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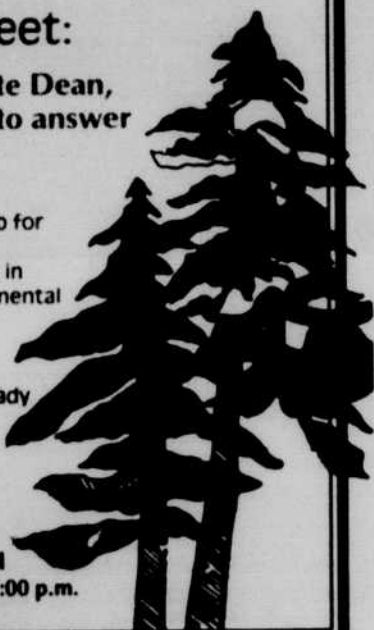
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Workplace drug use declines

WASHINGTON (AP) — Drug use at work is declining, but the reasons are not yet clear, federal researchers said Monday.

There is not enough evidence to attribute the change to more drug testing of workers, a shift in attitude toward drug use or other factors, said Charles P. O'Brien, head of psychiatry at the Veterans Affairs Medical Center and chairman of a committee of the National Research Council and Institute of Medicine.

The deterrent effects of drug testing never have been clearly demonstrated, the committee said. It called for more comprehensive studies and better evaluation of programs aimed at creating a drug-free workplace.

"Clearly workers entering the workforce in the 1990s are likely to have substantially less experience with illicit drugs than did their counterparts in the 1980s and the late 1970s," the committee said.

The committee said a 1990 survey indicates that abuse rates in the workplace are now relatively low. The survey found that about 7 percent of U.S. workers used an illegal drug during the preceding month and about 6 percent abused alcohol.

A 1979 study showed that as many as 14 percent of the general population had used one or more illegal drugs during the preceding month.

Businesses ought to do a better job determining what works in checking drug abuse, and studies also should focus on whether occasional drug use affects productivity, he said.

The committee also said that nearly \$1.2 billion is spent annually on urinalysis tests of workers. But there is not much scientific evidence to show the tests are very good at detecting drug use or dependence.

For example, said Marian Fischman of Columbia University, traces of marijuana can be found in urine

"Clearly workers entering the workforce in the 1990s are likely to have substantially less experience with illicit drugs..."

— National Resource Council and Institute of Medicine

even months after use. There is no scientific proof that such amounts would affect behavior, she said.

Added Bryan Finkle of the University of Utah, urine testing "tells you a very limited amount. It doesn't distinguish between use and abuse."

The test results have been over-interpreted, primarily by lawyers and crime-fighters, he said.

The committee also found that on-the-job drug intervention programs may have limited value, in part because they do not include systematic follow-up.

"Recovery should be viewed as a process rather than an event," the committee said.

It said most drug and alcohol intervention programs have focused on finding new cases of abuse and have "devoted little time to relapse prevention."

"Workplace alcohol and other drug interventions may help a limited number of patients" but cannot by themselves "solve the nation's problems with alcohol and other drugs," the committee said.

A separate study released last month by the Robert Wood Johnson Foundation said abuse of alcohol, tobacco and drugs is killing more than 500,000 Americans a year and placing an increasing burden on the health care system and society.

Millions with bad teeth can't afford dentists

WASHINGTON (AP) — Millions of Americans with rotting teeth and other oral diseases can't afford to see the dentist, the government reported Monday.

Americans' overall oral health has improved dramatically with the advent of fluoride and better dental education, said the report by the Public Health Service.

But minorities, the poor and the elderly still have too many cavities, untreated and decaying teeth and diseases from gingivitis to oral cancer, the service concluded.

"It's a rather stark comparison," said Dr. Robert Collins, the service's chief dental officer. "About 150 million people do not have dental insurance ... and very little is provided by the government to the poor."

More than half of children ages five to 17 have cavities, the report said.

A fourth of them — mostly minorities plus the poor and those whose parents didn't finish high school — get 75 percent of the cavities. Ninety-one percent of Indian and Eskimo children have at least one by age 15, making them the most affected group.

About 12 percent of white children have decayed teeth, compared with 27.2 percent of

minorities; less than 1 percent of white children lose teeth by age 17, compared with 3.2 percent of minorities; and only 69.6 percent of minority children get cavities filled, compared with 87.5 percent of white children.

Adults fare no better. About 7 percent of white Americans have decayed teeth, compared with 22 percent of black Americans. Ninety-three percent of whites had their cavities filled, compared with 78 percent of blacks.

In 1989, about 7.2 million Americans ages 18 to 64 had lost all of their teeth. And last year, doctors diagnosed 30,000 new cases of oral cancer, which killed 8,000 people.

The main problem is cost, the health service concluded. Americans pay 56 percent of their dental bills out of pocket, compared with only 19 percent of doctor bills.

President Bill Clinton's health care package would provide general dental care, including preventive services, for children. Adults would be added to the program later.

That would help get people to the dentist regularly and cut costs, Collins said.

For example, coating children's teeth with sealants prevents 90 percent of cavities in

the pits of their teeth for about \$21 a tooth. The government wants half of all children to get this sealant by the year 2000, but only 10.9 percent have it now, the report said.

Now, Medicaid spends less than 1 percent of its \$77 billion budget on dental bills for the poor, the health service reported.

Only 20 percent of Medicaid-eligible children receive dental services, mainly because few dentists agree to the low Medicaid fees, Collins said.

More than 99 percent of elderly Americans have dental problems, yet only 15 percent have private insurance, and Medicare covers no dental bills, the report said.

The American Dental Association wants Medicare reformed to cover dental bills. Under the Clinton plan, the elderly eventually would be covered if they chose not to retain Medicare.

"These people need oral care, too," said ADA executive director Dr. John S. Zapp.

But finances aren't the only obstacle, Collins said. The study found black children with insurance had fewer dental visits — 1.6 per child per year — than uninsured white children, two visits per child.

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