HEALTH WATCH

BY Steven Bailey, N.D.

Natural Alternatives for the AIDS/ARC Conditions

Part 1

Introduction:

It seems hard to believe, but it was only 5 years ago that medical science began investigating a new condition called the "acquired immunodeficiency syndrome" (AIDS). Though AIDS has witnessed a relatively short history as a recognized disease, the American public has been inundated with information about this condition. To some extent, the information has been reflective of the growth of knowledge about the disease, but there has also been an abundance of fear and irrational response to the disease in the media. I hope that the following articles present a rational interpretation of the current information about AIDS and can serve as a self-guide for the prevention and care of the condition.

Definition:

AIDS is an acronym for the acquired immunodeficiency syndrome. Understand that "syndrome" means "A group of signs and symptoms collectively indicate a disease or disorder." (Webster's Dictionary). With that definition, we can see that AIDS is a disease that involves a number of clinical and symptomatic conditions. The medical definition of "syndrome" does not require that all conditions be present in all individuals with the disease, and AIDS is consistent with this common interpretation. In September 1987, the Center for Disease Control (CDC) revised and outlined the current definition of AIDS, and some of this definition will follow a discussion of common symptoms.

Symptoms:

In the early stages, AIDS often resembles many other illnesses, with chronic diarrhea, irregular fevers, swollen lymph glands, frequent infections, fatigue and generalized wasting as common symptoms. Many conditions have similar symptoms, so diagnosis of early AIDS involves a number of clinical laboratory conditions. The most common laboratory indicator has been the HIV (human immunodeficiency virus) antibody test.

As AIDS progresses, symptoms representing more serious conditions of opportunistic infection begin to present themselves. The most common of these infections involved a darkened tumor which is a cancer called Kaposi's Sarcoma and a pneumonia (shortness of breath, pain with breathing, etc.) called pneumocystis carinii. These conditions are called "opportunistic" because they are normally found only in people with deficient immune systems.

CDC definition, clinical findings:

The recent redefinition of AIDS by the CDC has resulted in a broader contemporary definition. It is one that utilizes the HIV antibody test as well as presumptive diagnosis based on any of a wide range of criterion. This standardization of the diagnostic criterion has resulted in dramatically increasing the number of AIDS cases. This increase was done largely for the purpose of increasing the tracking of AIDS in its early stages and to utilize extended application of laboratory evidence for diagnosis.

The new definition has many new criterion for diagnosis which include HIV wasting syndrome ("Finding of profound involuntary weight loss greater than 10% of baseline body weight plus either chronic diarrhea, at least two loose stools per day for greater than or equal to 30 days, or chronic weakness and documented fever for greater than or equal to 30 days." Taken from Communicable Disease Summary, Vol. 34, No. 19, September 15, 1987, p.4.), presuptive diagnosis as well as a broader range of indicator diseases (diseases that are of an opportunistic nature and are accepted as helping indicate the diagnosis of AIDS). A positive HIV antibody test is considered a major indicator for the diagnosis of AIDS although with **no positive test or inconclusive results.** The combination of a positive antibody test and the presence of one indicator disease is now an accepted criterion for the diagnosis of AIDS. Present indicator diseases include candidiasis of the throat, a herpes simplex lesion that persists for greater than one month, bronchitis, pneumonitis, or esophagitis for any duration" (Communicable Disease Summary, Vol.34, No. 19, p.2.) for patients over the age of one month. These indicator diseases are certainly not limited solely to the AIDS condition and the inclusion of them for diagnostic purposes will certainly continue to dramitically increase the number of diagnosed cases in America.

Next Week: The immune system and how AIDS influences it. Testing for AIDS.

Free Smoke Detector

Pacific Power & Light Company has donated $5,000 to the Fire Bureau's Smoke Detector Give-Away Program, the company announced today.

"We were disturbed to learn that 26 percent of the city's residential fire deaths since 1982 occurred in a relatively small part of our service area in northeast Portland," said Carl Talton, Pacific's Portland district manager. "The smoke detectors will help save lives."

Aside from the cash donation for the purchase of 1,000 smoke detectors, Pacific's Employee Community Help Organization (ECHO), a non-profit volunteer organization, is recruiting volunteers to help canvass the area to alert householders of the availability of smoke alarms.

Koch Helps Kick Off Alameda Toy and Joy Drive

City Commissioner Bob Koch joins in with students from Alameda Primary School in kicking off the eighth annual Toy & Joy drive at 9:45 a.m. Friday, November 20, 1987, at the school, 2732 N.E. Fremont St.

