lealth & Science



Strengthening Medicare: the critical next steps

Medicare has protected the lives and health of more than 30 million older Americans for more than 30 years. For many of our parents, Medicare has been their only protection from the soaring costs of health care, and their only hope of affording the care they need.

But, even with Medicare's help, older Americans are spending more and more of their income to buy overpriced drugs and foot the bill for long term care.

The High Price of Medicines

Look at what's happening to two older Americans: Mary Johnston and Celia Mahoney

Mary Johnston's husband died eight years ago. Today, at 73, she's struggling to get along on \$726 a month from Social Security. Mrs. Johnston began working six decades ago, when she was twelve years old. After a lifetime of hard work, Mrs. Johnston still isn't on Easy Street. It would be tough enough making ends

meet if all she had to worry about were rent and groceries. It's all her medications that makes it near impossible to get by on \$726 a month.

Mrs. Johnston doesn't complain about her health, but she lives with diabetes, a heat condition, and arthritis,

so her medicines are expensive. Each month she has to come up with \$128 for prescription drugs she needs to survive.

That's a big chunk of her income. Sometimes she skips meals. Sometimes she skips pills.

So, what happens? Well, one time, she wound up in the hospital for skipping pills.

The Crushing Burden of Long Term Care

If Medicare fails Mary Johnston on the cost of drugs, it fails Celia

long term care. She's been in a nursing home for seven years -- at the staggering cost of \$36,000 a year. That's twice what she gets in pension and Social Security, so she's going through her savings.

BY ROY POLLACK Even though she saved and saved throughout a life of hard work, there's not much left.

Some days, she stares out the window, weeping that everything she worked for is disappearing: her saving and her dignity.

Rather than being able to help her children, she may soon have to turn to her children for help.

Her daughter, Dorothy, has two children in college. Dorothy worries about her mom, but she's also worrying about what the cost of long term care is going to do to the family

budget, already straining to cover tuition for two kids in college.

It's Time to Strengthen Medi-

Unfortunately, the stories of Mary Johnston and Celia Mahoney are not even unusual these days.

For all the good that Medicare has done for older Americans, more needs to be done. It's time for America to take the next step.

Medicare should be strengthened, and it should cover prescription drugs and long term care. That's a priority for American families, and it should come ahead of new tax loopholes for the wealthy.

America has Social Security and Medicare only because our parents created them for their parents.

It's our turn to do what needs to be done for our parents, our children and ourselves.

Ron Pollack is executive director of Families USA, the national health care consumer group.

Early detection saves lives

Prostate cancer is in the future of one of every 11 men.

"Prostate cancer can spread without pain or other symptoms," Says Dr. Ronald Morton Jr. of the Baylor Prostate Center at Baylor College of Medicine in Houston, "which makes it all the more important to get regular examinations." According to Morton, the risks for black men are slightly higher.

Possible warning signs, which are even more likely to be symptoms of benign prostatic hyperplasia, include:

- · Difficulty in beginning or maintaining a urinary stream.
- · Frequent urination, especially
 - · Weak or interrupted urine flow.

· Painful urination or ejaculation. · Presence of blood or puss in urine or semen.

A doctor can detect prostate cancer by using a combination of physical examination, blood and urine tests and ultrasound scanning.

A rectal exam can determine if the prostate feels hard, a possible sign of cancer. The procedure, done in a physician's officer, is simple, quick and only slightly uncomfortable, Morton said

A prostate specific antigen, or PSA, test can help make the diagnosis, but a biopsy of the prostate is needed to confirm the presence of cancer. The PSA test is also used to follow the progress of the disease after the patient has been treated.

Beat the summer heat

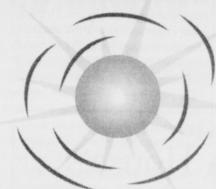
Last year's summer weather caused a number of deaths. Heatrelated illnesses have increased. These illness include heat cramps, heat exhaustion and heat stroke. All of these illness are caused by overexposure to the heat. Heat cramps are the least severe of the three.

This condition is usually the first signal that the body is having problems with the heat. Heat cramps are severe and painful muscle spasms. They occur usually in the legs and abdomen and can be viewed as a warning signal for a more severe heat-related emergency.

To treat heat cramps you should have the injured person rest in a cool place. You can give the person cool water or a sport's drink. Rest and fluids are usually all the person needs to recover.

To help make the person comfortable, help them to stretch the muscle and gently massage the area. Salt tablets or salt water is not recommended for the treatment of heat related illnesses. They could make the emergency worse.

When the cramps stop, you can usually go back to your regular activ-



ities. But you should keep in mind that you should drink more water before, during and after activities.

Heat exhaustion is more serious than muscle cramps. This condition often affects people who have to wear heavy cloths or work in extremely hot and humid conditions.

The signals include cool, moist, pale or flushed skin, headaches, nausea, dizziness, weakness and exhaus-

Heat stroke is the least common heat illness, but it is the most severe. It occurs most often when people ignore the warning signals of heat cramps and heat exhaustion. Heat stroke is a serious medical emergency because the body's systems begin

to stop functioning. The signals of heat stroke are red, hot dry skin, changes in consciousness, rapid weak pulse and rapid shallow breathing.

