Carpenter notes: I initially pitched this story to NYT health and science editor David Corcoran at a pitch slam at the 2008 ScienceWriters meeting. David was receptive to the idea and indicated that I should send him a formal pitch by email, which I did the following week.

The pitch

Hello David,

At the "pitch slam" at the recent NASW meeting, I pitched an article arguing that people with complicated health problems are overlooked in medical research and practice. You indicated that this is a story you might be interested in, so I’m writing now to follow up with more details. Here’s how I would approach the story:

At age 73, Fred Powledge has endured more than 20 years of chronic illnesses. Not illness, singular. Illnesses. His 4-inch-thick medical file dispassionately spells out his medical history: Hypertension. Diabetes. Gout. Chronic back pain. Cataracts. Restless leg syndrome. Gastric reflux. Depression. COPD. Arthritis. Every malady comes with its own medicines, and Mr. Powledge takes almost a dozen pills a day, as ordered by six different physicians. “I spent much of the earlier part of my life proud of my ability to avoid doctors and hospitals, so I am constantly amazed at my dependence on them now,” he said.

What is most stunning about Mr. Powledge's predicament is not how rare it is, but how common. Of the 133 million Americans who have one chronic health problem, half have more than one. And people who have 5 or more chronic diseases account for 66 percent of Medicare spending. Such "multimorbid" patients fare poorly by any measure: On average, they pay more for health care, linger in hospitals longer, experience more drug interactions, suffer more psychological distress, and die younger than patients with less-complicated medical profiles.

Yet people who have multiple diseases are sorely overlooked both in medical research and in the nation's clinics and hospitals. There is no National Institute on Multimorbidity; no charity Race for the Multimorbidity Cure; no celebrity championing the cause on Capitol Hill. A 2005 study found that for every article on multimorbidity published in the medical research literature between 1990 and 2002, there were 74 articles on asthma, 94 on hypertension, and 38 on
diabetes. That's not surprising, considering that complicated patients are routinely shut out of medical research. A 2007 study published in the Journal of the American Medical Association found that 81 percent of randomized clinical drug trials published in the most influential journals specifically excluded patients who had multiple diseases.

Because multimorbid patients are so often excluded from medical research, physicians have little basis for integrating or prioritizing their treatment, said Dr. Cynthia M. Boyd, a geriatrician at the Johns Hopkins University School of Medicine in Baltimore. In a 2005 study published in the Journal of the American Medical Association, she and colleagues analyzed the most widely used clinical practice guidelines for treating the nine chronic diseases most prevalent in older adults. Fewer than half of the guidelines, they found, specifically addressed patients who have multiple illnesses. "We need more research," Dr. Boyd said. Such research is both difficult and expensive, she acknowledged, but "Not even trying to figure it out is causing needless suffering and millions of dollars in wasted health care spending."

I'd be glad to elaborate on this proposal or talk through any questions you may have. I am an experienced science writer and have written for Prevention, Science, Scientific American Mind, the HHMI Bulletin, ScienceNOW, Science News, Reuters Health, and numerous other publications. I also am the first author of Visualizing Psychology, an introductory psychology textbook published by John Wiley & Sons in January, 2007. For your convenience, I'm attaching my resume and a few recent writing samples. (One that is particularly relevant to the story I'm proposing is a feature on over-medication that appeared in Prevention magazine just this week; in fact, it was in researching this Prevention story that I learned about the multimorbidity issue that I'd like to tackle for the New York Times.) I also invite you to visit my website, www.siricarpenter.com.

As I recall from the pitch slam, you said that you typically request that new writers provide a list of references. If you're interested in this story, I'd be happy to refer you to editors who I believe will attest that I am a careful and conscientious writer. Editors whom I'm worked with regularly over the past few years include:

[redacted]

Thank you very much for your time and consideration.

Best regards,
Siri Carpenter