

# Health & Science



## Low-calorie diets key to cancer prevention

BY THE AMERICAN INSTITUTE FOR CANCER RESEARCH

Ever since weight-loss "dieting" became popular in the 1960s, cutting calories has been the key to shedding unwanted pounds.

But when studies during the 1980s found that saturated fat in Americans' diets was one of the main causes of heart disease as well as weight gain, fat became the new villain in our food.

Since then, hundreds of reduced fat food products have gone on the market, and millions of Americans have seen them as the answer to eating for better health.

Yet statistics show that obesity in this country is increasing, with one-third of all Americans--about 67 million people--at least 20 percent overweight. Where did we go wrong?

According to cancer researcher David Kritchevsky, Ph.D., of the Wistar Institute in Philadelphia, "In the United States, cholesterol counts seem to have fallen, while the incidence of obesity has gone up. This

may be because we have done such a good job of selling the idea that fat and calories are the same thing, that the public will eat a box of fat-free cookies thinking that there's no fat, so it's okay. The problem is, the other ingredients used in those cookies might give them the same number of calories as if fat had been used."

Calories and the rate at which we burn them through exercise have been found to play a vital role in our risk for colon, prostate and breast cancer development, according to several studies conducted with both women and men in the past decade.

"We now have data on well over a million people that show that the more overweight you are, the higher the number of cancers for which you become at risk," Kritchevsky noted. "If you are a male the risk of prostate cancer is increased if you're at greater risk for colon cancer."

Low calorie diets key to cancer prevention, researchers say

Researchers believe from this and other evidence that restricting the

number of calories we eat as well as burning them off through regular exercise is at least as important as cutting back on fat.

Kritchevsky cited one experiment with skin cancer where mice got more tumors from a diet that was high only in calories and not in fat, than from another diet that was high in fat.

He added that in studies where rats were given treadmill exercise, their incidence of tumors was as much as 25 percent lower than among rats that did not exercise.

Kritchevsky said that it's easier to reduce calories by not taking them in rather than trying to work them off. "We eat too much. For example, the portions we now get at restaurants are huge. Populations that eat too much have high rights of cancer. Finnish lumberjacks are known to eat about 7,000 calories a day, but since they're chopping wood at 40 below zero degrees, they're also burning 7,000 calories a day. Most of us are always trying to make life less strenuous, like driving everywhere

instead of walking, taking elevators instead of the stairs, so we don't burn the same amount of calories we eat."

AICR researcher T. Colin Campbell, Ph.D., chaired Professor of Nutritional Biochemistry, Cornell University and director of the Cornell-Oxford-China Diet and Health Project, added, "In China, calorie consumption is about 30 percent higher than it is here, but those calories come from a diet that is much higher in plant foods, especially vegetables.

The Chinese are much thinner than Americans not only because of their diet, but because they exercise more than we do, because they ride to work on bicycles and have exercise regimens in schools and workplaces."

The American Institute for Cancer Research advises eating a diet that is rich in low-calorie, low-fat and high-fiber vegetables, fruits, and whole grains. The Institute also recommends eating meat in moderation (no more than 4 ounces per meal); and drinking alcohol in moderation, if at all.

## African-American health briefs

### Prostate cancer a major threat to black men

Annual prostate examinations are important for black men 40 and older. "That's because prostate cancer is in the future of one in nine black men," said Dr. Ronald L. Morton, Jr. of the Baylor Prostate Center at Baylor College of Medicine in Houston.

The disease can spread without symptoms, but a physician can detect prostate cancer by using a combination of a physical exam, blood and urine tests and ultrasound scanning.

A rectal examination, done in a doctor's office, can determine if the prostate feels hard, a possible sign of cancer. The exam 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.

### High blood pressure needs attention

High blood pressure is a major cause of death and debilitation among black people, and most blacks know someone with high blood pressure or hypertension.

Blacks are twice as likely to have the disease as other Americans and more likely to suffer hypertension-related medical complications, said Dr. James L. Phillips of Baylor College of Medicine in Houston. People with high blood pressure need to be under a physician's care, but they also can reduce their blood pressure by reducing salt in their diets, avoiding tobacco and alcohol, losing excess weight and exercising regularly.

## Artificial limb with real life

Like most managers, Nita Weil spends her work day talking on the phone, typing on the computer and supervising staff. But unlike most managers, she does it all from a wheelchair, with the use of only one arm supported by an orthosis.

"New understanding of biomechanics, lighter plastics and stronger materials have led to orthosis that make life easier for patients with disabilities," said Thomas Lunsford, an assistant professor in the department of physical medicine and rehabilitation at Baylor College of Medicine in Houston. We've come a long way from bulky steel braces and heavy leather shoes."

Unlike prosthetics, which involves the artificial replacement of a missing body part, orthotics refers to a mechanical device designed to re-

store function or to prevent or correct deformities.