Alameda's 720 students will hear how Koch, as a child, appreciated receiving a Toy & Joy gift, and will receive safety tips from representatives of the Portland Fire Bureau of Police Bureau.

"The Toy & Joy program is an excellent example of the kind of people we are here in Portland — caring and sharing with our neighbors," said Koch.

Alameda, the only Portland public school hosting a major Toy & Joy drive, contributed 12 barrels of toys and two barrels of food last year.

Besides the Commissioner, the students will meet Artie and Clyde (penguin and a polar bear, respectively) sponsored by the Arctic Circle Restaurant, Northeast 57th and Sandy Boulevard.

Seeks Volunteers

Retired Senior Volunteer Program (RSVP) is seeking seniors 60 years old and over to volunteer for jobs that allow seniors to stay active. The programs available are:

American Lung Association of Oregon, Citizen Involvement Office, Emanuel Hospital & Health Center, The Dougy Center, Old Church Thrift Shop, North Portland Youth Service Center, Pacific New School, Portland Audubon Society, Mental Health Services West Education Opportunities, AMA Headstart, American Advertising Museum, Host Programs-Portland Public Schools, Oregon Literacy, Oregon Maritime Museum, Oregon Museum of Science and Industry (OMSI), PCC Adult Tutoring, Sports Hall of Fame Museum, and the World Forestry Center.

RSVP offers volunteers supplemental insurance coverage and limited transportation reimbursement. Call 228-7787 for more information.

In the Face of Epidemics

by Dr. Mark S. Lindau

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Magie White, This Week's Editor

We take great pride in living in an enlightened civilization. This is the information age. Newspapers print news only hours old. Television broadcasts images from around the globe using satellite technology. But for all our enlightenment and technical know-how, we, as a people, are still prone to fear and hysteria about that which we cannot see or do not understand. And issues of our national health are no exception.

For example, in the early 1950s, in the midst of the nation's polio epidemic, cannons were set off in New Orleans to ward off the "evil spirits."

As a child, I lived through that polio epidemic. Public health officials now recognize that we were in the midst of two outbreaks: polio and hysteria. The epidemic of 1952 was said to be the worst in history, although it is possible that the polio epidemic of 1916 was worse since accurate records were not kept. Polio, in 1916, was reportable in only 28 states.

In 1952, as panic spread, swimming pools and public drinking fountains were closed. Newspapers were full of stories of young people on iron lungs, and in Portland, Good Samaritan Hospital obstetricians delivered infants to mothers confined to them.

The epidemic was eventually halted by the vaccine developed by Dr. Jonas Salk. In a pioneer television photo opportunity in 1955, President Eisenhower stood with Salk, shook his hand, and announced the licensing of the vaccine. Some communities rang church bells for two minutes. Two short weeks later, the Cutter incident, a batch of vaccine causing a number of vaccinated children to come down with polio, occurred. Within months, a truckload of the vaccine was hijacked and held for a ransom of $1 million. More hysteria.

In the heat of the Vietnam War, an American Legion convention in Philadelphia convened to express its support of our foreign policy. Although the politics of the convention was predictable and therefore of only minor interest, the major news came from a fatal pneumonia streaking through the delegates as they returned home. After a link between cases was established, medical detectives quickly unmasked a new organism, discovered a successful treatment, and described how the germ grew and was spread by the hotel's air conditioning system. Fear again gripped the nation as the casualties included not only the innocent victims but the closing of a great hotel, the Bedford-Stuyvesant. The media called it "Legionnaire's Disease."

A staggering historical example of mass hysteria occurred in the calamitous 14th century, as Europeans were faced with not only the Hundred Years War, but also the "Black Death." In her book, "A Distant Mirror," Barbara Tuchman describes the course of the Bubonic Plague through Europe. In October 1347, Genoese trading ships put into the harbor of Messina in Sicily with dead and dying men at the oars. In Norway, a ghost ship with a cargo of wool and a dead crew drifted offshore until it ran aground near Bergen.

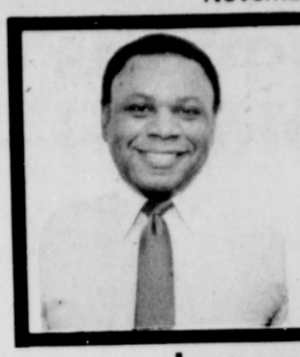
"So lethal was the disease that cases were known of persons going to bed well and dying before they woke, of doctors catching the illness at a bedside and dying before the patient. So rapidly did it spread from one to another that to a French physician, Simon de Covino, it seemed as if one sick person 'could infect the whole world,' " wrote Tuchman. The disease seemed even more terrible "because its victims knew no prevention and no remedy."

