

Oregon Health Division Unveils New Anti-Tobacco Ads for the New Year

State adds to its collection of attention-grabbing advertisements

PORTLAND, OR - With the beginning of the New Year the Oregon Health Division continues its successful anti-tobacco public education program with the unveiling of new attention-grabbing advertisements.

This week the Oregon Health Division's Tobacco Prevention Campaign introduces a new round of television advertisements. These compelling new ads augment those currently running, which have been on the air since September. To continue the success of the program OHD routinely rotates in new advertisements.

OHD is releasing a total of three new television commercials, one of them in Spanish. The ads include one exposing nicotine and two warning about the silent killer, secondhand smoke. To maximize limited resources, the OHD continues to run commercials produced in other states. The best commer-

cials from other states are chosen, then tested in Oregon focus groups. The most effective advertisements based upon message retention and behavioral impact are picked for airtime.

"We spend considerable effort choosing the best advertisements. This helps ensure that the momentum for our successes continues," Jane Moore, OHD's Chronic Disease Director, said.

The first commercial, "Hooked," focuses on nicotine addiction. The narrator explains that when the tobacco industry increases nicotine levels in their cigarettes they "hook" more of their customers.

The second commercial, "Kids," emphasizes the danger for children exposed to secondhand smoke. The speaker, a little girl, describes how secondhand smoke causes many diseases like asthma in children.

The last commercial, "Hidden



Killer," in Spanish, explains the hidden danger of secondhand smoke. The narrator discusses how secondhand smoke is not always noticeable but is a silent killer.

The Oregon Tobacco Prevention and Education Program is a comprehensive effort to reduce the use of tobacco and exposure

to secondhand smoke. It includes programs in local communities, schools, businesses, media and special populations. The program is funded by a tobacco tax increase approved by voters in 1996. Ten percent of the new revenue is allocated to tobacco use prevention and reduction.

Free Eating Disorder Screening

Do you or someone you know exercise compulsively or count calories in an effort to lose weight and be extremely thin? Are you obsessed with food? If food, weight, or exercise has taken control of YOUR life, this February, you can take the first step back towards health.

A free Eating Disorders Screening Program will be conducted at Providence St. Vincent Medical Center at 9 o'clock and 11 o'clock a.m. on Saturday, February 27, during National Eating Disorders Awareness Week. This free and anonymous public outreach and education program offers attendees the opportunity to get information about anorexia, bulimia, and binge eating disorder, take a written self-test, meet one-on-one with health professional, and get a referral for further evaluation if necessary. If you think that you, a friend or family member may be

suffering from an eating disorder, don't ignore the symptoms—they won't go away on their own! You can attend a free screening and educational session on Saturday, February 27 at 9 o'clock and 11 o'clock am Providence St. Vincent Medical Center in Portland, Oregon.

Eating disorders affect more than 5 million Americans, the majority of them women. About one percent of adolescent girls develop anorexia nervosa, with an additional 2-3% of young women developing bulimia nervosa, according to the National Institute of Mental Health. In addition, many more American women have disordered eating behaviors and unhealthy attitudes about food, weight and body image. A 1992 study revealed that 50% of 9-year old girls and 80% of 10-year old girls have dieted, underscoring America's obsession with thin-

ness. Eating disorders are illnesses that are associated with severe body image distortion and an obsession with weight. Sufferers are terrified of gaining weight and continue to diet, binge, or binge and purge, even as their mental and physical health deteriorate. In addition to depression and substance abuse disorders, victims of eating disorders can also develop heart problems, osteoporosis, and reproductive difficulties. Left unchecked, eating disorders can kill.

People with anorexia nervosa literally starve themselves by dramatically restricting their calorie intake. Symptoms include significant weight loss, loss of menstruation, dry skin, sallow complexion, and intense fear of gaining weight, even when underweight.

Bulimia nervosa is characterized by binge periods in which the sufferer consumes an unusually

large amount of food while feeling out of control of his or her eating. As the binge ends, fear of weight gain causes the person to purge, generally by self-induced vomiting, using laxatives, or compulsively exercise for hours. Bulimics often develop swelling of the feet, hands and cheeks, and serious dental, throat and intestinal problems.

Binge eating disorder is similar to bulimia but without the purging behavior. The binge eater sometimes eats enormous amounts of food very quickly, even when not hungry, until he or she feels uncomfortable full. Binge eaters often feel embarrassed by their inability to stop the binge.

Health Division Issues Measles Alert

(PORTLAND) Health officials announced today that two measles cases have recently been reported in Oregon. A Multnomah County man developed the characteristic rash on January 2, and a Clackamas County woman on January 4, according to Beletshchew Shiferaw, MD, MPH, epidemiologist with the Oregon Health Division. The cases were subsequently confirmed by laboratory tests. Health officials are now seeking to determine the source and extent of the outbreak.

Measles typically begins with a cough, runny nose, conjunctivitis, and fever. These symptoms are followed by a red, blotchy rash that begins on the face and spreads to the rest of the body. Measles is highly contagious and is transmitted by airborne spread.

