



LETTER FROM THE EDITOR-IN-CHIEF

The Future Without Flu: Will Public Health Gains Cause Business Ills?



It's well known that the retail industry has a nasty habit of overreliance on the holiday season to buffer slower sales throughout the year. When the economy is strong, retail sales typically follow, and investors are happy. When the economy

falters or when brick-and-mortar retail is disrupted by lower-cost, more-convenient alternatives, investors feel a bit under the weather. Similarly, the urgent care dilemma has always been a relative dependence on flu season to account for whatever slim and diminishing margins exist in our business. Publicly, none of us would wish illness on our communities, but privately, you hear the chatter. Consider this common phrase: "Worst flu season in years!" Depending on the context, this could reflect a bad flu season for business or a bad flu season for patients. Likewise, you wouldn't want to be caught celebrating a "great" flu season, would you?

Yet the business realities are there, and unless we find a way to kick the habit, our dependence on flu is likely to contradict our mission to heal. By most measures, seasonal spikes in flu cases account for a volume lift of anywhere from 25% to 50% over the course of 6 to 8 weeks. If a typical clinic sees 40 patients per day, then it might expect 50 to 60 patients per day during flu season. At U.S.\$130 per visit, that's about U.S.\$75,000 to U.S.\$150,000 direct to the bottom line, or almost 5% to 10% of annual revenue. That amount could easily be your entire margin. Therefore, in a typical urgent care business, a year without flu is essentially a year without business.

Although many urgent care businesses can weather a slow flu season here and there, what about a scenario in which influenza could be nearly eradicated, year after year? How, you ask? Scientists appear on track to developing a vaccine that could produce lifetime immunity. Researchers are close to targeting a part of the hemagglutinin protein that is much less vulnerable to mutation, and therefore more likely to trigger a lifelong immunity. Studies in mice and monkeys using this target have demonstrated some exciting results. Though many more years of study are needed, scientists will be sufficiently motivated to find answers. Influenza, after all, is a

massive public health problem and causes enough morbidity and mortality (not to mention health-care-related costs) that funding for research for a universal vaccine is likely to be robust. Even if the research falls short, public health officials have made significant strides toward better seasonal vaccination rates, especially among the most vulnerable patient populations and, importantly, health-care workers themselves. Mandatory vaccination initiatives for health-care workers is a relatively new phenomenon and may be working. In addition, better surveillance of circulating influenza strains is helping vaccine makers create more effective vaccines, and multi-valent and high-dose approaches also appear to be helping the cause. Thus, a future that depends on flu cases to maintain profitability is nothing more than fool's "cold"!

A common mistake that urgent care operators make is to overprepare for flu season, which usually means overstaffing. Another common mistake is to artificially stretch the season, and the bloated staffing that goes with it, from October to April. Perhaps it's time we reimagine our business to reflect the more typical business realities that exist from January through December. The majority of the strain on our business occurs from Thanksgiving through New Year's Day, even in a heavy flu season. Sure, there is a smaller seasonal lift from October through November and again from January through April, but the variance is much more manageable. It's far more important, then, that we have a sustainable staffing level for 11 months a year than that we be staffed adequately for the 4-week surge that may not even come. A disciplined look at the business with an eye toward the base case for volume will help the urgent care operator weather a year without flu. And, perhaps someday, a lifetime without it. ■

Lee A. Resnick, MD, FAAFP
Editor-in-Chief, *JUCM*, *The Journal of Urgent Care Medicine*