With the large amount of death and fear of contagion, people died without last rites and were buried without prayers, a prospect terrorizing the last hours of the stricken. A bishop in England gave permission for laymen to make confession to each other as was done by the Apostles, "or if no man is present, then even to a woman." And if no priest was found to administer extreme unction, "then faith must suffice." Pope Clement VI found it necessary to grant remissions of sin to all who died of the plague because so many were unattended by priests.

According to Tuchman, "The mystery of the contagion was 'the most terrible of terrors,' as an anonymous Flemish cleric in Avinon wrote to a correspondent in Bruges. The agonized search for an answer gave rise to such theories as transference by sight. People fell ill, wrote Guy de Chauliac, not only by remaining with the sick, but 'even by looking at them.' "

Today, we are again facing an epidemiological anomaly that has spawned a wave of near-panic. It is hope that our society had advanced far beyond the mass hysteria of the 14th century and even of the 1950s. As scientific observers identify new illnesses during this information age, we will have more microscopic maladies with which to be concerned. In light of that, as things seem overwhelming, one can't help but harken back to the Dark Ages, when the Black Death reigned supreme and the human race was thought to be doomed. Calmer heads must prevail.

Dr. Mark Lindau is a local pediatrician. If you wish to address a question to the doctor or comment on the column, mail it to: "Kid Talk," c/o This Week magazine, P.O. Box 23099, Tigard, Oregon, 97223.



COMMUNITY DENTISTRY

BY Dr. Edward Ward

Improving Your Smile

Part II

Last week I talked about bonding, capping and bleaching, all dental techniques intended to improve the looks of your teeth, thus making you feel more comfortable about smiling. There's no need, after all, to feel embarrassed about those stains or gaps so many of us have.

Did you know that crooked or crowded teeth not only increase your risk of cavities and gum disease (because the teeth are hard to clean), but may also cause bite problems and sometimes headaches? "Many headaches," according to Dr. Thomas M. Graber of the American Journal of Orthodontics, "are due to teeth meeting improperly, both during chewing and at night when clenching or grinding creates excessive pressure on the jaw joint."

Braces, a combination of wires and brackets in either a fixes or removable appliance, can be used by an orthodontist to straighten teeth. Sometimes, only a combination of orthodontics and surgery can correct a bite defect. These modern techniques can improve one's appearance and relieve discomfort to a great extent. Whether you need minor or complicated surgery, or just a cosmetic technique can be determined by your dentist. The important thing to remember is that something can be done to make you feel good about yourself and your smile.

New Medication May Lower Black Hypertension

A team of medical researchers has reported in the current issue of the Journal of the National Medical Association that a new blood pressure medication, Normodyne (labetalol HCl), may be less costly in treating Black patients than the most commonly used antihypertensive drug.

American Blacks have one of the highest rates of high blood pressure in the world — an estimated 38 percent as compared to 29 percent for Whites. The situation has been called a major national public health menace by medical authorities.

A research team, headed by Dr. Gerry Oster of Policy Analysis, Inc., Harvard Medical School and the National Center for Health Statistics, found that the drug labetalol and propranolol, to which it was compared, lower diastolic blood pressure among Black adults with mild-to-moderate hypertension by 11.2 mmHg and 8.4 mmHg, respectively. The review also found that Normodyne reduced costs between $190 and $212 annually.

Dr. Oster said that labetalol is a new drug, known as an alpha-beta blocker, while propranolol is a traditional beta blocker. The later medication is considered the benchmark against which all anti-hypertensive agents are measured.

Earlier studies have also shown that beta blockers are less effective in Blacks. One authority, Dr. Harriet Dustan, director of the cardiovascular research and training center at the University of Alabama School of Medicine in Birmingham, said, "beta blockers used so extensively for control of high blood pressure don't work well at all in Black people."

The review, in the Journal of the National Medical Association, the official publication of the nation's Black physicians, reported that in 1983, approximately 18,600 Black men and women died of stroke, the third leading cause of Black mortality after heart disease and cancer. Hypertension is a major risk factor for stroke.

Policy Analysis, Inc., a Brookline, Mass., study group, estimated that for 1,000 patients treated with labetalol, there would be two to seven fewer strokes experienced over a 10-year period, depending upon age and sex, and annual drug costs would be reduced by $190. For patients requiring the addition of a second drug, annual costs would be $205 and $212 lower for those treated initially with labetalol.

Many people find that mayonnaise removes white water marks left on table tops. Apply, rub in, let stand for about an hour and wipe clean with a soft cloth.