

Health & SCIENCE



Strep And Rheumatic Fever

A group streptococcal infection in the throat is called streptococcal pharyngitis or strep throat.

Strep throat is not caused by viruses. It is caused by streptococcus bacteria.

Strep throat should be diagnosed by a pediatrician or family physician using a throat culture.

Strep throat should be treated with penicillin, as recommended in the June 1996 supplement of PEDIATRICS and by the American Academy of Pediatrics, the World Health Organization and American Heart Association.

Penicillin is also available as a single injection, which is preferable when adherence to a ten-day regimen of oral penicillin might be difficult.

Strep throat can be distinguished from other sore throats by its suddenness and trademark high fever

(over 101), redness and swelling at the back of the mouth, swollen, tender lymph nodes on the neck, and the possible absence of a runny nose and coughing.

Strep throat can lead to rheumatic fever in as little as two weeks if the strep is not properly diagnosed and treated. Children between five and 15 are most commonly affected.

Symptoms include fever with pain, inflammation and swelling in one or more joints. Heart damage can develop slowly, often resulting in a thickening and scarring of the heart valves that can eventually require surgery.

Symptoms of rheumatic fever include continued fever, swollen wrists, knees or ankles, a warm feeling in the swollen joints, and swelling migrating from joint to joint.

Treatment for rheumatic fever includes penicillin and bed rest for

more than a month. To avoid another attack, a child must receive preventative treatment with penicillin once every month until he or she is 18 years old or older.

Rheumatic fever and other complications of group A strep infections are now more of a concern for health care providers because serious group A streptococcal infections have reemerged during the last ten years as a public health problem.

Many current strains of group A strep may be virulent and result in a higher risk of mortality for both children and adult.

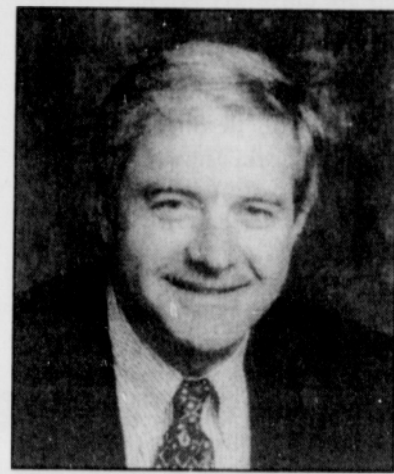
Other complications of group A strep include streptococcal toxic shock syndrome and tissue infections such as necrotizing fasciitis, the flesh eating virus, both of which have a reported mortality rate of 30 percent or higher.

Van Pelt Elected To Catholic Health Association Board

Greg Van Pelt, Chief Executive, Providence Health Plans--Sisters of Providence, Portland, OR, has been elected to serve a three-year term on the Board of Trustees of the Catholic Health Association of the United States (CHA).

He was installed during CHA's yearly business meeting at the 81st Annual Catholic Health Assembly in San Antonio.

Van Pelt has been with the Sisters of Providence since 1975 where he has held numerous executive positions. He is currently a member of the American College of Healthcare Executives, Oregon Association of Hospitals, Providence St. Vincent Medical Center Foundation Council of Trustees, Good Health Plan of Oregon Board of Directors, Jesuit High School Board, Rotary Club of



Gregory Van Pelt

Portland, and Youth Employment/Empowerment Coalition Board of Directors.

Van Pelt received a bachelor's degree in economics from Villanova University, Philadelphia, PA, where

he graduated magna cum laude. He attended St. Louis University and received a master's degree in health care administration and was the recipient of the Rev. John J. Flanagan, S.J. Scholarship.

He also did post-graduate work at Western Network Institute for Health Care Executives, University of California, Berkeley, and Kennedy Institute of Ethics-Intensive Bioethics at Georgetown University, Washington, DC.

Celebrating its 81st anniversary, the Catholic Health Association of the United States represents more than 1,200 Catholic-sponsored facilities and organizations.

The members make up the nation's largest group of not-for-profit healthcare facilities under a single form of sponsorship.

California Children Have More Cavities, Survey Finds

California children ages six to eight are far more likely to have cavities than youngsters in the rest of the nation, according to data from a statewide survey.

Known as the "California Oral Health Needs Assessment of Children," the survey found that 73 percent of the state's children in this age group examined during 1993-94 had experienced cavities in their teeth. This compares to 53 percent nationwide in the same age range according to a National Institute of Dental Research survey in 1986-87.

Both figures are far from the goal of a prevalence rate of no more than 35 percent for children of this age proposed by the U.S. Public Health Service, says Howard Pollick, BDS, MPH, Principal Investigator for the California Assessment Survey and a clinical professor in the Department

of Dental Public Health and Hygiene of the UC-San Francisco School of Dentistry.

