

HEALTH

Mental Health Considerations

Mental disorders in pregnant, substance-using women often go undetected by health care providers and alcohol and other drug treatment staff. It is essential that a dual diagnosis be made, when appropriate, and addressed in subsequent treatment planning. The complex combination of pregnancy, addiction, and mental illness requires a carefully coordinated approach. The following general guidelines can be useful in assessing the mental health of pregnant, substance-using women.

Mental Health Assessment:

- Distinguish between drug-induced psychiatric symptoms and a major mental disorder. Symptoms such as anxiety, agitation, and paranoia can be manifestations of a state of drug intoxication or of the withdrawal syndrome itself, and at times require no medications. On going psychosocial support may help minimize many of these symptoms.

- On the other hand, confirmed mental illness may necessitate the continuation of medications, such as antidepressants or antipsychotics, which have been previously effective in treating the underlying disorder. It is mandatory that a diag-

nosis of mental illness be ruled out before such medication is stopped. It must be remembered that evidence is inconclusive regarding the safe use of any psychotropic medication in pregnant women. A thorough assessment of the risks versus the benefits must be made prior to administering these medications.

- Establish any previous history of psychiatric illness before developing the medical withdrawal treatment plan. Efforts should be made to contact previous therapists, treating agencies, and mental health facilities for this crucial information.
- Establish communication early in treatment with mental health personnel involved in the patient's care. These individuals often can provide important history, help build an alliance with the patient, support discharge planning, and provide assistance in the event of an acute management crisis.
- Individualize medical withdrawal plans for each patient. Carefully review standard guidelines and amend them if there are significant psychiatric problems to be treated.
- Set up arrangements to involve mental health personnel where appropriate, in establishing diagnoses and in developing the treatment plan.

• Continue prescribed medications and provide appropriate followup for patients who enter alcohol and other drug treatment programs with well-documented, diagnosed psychiatric illnesses that require psychopharmacologic medications.

- Continue any prescribed medications, such as methadone and chlordiazepoxide, except as advised by the patient's health and mental health care providers. Patients should be supported in this decision by treatment programs. Some support groups may inappropriately encourage women to abandon all medications.

- Do not avoid seeking therapy for the patient because of the complex combination of pregnancy, addiction, and psychiatric problems. Careful planning and staff coordination are usually effective in treatment.
- Use well-validated psychiatric assessment scales in the diagnosis and followup of individual patients.
- Consider issues of co-dependency, adult children of alcoholics/other addictions, and deep trauma from childhood in the evaluation of patients.

May Is Better hearing & Speech Month

Practical Tips To Prevent Or Treat Speech, Language And Hearing Disorders

One in six Americans has a speech, language or hearing disorder that affects the ability to communicate. A communication disorder can happen to anyone at any time, limiting the potential for academic, social and career achievement. But many communication disorders can be prevented, say professionals observing Better hearing and Speech Month this May.

Loud noise can permanently damage hearing. Your lawnmower, the headphones on your personal stereo, and the appliances in your home can take a toll on your hearing. To protect your hearing from noise damage, turn down the volume, wear earplugs when operating loud equipment, and give your ears a rest by alternating noisy activities with quiet ones.

Injuries resulting from accidents can damage your abilities to speak and understand. Faithfully buckle seatbelts. Always use child care safety seats properly. Wear approved bicycle safety helmets to protect yourself and your family from brain injury.

Speech, language and hearing disorders in children can result in developmental and academic de-

lays. Help your child develop good speech and language skills. Talk to your child naturally. Talk about what you are doing, what you see, what your child is doing, and what your child sees. If you have concerns about your child's speech, language, or hearing, don't wait to get professional help. Early identification and treatment are critical to reducing developmental delays and to expanding communication skills.

If you have any questions about hearing or speech, observe Better Hearing and Speech Month by calling on the professionals who diagnose and treat communication disorders. Audiologists specialize in preventing, identifying, and assessing hearing disorders as well as providing treatment including the selection and fitting of hearing aids and other assistive listening devices. Speech-language pathologists identify, assess, and treat speech and language problems including swallowing disorders.

Recent advances in technology and treatment have enabled speech-language pathologists and audiologists the ability to offer a variety of rehabilitative options, such as sophisticated hearing aids, computer technology for stutter-

ing treatment, and augmentative communication systems for individuals who are unable to speak verbally.

Better hearing and Speech Month is observed by speech-language pathologists and audiologists across the country with free speech, language and hearing screenings, open houses at clinics and other facilities, and a variety of other events to inform the public about communication disorders and treatments.

The American Speech-Language Hearing Association (ASHA) is the national professional, scientific and accrediting organization for more than 77,000 audiologists, speech-language pathologists, and speech-language and hearing scientists. ASHA's Information Resource Center provides free brochures and other information on speech, language, and hearing disorders to more than 20,000 consumer annually. Consumers can call 1-800-638-8255 for brochures on topics such as noise and hearing loss, how to buy a hearing aid, stuttering, voice disorders, language delay in children, and ear infections and hearing loss.

Allergies Galore Await Newcomers To Western Oregon

When it comes to allergies, you can run but you can't hide. That's especially true for the tens of thousands of people who each year move to pollen-rich Western Oregon.

Ken Ettinger, MD, is an allergist at Kaiser Permanente's East Interstate Medical Office in North Portland. "People who move to Portland from other regions usually have a honey-moon from their allergies for about a year. Californians leave behind the allergy-aggravating mulberry and olive trees, and folks from the Midwest and eastern states find ragweed is much less of a problem here," says Dr. Ettinger. "But from

their first breath here, these newcomers are exposing themselves to Western Oregon's own allergy culprits."

By their second or third year in Portland, susceptible individuals will be fully sensitized to local allergens and may face full-blown allergy attacks.

"The chief villains in this area are grass pollens," says Dr. Ettinger. "The Willamette Valley has a large grass-seed industry. Pollen from those grass farms, as well as from meadows and roadsides, drifts into Portland on the wind. There are many species and most are 'cross-reactive.' If you are allergic to one kind, such as bluegrass, you will usually be aller-

gic to a host of others, such as fescue and ryegrass. Anyone of any race can be affected."

Surprisingly, showy blossoms usually indicate a tree or shrub is not a source of sniffles and sneezing. That's because such plants typically are attracting bees to carry their pollen rather than relying on the wind, says Dr. Ettinger. So less pollen gets carried into human nostrils. Portland's allergy season runs from March through fall. Here's what's provoking those runny noses and itchy eyes during different months: March-June, tree pollens; May-July, grass pollens; July-September, weed pollens.

Best News Program

The Oregon Associated Press Broadcasters Association named KPTV-12's The 10 O'Clock News the "Best News Program" in the Portland metropolitan television market for 1993. KPTV general manager Marty Brantley commented, "It's gratifying that the professionals in news broadcasting recognize our outstanding news department as the best in their peer group. All of us at Channel 12 are very proud of The 10 O'Clock News and this honor."

KPTV-12 swept the AP category, "Best Treatment of a Single Subject," with the following awards: first place to Lars Larson and Gordon Coffin for "Sound Decisions," and honorable

mentions to Dave Thompson and Larry Cnich for "Chaos in Croatia," as well as "Romania: The Children Forgotten."

The AP "Best News Program" honor for KPTV-12 follows other recent highly-acclaimed news recognition such as the Peabody Award; National Gabriel Award silver medal; the National Headliner Award; the Silver Gavel Award from the American Bar Association; and consecutive honors for Mike O'Brien as the Oregon Sportscaster of the Year in 1991 and 1992.

The 10 O'Clock News continues its tradition of award-winning journalism at a time that works for working people.

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