Dr. Shiferaw cautioned that persons with a rash illness should not just "drop in" to their physician's office or to the emergency room. "Since measles is very contagious, we advise those who suspect they may have measles to call beforehand and ar-

range an appointment where other patients will not be exposed," Shiferaw stated. Persons are no longer contagious four days after the rash has appeared.

The best prevention against measles is to be fully vaccinated. Adults born during or after 1957 who have not had measles or aren't sure if they have had measles should receive one dose of measles vaccine. College students and children one year of age and older should receive two doses of measles vaccine, given at least one month apart. Adults born before 1957 have probably already had measles and are presumed to be immune.

"Health-care workers have been at higher risk of measles in recent U.S. outbreaks," said Dr. Shiferaw. "Therefore, they should consult their infection-control practitioners about the need for vaccination." Health-care providers who suspect measles in a patient should notify the patient's local health department within 24 hours, Shiferaw said.



**North Portland
Nurse
Practitioner
Community
Health Clinic**

Mariah A. Taylor, R.N., C.P.N.P.

North Portland Nurse Practitioner Community Health Clinic is currently seeking community residents who can serve on the Board of Directors for the clinic. Participants would aid in securing a new location and volunteer in other ways to serve the clinic's diverse community needs. Interested citizens are urged to Call Mariah Taylor at 284-5239 A.S.A.P.

Hours by Appointment and Walk-In

5311 N. Vancouver Ave.
Portland, OR 97217

Office: (503) 284-5239
Fax: (503) 284-9162

Casual drinking causes on-the-job problems

Employers are being urged to do more to educate their workers on the dangers of alcohol in light of a new survey showing that "casual drinkers" cause more problems in the workplace than alcohol-dependent employees. Barbara Cimaglio, director of the state Office of Alcohol and Drug Abuse Programs, says the survey of 14,000 employees at seven major U.S. companies found that casual drinkers are responsible for 29 percent more absenteeism, tardiness, unacceptable work performances and arguments with colleagues more than non-drinkers. Casual drinkers include those who might drink after work, at parties or at lunches, sometimes excessively, but are not considered alcoholics. Workers with problems such as alcoholism caused 28 percent more incidents than non-drinkers, according to the Worksite Alcohol Study sponsored by the national Institute for Alcoholism and

Alcohol Abuse and the Robert Wood Johnson Foundation. The study also found that casual drinkers are responsible for 59 percent of total alcohol-related productivity problems, compared with 41 percent for workers with more serious alcohol problems. The NIAA estimates that alcohol problems cost employers about \$27 billion each year in lost productivity. "People too often assume that all or most workplace problems associated with alcohol are related to people with serious problems such as alcoholism," Cimaglio says. "This study shows that's not true, and shows that employers need to do more to educate their workers about the danger of even moderate drinking. Casual drinkers also have been linked to a majority of drunken driving-related crashes and fatalities." Traditionally, companies focus most of their attention on employees with serious drinking problems, even though evidence

continues to mount that casual drinkers are a major cause of problems, Cimaglio says. She suggests that companies and government agencies implement better employee-awareness campaigns aimed at casual drinkers. The worksite study also concluded that casual drinkers are open to messages about changing their drinking behaviors. "Alerting them to the consequences of occasional heavy drinking the night before work, or of any drinking during or immediately before work, will enable the majority of them to make good choices, modify their behavior, and improve productivity for themselves and their companies," the study notes. Cimaglio urges employers to contact the Oregon Prevention Resources Center in Salem at 1-800-822-6772 for information on how to deal with alcohol problems in the workplace.

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Unrelated Bone Marrow Donor Drive

A special bone marrow donor drive is being organized by Jewish Connections of Portland (JCP) and the American Red Cross with the hope of finding marrow for others in need. The best chance at recovery for those in need is finding compatible, unrelated marrow match. Many of these prospective recipients represents diverse ethnic groups, including Jews of Central/Eastern European origin, African-Americans, Hispanics, Asian Pacific Islanders, and American Indians—to name a few—who are urgently seeking compatible matches. Because there are a number of us in the Portland community who can claim such heritage, the JCP and American Red Cross want to en-

courage all healthy adults within the community to participate in this drive.

Community members can help increase the survival odds of patients who need an unrelated marrow transplant by joining the national Marrow Donor Program's (NMDP) registry, a computerized list of potential marrow donors, on Wednesday, Feb. 10, 1999 from 3 to 8 P.M. at the Mittleman Jewish Community Center, 6651 SW Capitol Highway, Portland, OR 97219. Potential marrow donors must be between 18 and 60 years old in good general health. For more information, call Marrow Donor Services, American Red Cross at (503) 284-0011, ext. 427.

Although there is a cost for initial testing to join the Registry, at least the first 42 donors will be subsidized by funds donated to the American Red Cross. Additional donors may need to pay part or the entire testing fee. Those who aren't able to join the registry but wish to help may contribute to defray some or all of the \$40 per donor testing fee.

To join the NMDP Registry, healthy adults donate a small blood sample, which is tested to determine the donor's tissue type. Volunteer donors' tissue types are added to the computerized list of potential marrow donors nationwide, and compared with the tissue of patients searching for unrelated matches.