The USPHS goal was published in 1991 as part of a special report titled, "Healthy People 2000."

Pollick recently presented a preliminary summary of some of the California data at the International Association for Dental Research annual meeting in San Francisco. The full report is expected to be published in the fall.

The California assessment involved 6,643 children in three age groups: pre-school, elementary (K-3), and high school (grade 10). It was conducted by The Dental Health Foundation, a private nonprofit group, under contract with the Maternal and Child Health Branch of the California Department of Health Services with additional funding

from The California Wellness Foundation.

Pollick says the high prevalence of tooth decay in California children is related to the state's past lack of commitment to fluoridating drinking water. Until last year, California communities could choose whether to add fluoride to water and most didn't. However, recent legislation requires the majority of California communities to fluoridate when funding becomes available.

"Only 15.7 percent of Californians have access to fluoridated water now," says Pollick. "We're 47th out of all the states."

The statewide assessment included data on 391 15-year-olds in 30 California public schools.

"Here, the figure was more comparable to the national average," Pollick says. Seventy-one percent of

these teens had experienced cavities, compared to 78 percent nationwide in 1986-87. The Healthy People 2000 goal is no more than 60 percent.

The survey also found that dental health varied widely depending on the socio-economic and ethnic status of the children. Among the 6 to 8 year-olds, 86 percent of children whose parents had less than a high school education had experienced tooth decay, while 70 percent of the African-American, 84 percent of Hispanic/Latino, 90 percent of Asian and 61 percent of white children had known cavities.

In addition, the survey looked at the number of children whose teeth are protected by dental sealants. Again, Pollick draws a correlation between fluoridation and dental health.

"Our study found that in the fluoridated areas we went to in San Fran-

cisco, the East Bay and Long Beach, a higher proportion of children received sealants," he says. "This is because sealants are applied to healthy teeth when a child gets his or her first permanent molars around age 6. A sealant is not applied if a tooth has already developed a cavity, as it is more likely in an unfluoridated area."

"We believe this is consistent with the idea that you apply sealants to protect the teeth," he adds. "It's a preventive modality. I think fluoridation will help us achieve our goals for sealants."

Of the 776 8-year-olds in the California survey in 1993-94, 10 percent had one or more sealants on their first molars, compared to 11 percent nationwide in 1986-87. The Healthy People 2000 goal is 50 percent.

The prevalence of sealants in California varied widely, Pollick notes,

ranging from a high of 54.5 percent for children whose families were not poor and who lived in fluoridated urban areas, to a low of 0.6 percent for Latino children from all income groups living in rural areas.

Among California 15-year-olds, the survey found a total of 12.6 percent had sealants, with a range in fluoridated urban areas from 37.8 percent for white students, to a low of zero for Asian students. The national survey showed 8 percent of 14-year-olds had sealants in 1986-87.

Co-investigators of the assessment project are Patricia Kipnis of Kaiser-Permanente in Oakland, Calif., Joanne Wellman and Robert Isman of the California Department of Health Services, James Ellison of the UCSF School of Dentistry, and Jared Fine of the Alameda County Health Care Services Agency.

More Than 5,300 Immunizations

More than 5,300 young Oregonians received immunizations at over 120 Free clinic sites during the week long statewide "Immunize '96 Campaign."

The "Immunize '96 Campaign" was the third annual effort by the Oregon Preschool Immunization Consortium (OPIC) to help increase immunization awareness and percentages of adequately immunized infants and children.

All counties in Oregon offered FREE clinics during April 21 - 27, which was "National Infant Immunization Week."

"We at OPIC are determined to

make sure all Oregon's children are protected from vaccine-preventable diseases, and this year we took another major step forward," said Megan Osborn, chairperson for the Campaign. "With each immunization campaign, we are getting closer to our goal, which is to fully immunize 90 percent of Oregon's two year olds by the year 2000."

About 27,000 of Oregon's children have not received adequate immunizations before their second birthday.

Age appropriate immunizations protect against ten serious diseases: measles, diphtheria, tetanus, pertussis (whooping cough), polio, mumps,

rubella (German measles), hepatitis-B, hemophilus influenza type-b (common cause of meningitis) and chickenpox.

This year's campaign includes a partnership with over 150 McDonald's restaurants throughout the state. Each McDonald's provided in-store education materials on the importance of immunizations and local clinic information as well as special immunization record cards and bandaids to clinic sites.

"McDonald's have helped us get our important message out to families all over Oregon," added Osborn.

