

Study: Primary care pediatricians working fewer hours

from the **AAP Department of Research**

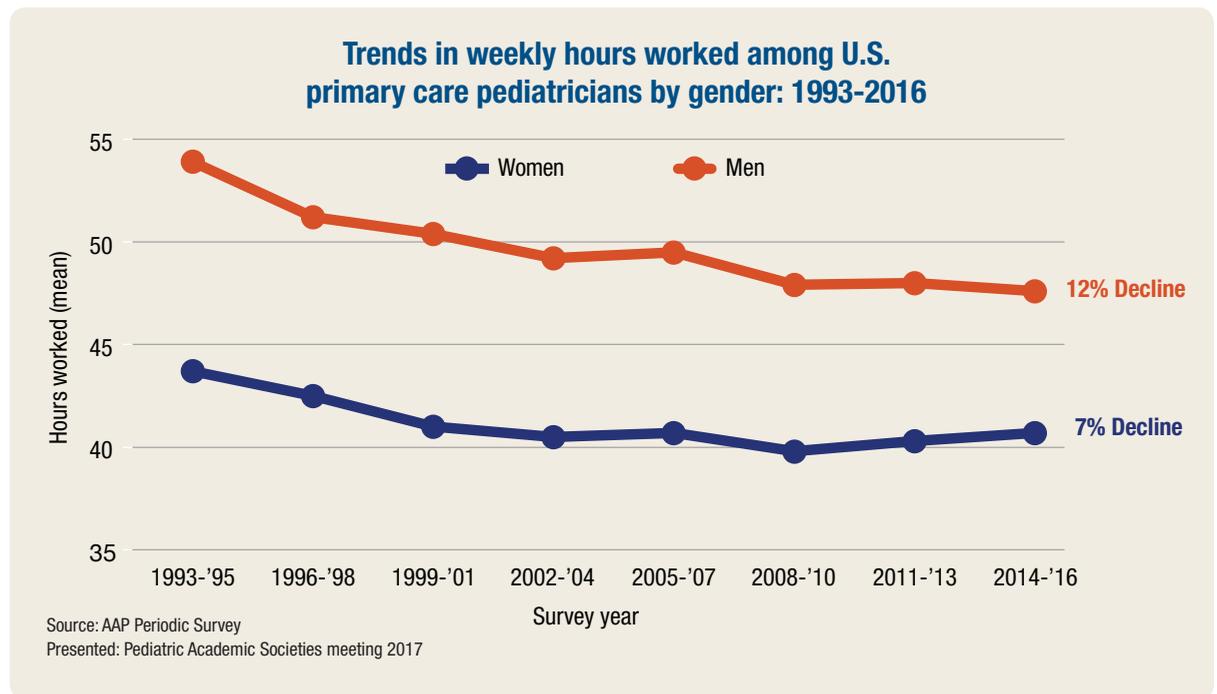


The average number of hours worked weekly among U.S. pediatricians in primary care practice dropped 13% over the past 23 years, according to research drawing on the AAP Periodic Survey of Fellows. The results were presented at the 2017 Pediatric Academic Societies meeting in San Francisco.

In 1993-'95, primary care pediatricians reported working an average of 49.6 hours per week, which dropped to an average of 43 hours per week in 2014-'16. The reported hours in direct patient care declined 18%, from an average of 44 hours per week in 1993-'95 to 36.1 hours per week in 2014-'16.

A similar pattern of reduced work hours in primary care practice was found for both men and women (see figure). For women, the average number of hours worked dropped 7%, from 43.7 hours per week in 1993-'95 to 40.7 hours in 2014-'16; for men, average hours declined 12%, from 53.9 hours per week in 1993-'95 to 47.6 hours per week in 2014-'16.

The trend in reduced hours was found across age groups. The largest proportional decline was found for pediatricians in their 40s at the time of the survey, with an 18% reduction in weekly hours, and the



smallest decline for those in their 60s at the time of the survey, with a 6% reduction in weekly hours.

The data were drawn from the Periodic Survey, the national survey of AAP members that gathers information to assist AAP leadership in developing programs and policies. Since 1987, three to four surveys of a unique random sample of about 1,600 non-retired members have been conducted each year.

Sixty-nine surveys were pooled for this analysis, with an average response rate of 58%, resulting in

a total of 32,527 cases. In each survey, respondents were asked to estimate hours worked in a typical week. In this study, analysis was limited to those who practice at least 60% of their time in primary care.

For more information about the study or the Periodic Survey, contact Blake Sisk, Ph.D., in the AAP Department of Research, at 847-434-7630 or bsisk@aap.org. Additional information about AAP research using the Periodic Survey is available at www.aap.org/research/periodicsurvey.

FDA Update

FDA approves TNF inhibitor to treat children with chronic plaque psoriasis

from the **Food and Drug Administration's Office of Pediatric Therapeutics, Division of Pediatric & Maternal Health, and Division of Dermatology and Dental Products**

The Food and Drug Administration (FDA) recently approved Enbrel (etanercept), a tumor necrosis factor (TNF) inhibitor, as the first systemic treatment for chronic moderate to severe plaque psoriasis in patients 4 years of age and older. Enbrel is given once a week as a subcutaneous injection.

Other drugs approved for pediatric patients with chronic plaque psoriasis are limited to topical agents, and they are not labeled for use in children under 12 years of age.

Psoriasis is a chronic inflammatory disease primarily affecting the skin and joints. Plaque psoriasis is the most common subtype. Approximately 20% of patients have moderate to severe disease.

Multiple co-morbidities exist, including depression/suicide, autoimmune disease, cardiovascular disease and metabolic syndrome. The impact on patients' quality of life has been found to be comparable to that associated with cancer, arthritis and other serious chronic diseases. Childhood-onset psoriasis correlates with impaired social development, sleep problems and substance abuse.

Enbrel's approval for pediatric plaque psoriasis was supported by a 48-week randomized, double-blind, placebo-controlled efficacy trial in 211 subjects ages 4-17 years. After 12 weeks of therapy, more Enbrel than placebo-treated subjects (57% vs. 11%; $p < 0.0001$) achieved a 75% reduction in their baseline Psoriasis Area and Severity Index score.

The observed adverse reactions were similar in frequency and type to those seen in adults, which included infections and injection site reactions. No

deaths, malignancies or opportunistic infections were reported.

The drug label includes a warning for serious infections and for lymphoma and other malignancies, some fatal, in children and adolescents treated with TNF blockers, including Enbrel. The manufacturer conducts enhanced postmarketing surveillance for malignancies in patients under 30 years of age, which the FDA requires for all TNF blockers.

RESOURCES

- For more information on Enbrel including product labeling, visit <http://bit.ly/2rfz8AZ>.
- The FDA Drug Safety Communication on Tumor Necrosis Factor (TNF) blockers and risk for pediatric malignancy is available at <https://www.fda.gov/Drugs/DrugSafety/ucm278267.htm>.