My Evening with the Future

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Throw away the crystal ball and spend an hour with Google Health: the future will be right in front of you. Providers who prefer the pedestal to parity and see themselves as traffic cops on the health information highway are in for the shock of their lives.

I intended to compare the on-line personal health records of both Google and Microsoft, but I couldn’t convince Microsoft that I was Phyllis Diller from Scottsdale AZ (you have to be a US resident to sign up). Google let me in, and in a few minutes I had my own record. Well, not quite my own. (Health record privacy purists, skip the next paragraph.)

Touch wood, I’m a healthy guy. I don’t have any chronic conditions (unless you count seasonal hay fever, a cat allergy and a severe reaction to sopranos), have never had surgery, take no prescription drugs, and, having read too much quality and outcomes research, am a bit of a fatalist. There will be no colorectal cancer screening bazooka shoved up my behind unless I get to watch a video of my doctor smiling happily through the procedure. With so little data to enter, I made stuff up – gave myself type 2 diabetes, angina, arthritis, and added 25 pounds – to test the ingenuity of the architecture.

Hello Frank Gehry. The software leads you through a consumer’s garden of neurotic delights – and I mean that in a good sense. You can input your own remarks and notes, set permissions for access, amend or delete entries. You can second guess the diagnosis or advice you got from your doctor in the seven minutes he spent with you. You can get drug price and therapeutic equivalence comparisons – your own reference based pricing program is at your fingertips. You can catch contraindicated drug combinations. You can learn your odds of falling prey to various health breakdowns by linking your profile to web-based risk calculators. You are handed the key to a cornucopia of safe information injection sites tailored to your profile.

But, dammit, this is America, and in America nothing good happens unless money changes hands. Some of the featured partner sites offer free advice, but they’ll also sell you drugs or other products. Others are more brazenly mercenary: at the Cleveland Clinic site it’s cash for counsel. Want a second medical opinion from MyConsult? That’ll be $565, and it’s not insured. The web site supplies a sample report so you can see what you’re likely to get: mainly of a summary of what the patient sent in, and a 3 paragraph opinion. I figure a good senior resident could knock one off in half an hour, an hour tops. Bargain-hunters can score a nutritional consult about your gout (honest) for a mere $95, or 2 sessions on high blood pressure for $165.

Perhaps you’re more inclined to Blueprint for Wellness, which offers a package of 29 lab tests, a wellness questionnaire, and a personal wellness report for $134. TrialX.org will
match your condition to a database of 25,000 clinical trials and help you find clinical investigators expert in your condition – all free. It’s essentially a dating service for researchers and a potentially vast pool of trial recruits.

To those of us of a certain age for whom a long distance call was a special and costly luxury, this is all a bit disorienting, even creepy. Google has an incentive to choose its partners carefully – it doesn’t want to jeopardize its carefully cultivated we’re-not-like-the-other-megacorps image. No filter is foolproof, and no interaction is risk-free. Nonetheless, the methodologically innocent are far better off with Google as the quality control overseer than heading off solo into a cyberspace full of charlatans.

Still, there are reasons to pause and reflect. Will the model undermine the doctor-patient relationship? Will it fuel an even greater obsession with tests and assessments, luring millions more to the already-vast army of the worried well? What happens if providers act on inaccurate or misleading patient-created information? What jurisprudence will arise from the inevitable litigation when something goes wrong?

Yeah, whatever. Quibble all you want; it’s here, it’s growing, there will be no pausing and precious little reflecting. It’s a predictable workaround, an evening up of the odds against Fortress Healthcare that keeps patients in the dark and puts a firewall between them and their health record. Some enlightened health care organizations, such as Group Health Cooperative in Seattle, put patients at the centre of their e-health strategies. How strangely foreign to the Canadian Way.

Canada’s e-health leaders can either ignore it or embrace it. Ignoring it risks dooming the provider-oriented, paternalistic plans to rapid obsolescence. They should take what’s good about it – joint production and ownership of health information, the potential to create networks of trustworthy information sites, the linkage to self-management tools tailored to individual profiles, the fantastic communications capacity – and revamp their e-health plans, fast.

The democratization of knowledge and the desire to be treated like an adult in health care transactions are irresistible forces. It’s a near-miracle that Canadians for the most part continue to put up with the arrogance, inconvenience, secrecy, and error build into the existing system. We could have seen this coming a decade ago, but we are too often a nation of deer in a world of headlights. Google and Microsoft have set off the alarm. Pushing the sleep button won’t cut it much longer.