called successfully received an answer to their question from the automated answering system.

## 10 Soda Alternatives

1. Club soda mixed with pomegranate juice. 160 calories per cup; still bubbly.
2. Tonic water with a squeeze of lemon or lime. Only 80 calories; still bubbly.
3. Light yogurt and fruit smoothie. Creamy and sweet, high in calcium and only 174 calories per cup.
4. Tomato juice or V8. Packed with flavor; high in vitamins C, A, and potassium and only 50 calories per cup.
5. Flavored seltzer. Carbonated, but zero calories.
6. Energy drink (such as Gatorade). Tastes sweet, 60 calories per cup, contains electrolytes.
7. Apple cider. Has 120 calories per cup, but packs a tangy, substantial flavor.
8. Milk, whole or skim. High in calcium and protein—and you need both. With 145 calories per cup of whole milk; 85 calories for skim.
9. Ovaltine made with skim milk. It's chocolaty, fortified with vitamins and minerals, high in calcium and protein and 170 calories per cup.
10. Tea or coffee, unsweetened. Get a boost on less than five calories per cup, plus it's high in antioxidants.

## Incisionless surgery revises stomach bypass

When weight loss stalls or other problems arise years after gastric bypass, the surgery can be successfully revised with an incisionless, from-the-inside approach, researchers from Ohio State University in Columbus report.

The technique, involves the use of a device called StomaphyX, which has been approved by the US Food and Drug Administration. The device is inserted with an endoscope via the mouth into the stomach, where suction pulls the stomach walls against the device. Staple-like fasteners are

then deployed to create pleats in the walls, effectively reducing the size of the stomach.

"The incisionless surgery helps to recreate the patient's smaller stomach, causing early satiety and further weight loss," Dr. Dean Mikami, a surgeon involved in the development of StomaphyX and the first to perform the operation in the US, said in a statement. "This is currently the only endoscopic or nonsurgical way to reduce the size of the stomach after gastric bypass surgery."

Since April, a total of 22 such gastric bypass revisions have been per-

formed at OSU. On average, patients dropped 10 pounds after 1 month, 15 pounds after 2 months, and 20 pounds after 3 months. According to Mikami, between 10 and 15 percent of patients who undergo gastric bypass surgery will require a revision 2 to 15 years later.

Good candidates for treatment with StomaphyX, Mikami said, include those who have regained some of their weight after gastric bypass surgery and are compliant with their diet, exercise regularly, and do not experience early satiety during meals.