When a heat related illness is caught early, you usually stop it from becoming serious. The following tips are recommended by American Red

- 1. Get the victim out of the heat.
- 2. Loosen tight clothing 3. Remove perspiration soaked
- 4. Apply cool, wet cloths to the

5. Keep the victim cool. If you have ice packs or ice place them on the wrist ankles, on the groin, in each armpit and the neck to cool the large

6. If the victim is conscious, give cool water to drink. Don't give the victim water if he/she should start to

7. Call for an ambulance if the victim refuses water, vomits or starts to lose consciousness

8. Keep the victim lying down or resting in a comfortable position. Look for changes in the victim's con-

Selecting a nursing home

Placing a loved one in a nursing

Baylor College of Medicine in Houston.

nursing homes should:

- home was inspected and granted a
- · Determine if the medical di-
- · Determine if the facility has
- with a hospital. • Find out if a professional so-
- every stage of the admission process to help ease the transition.
- Include the loved one in visiting and evaluating the nursing home, if possible.

home is difficult task.

"There are many factors to consider," said Dr. Husam Ghusn of the Huffington Center on Aging at

People who are comparing

- · Find out when the nursing
- · Check the staff-to-patient ra-
- rector is qualified in geriatric med-
- an emergency-transfer agreement
- cial worker will be available at

SOME BOO-BOOS, A KISS CAN'T FIX.

Making a personal commitment to take time out for you may mean reshuffling priorities. With our unique roles as mother, wife, sisters, career women - and sometimes all of the above - our schedule is already full.

it the best of care.

Cherish your body for the great gift that it is, and give

Make Self Care A Priority

It is recommended that women 40 and older get annual health exams. Early detection saves lives.

If you are 40 or older you may qualify for a free Women's Health Check, which includes a pap test and mammogram.

Sign Up for the Race For The Cure September 8th, 1996

For more information call 795-3908



Multnomah County Breast and Cervical Cancer Partnership



Susan G. Komen **Breast Cancer Foundation**





Over \$11 million for **MS** research

More than \$11.2 million have just been committed by the National Multiple Sclerosis Society to support 46 new research projects and other programs by top scientists investigating many aspects of multiple sclerosis (MS).

These 46 new projects are part of a National Multiple Sclerosis Society program that will spend some \$15.4 million this year to advance research, including funding 200 MS investigations in the U.S. and abroad.

The National Multiple Sclerosis Society funds more MS research than any voluntary agency in the world.

The Oregon Chapter of the National Multiple Sclerosis Society contributes funds toward these research efforts to end the devastating effects of this nervous system dis-

A new drug that helps some peo-

ple with MS, Avonex (TM), went on

the market in May 1996, joining

Betaseron(R), which became a pre-

scription drug for MS in 1993. A third new drug--Copaxone(TM)-awaits marketing approval by the U.S. Food and Drug Administra-

The National Multiple Sclerosis Society's commitment to supporting MS research includes two (2) MS research projects in the Oregon Chapter area, representing a total funding of \$109,604. These include ongoing investigations at Oregon Health Sciences University and the VA Medical Center, both in Port-

MS is an unpredictable disease that attacks the nervous system and wears away control over the body. MS strikes in the prime of life, with symptoms ranging from imbalance and numbness to paralysis and blind-

For more information about MS research or local programs and activities, contact the Oregon Chapter of the National Multiple Sclerosis at 1-800-422-3042.







Polio. Measles. Diphtheria. Whooping Cough. The fact is, once a child contracts a scary disease like this, there's not much a parent can do. It's up to the doctors. And fate. Which makes it inconceivable that 33% of Oregon children still aren't fully immunized by the age of two.

Yes, School Law requires they be immunized by kindergarten. But unfortunately, that law also creates the perception that it's okay to wait until then. People don't realize that waiting puts their infants at risk. Unimmunized infants are not protected. Therefore, they are more likely to get diseases and to have severe side effects from them.

Truth is, 80% of all vaccines can be given by age two. Safely. All it takes is four quick visits to the doctor. Meaning you must follow through with all the shots. They don't have to cost a lot either.

Most important, don't be afraid to ask your doctor, nurse practitioner or health department questions. And keep track of your child's immunization schedule. After all, the one who can best take care of your baby is you.

Free or low cost immunizations available. For more information call 1-800-SAFENET (1-800-723-3638) or in the Portland Metro area call 306-5858.

OREGON PRESCHOOL IMMUNIZATION CONSORTIUM INCLUDING MEDICALD

Babies and sun not a good mix

"Children younger than 6 months should not be exposed to sun for long periods and never placed in direct sunlight," said Dr. Jan Drutz,

a pediatrician at Baylor College of Medicine in Houston. "In addition, it's not a good idea to take an infant to a sandy beach or a swimming-pool area," Drutz said. "Sunlight can reflect off the

water or the sand, causing sunburn even when an umbrella is used." If being outside is necessary, dress the baby in light-colored clothing, keep a bonnet handy and try to avoid being outside between 10 a.m. and 3 p.m.