In the labyrinth of adolescence, bodies are changing and maturities developing, often at incongruent rates. Teens can feel like they don’t belong, hovering between the children they were and the adults they will become. Pediatricians with subspecialty training in adolescent medicine are the best guardians for ensuring that quality health care for teens is not lost in the middle.

Simply recognizing the specific health needs of adolescents is not enough. Their care requires a full complement of resources that takes into account the physical, mental, and social idiosyncrasies that characterize the adolescent stage of life. The Medical College of Wisconsin is answering this challenge with the initiation this year of a comprehensive Adolescent Medicine and Health Program at Children’s Hospital of Wisconsin.

The program is directed by M. Susan Jay, MD, professor of Pediatrics and chief of Adolescent Health. It provides adolescents and young adults with outstanding clinical care specific to their unique developmental issues. Through research in adolescent health concerns, the Medical College is also building a body of knowledge that subspecialists and primary care doctors alike can reference to better understand and treat this population.

We must recognize the threats to adolescent health and the associated behavior risks that lead to increased morbidity and mortality. More than 41 percent of adolescent deaths in Wisconsin are due to motor vehicle crashes, and another 12 percent are from other unintentional injuries. Homicide claims 11 percent of adolescent lives, and 16 percent die from committing suicide. With various other causes filling out the balance, the complexity of our mission is evident.

The College’s Adolescent Medicine and Health Program includes a constellation of initiatives that apply our faculty’s expertise where it is needed most. A major component in the program is the continuation of the Milwaukee Adolescent Health Program (MAHP), a comprehensive program to provide health care to particularly high-risk adolescents and central city youth. Wendi Ehrman, MD, assistant professor of Pediatrics, is director. Its primary site is the Downtown Health Center, which provides services that include primary adolescent health care, acute and chronic illness management, screening and treatment of sexually transmitted diseases, family planning, and smoking cessation. More than 3500 teen visits are logged each year.

Multiple sites throughout Milwaukee add to the MAHP’s effectiveness. The program manages clinics within two Milwaukee public high schools. A reproductive health clinic serves uninsured and underinsured adolescents, and at the Teen-Tot Clinic, teen mothers and their babies are seen at the same time, by the same health care professional. Opportunities Unlimited is a case management program that helps teens negotiate the social services system, i.e. helping a teen mother get back into school or find adequate day care. A nurse practitioner runs a program at Child and Adolescent Inpatient Services, an inpatient psychiatric center offering on-site primary care to its residents. The MAHP also includes support services, such as substance abuse counseling and bilingual access. In addition, MAHP staff treat more than 6000 detained adolescents at the Milwaukee County Juvenile Detention Center each year.

All those who work with the program, the largest of its kind in Wisconsin, offer critical expertise in adolescent health, including three physicians board-certified in adolescent medicine and 16 other dedicated staff members. Trained and experienced nurse practitioners are the mainstay of the various programs. The MAHP establishes patients through word of mouth and presence in key neighborhood locations. Additionally, participants who enter the program for one service can be referred to other areas of the program once.
their needs are identified. Teens can also e-mail teendoc@mcw.edu in confidence with questions answered by College faculty and staff.

To serve adolescents outside of the urban setting, the Adolescent Medicine and Health Program has launched a Youth Clinic at Children’s Hospital. The clinic is a resource to subspecialists and community physicians for adolescents with general health or psychosocial needs.

The Youth Clinic is designed to accommodate patients who received excellent, yet often complex, subspecialty pediatric care, but are now dealing with common issues of adolescence. For example, a patient who received a bone marrow transplant as a child may benefit from the expertise found in the Youth Clinic when seeking wellness care or dealing with menstrual concerns as an adolescent. The program has also piloted an adolescent consultative service offering clinical recommendations to existing Children’s Hospital staff.

Our knowledge of how to care for adolescents is growing in light of their direct input. We have developed a teen advisory board to learn about what techniques and programs are best received by adolescents. Many of the teen board members were patients at one time, and from their experiences we are learning about their concerns, their ideas, and the issues they face. In many ways, they are the experts.

Research in adolescent health is also giving us great insight. Doctor Ehrman is studying obesity’s impact on diabetes among adolescents. The goal is to identify those who may have developed type 2 diabetes and implement treatment and lifestyle changes early.

Doctor Ehrman is screening for type 2 diabetes or impaired glucose tolerance among teens who are at high risk due to obesity, family history, signs of hypertension, or other factors. The study is ongoing, so outcomes are not yet available, but at least 5 percent of the adolescents screened thus far have had previously undiagnosed impaired glucose tolerance or type 2 diabetes. Many of the teens either had no symptoms or subtle symptoms of disease that no one had recognized earlier.

As the Adolescent Medicine and Health Program advances in the future, several more services will come on line. An adolescent-focused eating disorder program will address conditions such as anorexia, bulimia, and binge eating, and a nutrition program will serve adolescent athletes. A multidisciplinary adolescent developmental assessment program will focus on adolescents with developmental and learning disorders as they transition into adulthood. A pediatric and adolescent gynecology clinic will provide care for conditions such as dysfunctional uterine bleeding, dysmenorrhea, and polycystic ovary disease.

The program as a whole will allow for improved medical education of students and residents regarding effective care for adolescents. It will also lay the groundwork for the future establishment of a fellowship program in Adolescent Medicine at the Medical College.

As these programs coalesce, both the knowledge base and the number of physicians knowledgeable in adolescent medicine will appreciably expand, helping to close the gaps in care that exist for teens in a health care environment that otherwise tends to categorize patients as either children or adults.