Over the past 30 years, there have been major advances in the field of orthotics that have allowed patients with spinal cord and brain injuries and those afflicted with muscular dystrophy and past-polio syndrome to become more active and independent.

Upper-body supports are more streamlined, orthosis (braces and splints) and walking shoes are lighter and upper-limb orthosis allow for greater range of motion.

"I've been working at The Institute for Rehabilitation and Research (TIIR) for 38 years now," said Weil. "But I couldn't have worked a day without my mobile arm support unit."

The unit, powered by carbon dioxide inflation of an artificial mus-

cle, represents one of the significant advances in the field of orthotics.

Weil has been paralyzed since being stricken with polio at the age of 22. But that has not prevented her from becoming the director of volunteer services at TIIR. She oversees a team of 200 volunteers at the hospital, and orthotic technology makes it possible.

With the help of the mobile arm unit, which supports and guides her left arm, Weil is able to use the working muscles in her arm. Without the unit, she would not be able to type on a keyboard or dial a telephone.

"When you get an orthosis that helps you write your name, work on the computer or drive a car, it opens up a whole new world for you," Weil said.

## BCBSO names Tia Dorsey Vice President of Human Resources

Tia Dorsey of Portland has been appointed Vice President of Human Resources for Blue Cross and Blue Shield of Oregon/HMO Oregon, according to Donald Sacco, President.

As VP of Human Resources, Dorsey now manages a staff of 28, and oversees the salary, benefit and working condition issues of more than 2,300 BCBSO/HMO Oregon employees throughout Oregon and Southwest Washington.

She has been with BCBSO/HMO Oregon for more than 18 years, beginning her career with the company as an Employment Representative.

She was later promoted to Supervisor, Employment/Employee Relations in 1982, Manager of Human Resources in 1990, and Assistant Vice President in 1993.

Dorsey is a graduate of Portland State University with a degree in Psychology and Social Science, and is accredited by the Society for Human Resource Management.

She was raised in Klamath Falls, Oregon, and graduated from Washington High School in Portland.

Dorsey is also a Board Member of the Black Colleges Committee and maintains membership in the following organizations: National Society for Human Resources Man-



Tia Dorsey

agement, Northwest Human Resource Management Association, Urban League of Portland, Portland Insurance Personnel Administrators, and Delta Sigma Theta Sorority.

In her new position, she replaces Tom Kennedy, who assumed the Human Resources responsibility for

The Benchmark Group, BCBSO/HMO Oregon's tri-state holding company.

BCBSO/HMO Oregon is the state's largest health benefits company, with more than 1 million subscribers in traditional, HMO and PPO health plans.

## Strep and rheumatic fever

Strep throat, a type of group A streptococcal infection, can be associated with dangerous, if not life threatening infections if not properly diagnosed and treated, Pediatrics reports. Serious complications of group A strep include not only rheumatic fever, but streptococcal toxic shock syndrome and tissue infections such as necrotizing fasciitis, which have reported mortality rates of 30 percent or higher.

The Pediatrics supplement reports that penicillin, introduced more than 40 years ago, remains the most effective drug for treating strep throat preventing its spread and development into dangerous complications. Penicillin is also available as a sin-

gle injection, preferable when adherence to a ten-day regimen of oral penicillin might be difficult.

Newer oral antibiotics are widely prescribed by physicians, but according to Edward L. Kaplan, MD, editor of the Pediatrics supplement and an expert on group A streptococcal infections, as many as two-thirds of patients stop taking the medicine as soon as the symptoms start to disappear, thereby allowing the illness to survive, possibly return and even spread. He says that strep can spread quickly where people congregate--particularly in crowded areas such as schools and daycare facilities.

Dr. Kaplan, who is the chair of the

World Health Organization Collaborating Center for Reference and Research on Streptococci and a Professor of Pediatrics at the University of Minnesota, says that sore throats need to be seen by pediatricians or primary care physicians and cultures must be taken to insure proper diagnosis and treatment of group A streptococcal infections.

We will be calling you soon to discuss the recent reemergence of dangerous strep infections and can arrange an interview with Dr. Kaplan.

## Oregon ranks 47th in child immunization

Oregon's new statewide child immunization information system, Oregon Immunization Alert, is the first system in the nation using bar codes to track children's shots and oral vaccines statewide.

The system is currently being introduced throughout the state to health care providers who treat babies and young children. Alert is a result of an innovative public/private partnership between members of Oregon Health Systems in Collaboration, OHSIC, which represents Oregon's largest health care systems.

Almost one-third of Oregon's children ages birth to two are missing one or two immunizations. In

fact, the state ranks 47th in the nation. Not knowing what vaccinations a child needs and when they need them is a big problem. Most children have three or more immunization providers, making it impossible for one provider to maintain complete and up-to-date immunization records. In many cases, no one, not even the parents, has the entire record.

Alert addresses this by providing a computerized database of childhood immunization records kept current regardless of changes in family residence, insurance or health service sites as long as the child remains in Oregon or receives treatment in the state.



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Cheryl Carter.

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