Minority Medical Students Gain Support To Fill Critical Healthcare Gap

Check the yellow pages under "Physician" in most inner cities or rural communities, and you'll quickly see why it's dangerous to get sick there. Your chances of seeing a doctor are slim.

The critical shortage of skilled doctors in poor urban and outlying rural areas--now reaching crisis proportions in the U.S.--has been the subject of recent articles in The Wall Street Journal and USA Today. Both papers noted one glimmer of hope in order to practice their life's work and give something back to their communities.

But this potential solution to the urban/rural doctor shortage has an inherent snag. Due to environmental circumstances--such as personal finances, family issues or lack of exposure to accelerated exam methodology in their early schooling--minority students are sometimes impeded in their performance on the U.S. Medical Licensing Boards. Although they possess the keen medical and clinical knowledge required to be fine doctors, these students need practice with question types, answer patterns and how to battle test fatigue, skills that their peers from more affluent school districts developed in high school. That's where ArcVentures Medical Education Services steps in to help level the playing field.

ArcVentures Medical Education Services is a study assistance program affiliated with Rush-Presbyterian-St. Luke's Medical Center in Chicago--one of the nation's most prestigious non-profit healthcare institutions. It is the only hospital-sponsored study program in the nation.

By drilling these bright, accomplished students in the art of test-taking strategies, ArcVentures helps to bridge the "testing gap" left from their early schooling--and boosts their confidence along with their test scores.

ArcVentures' commitment to helping remove one of the barriers to minority doctors is heartily endorsed by the Student National Medical Association (SNMA), an organization founded 31 years ago to promote timely matriculation for medical students of color.

"The shortage of minority doctors is a critical piece of the healthcare puzzle that severely impacts care," says Jason Denny, immediate past Chairman of the Board of Directors of SNMA, and himself, a fourth-year medical student at Mt. Sinai Medical School in New York City. "We are more likely to go back to our own communities to serve, where the need is greatest. If you understand the community where a patient came from, you have more compassion--

you see them as your grandmother, your brother, your aunt--and you better understand how they view the medical profession through the prism of their own culture."

Founded in 1988 at the request of students who wanted a hospital-sponsored study course, ArcVentures has grown in direct response to the shortage of affordable healthcare professionals in the U.S. The program currently sponsors 38 medical review courses at 20 medical schools year round, located in the U.S., San Juan, Puerto Rico, and Guadalajara, Mexico.

Courses are also offered at ArcVentures' satellite locations in Chicago, Houston, Los Angeles, Miami, New York City, Washington, D.C. and Clifton, New Jersey. Faculty members are professors from major medical schools and practicing physicians, and are selected strictly for their teaching experience, enthusiasm and reputation. To date, ArcVentures has helped more than 14,000 American medical students and foreign-trained physicians prepare for top scores on their Boards.

What is the use of running when you are on the wrong road?

—Old saying

Hypertension-Complicated Pregnancies

African-American women suffering from a common condition of pregnancy, maternal hypertension, experience serious complications at a far higher rate than women of other ethnicities. This was discovered in a five-year, nationwide retrospective study by the Morehouse Treatment Effectiveness Center (MTEC) at Morehouse School of Medicine (MSM).

African-American women were more than four times more likely than other women with hypertension to suffer inadequate fetal growth; three times more likely to experience serious bleeding before going into labor; and twice as likely to deliver early.

The study was published in the April issue of Obstetrics and Gynecology.

Providence Run For Good Health And Family Fitness Fair

One of Portland's premier running and walking events is set for Sunday, July 14. Providence Health System is sponsoring the Providence Run for Good Health and Family Fitness Fair.

After crossing the finish line, people can join in the fun in Pioneer Courthouse Square. From 8 a.m. until noon, Providence will sponsor music, clowns, bike safety and informational

"The higher incidence of maternal hypertension and the increased risk of pregnancy complications shown by our research may explain why African-American infants experience a lower average birth weight, more premature deliveries, and more infant illness and death than other American babies," said Aziz R. Samadi, M.D., M.P.H., lead investigator of the study.

booths focusing on good health, plus an awards ceremony. Entry fees are \$6 (without shirt) and \$15 (with shirt) before July 14. The fees will be \$8 and \$17, respectively, the day of the race.

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Friends of Trees' Seed the Future with Portland General Electric

Portland General Electric's Employees Seed the Future.

"Seed the Future" is a five year partnership with Friends of Trees to plant 144,000 trees and seedlings around Portland. Those trees will help beautify neighborhoods and purify our air. At PGE, we think a power company can do more than make a profit. It can make a difference.

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