

Portland
Observer
Health

Physicians honored by peers

CONTRIBUTOR STORY
FOR THE PORTLAND OBSERVER

Kaiser Permanente physicians Robert Shneidman, MD, and Sean Jones, MD, have received the Distinguished Physician Award from the HMO's 660-physician group.

First given in 1979, this annual award honors physicians for quality of service to patients, excellence in clinical practice, contributions to both the HMO and the community, personal achievements and relationship with peers.

Dr. Shneidman is board certified in gastroenterology and internal medicine and practices gastroenterology at Kaiser Permanente's Interstate Medical Office South. He earned his medical degree from the University of Texas Medical School in Houston. Dr. Shneidman is the clinical assistant professor at OHSU and is active in the clinical gastroenterology fellowship also at OHSU. He has been involved in a two-year study of *Helicobacter pylori*, a bacteria that causes stomach ulcers. Dr. Shneidman is also involved in anemia research.

Dr. Jones is a board-certified internist practicing at the Interstate Medical Office East. He received his medical degree from Yale University School of Medicine. Dr. Jones worked as the clinic coordinator for internal medicine residents rotating in the Interstate campus. He worked on writing and disseminating depression guidelines for primary care physicians.

Heart disease is a big problems for women

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Heart Disease, not cancer, is the leading killer of women in the U.S.

"Most women do not experience heart disease until after menopause because the hormone estrogen protects them up until that point," said Dr. Rebecca Reeves at The

DeBakey Heart Center at Baylor College of Medicine in Houston. "Following menopause, estrogen levels change. This is why many doctors encourage women to go on

hormone replacement therapy." Some of the risk factors for heart disease in women include obesity, high blood pressure, high cholesterol, smoking, a lack of exercise, and a poor

diet. Eating a blanced diet where less than 30 percent of calories come from fat is very important. February is National Heart Month. of ear infection in children.

Underage drinking is strong predictor of alcoholism, alcohol abuse

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) now has hard evidence to support what many prevention specialists and parents have long assumed: Youthful experimentation with alcohol is not a benign rite of passage. It is a risk-filled practice that can have disastrous results. The earlier a young person drinks alcohol, the more likely he or she is to develop a clinically defined alcohol disorder at some point in life.

A \$12-million study by NIAAA, released last January, offers scientific validation that young people who began drinking before age 15 are four times more likely to develop alcoholism than those who began drinking at age 21. More than 40 percent of respondents who began drinking before age 15 were classified with alcohol dependence at some time in their lives compared with 24.5 percent for respondents who began drinking at age 17 and about 10 percent for those who began drinking at age 21 and 22.

The study also found that the risk of developing alcohol abuse (a maladaptive drinking pattern that repeatedly causes life problems) more than doubled for persons who began drinking before age 15 compared with those who began drinking at age 21.

The study, which sampled 43,000 people, documents that the risk for alcohol dependence and alcohol abuse decreases



steadily and significantly with each increasing year of age of drinking onset.

The NIAAA study has become an important teaching tool for people such as Kay Provine, a prevention specialist at Hazelden and codeveloper of a popular parenting skills program called Roots and Wings. "As soon as the study came out, I made a bar graph to show the correlation between early drinking and alcoholism," said Provine. "It is so effective for parents to see something this concrete. Every year you can delay kids from using alcohol you are buying them time to develop physically, emotionally, spiritually and psychologically."

Parents often don't think their kids listen to them, said Provine. But the annual Minnesota Student Survey of 9th and 12th graders conducted for the Minnesota Department of Children, Families and Learning, consistently shows that young people are listening. "Parental objection is the second most important reason kids give for not using alcohol," said Provine. (The first is "don't like the taste.") "Young

people are beginning to drink earlier and earlier now—some as young as 9 or 10. And drinking for them is about intoxication, about getting drunk. Each of these facts spells trouble. Parents can consider it a victory of sorts if they can see that their kids delay onset of use, whether it is a matter of months or years. Every day our youth choose not to use improves their chances of not developing alcohol use problems."

Provine and other prevention specialists know that the most effective prevention programs are ongoing, consistent and involve all aspects of a child's life: home, school and community. One program that has been proven to be effective is Project Northland, a community-based prevention program designed to delay the onset of alcohol use, reduce alcohol use for young people who have already tried drinking, and limit the number of alcohol-related problems of young people. Project Northland began at the University of Minnesota in 1990 as a prevention research program funded by the NIAAA. It is the largest randomized community trial ever conducted for the prevention of adolescent alcohol use.

Project Northland, designed to be implemented over a three-year period during grades 6-8, involves students, parents, teachers and the community at large. The prevention curriculum, published by

Hazelden, uses comic book characters to help young people talk with their parents about alcohol (sixth grade), deal with peer pressures to use alcohol (seventh grade), and develop communitywide changes in alcohol-related programs and policies (eighth grade).

Among 2,400 students followed in northeastern Minnesota, monthly drinking was 20 percent lower and weekly drinking was 30 percent lower for students who engaged in Project Northland activities compared with students in control groups who did not.

"Parents have to let their kids know that underage drinking is not okay," said Provine. "They need to talk about family standards and expectations and talk about them again and again. Hopefully, they'll wait to experiment with alcohol. It might not stop the train, but it will put the brakes on."

For information about Project Northland, contact Hazelden Publishing at (800) 328-0098.

Alive & Free is a chemical health column provided by Hazelden, a nonprofit agency that provides a wide range of information and services relating to alcohol and drug dependence. Address questions to Alive & Free Editor, BC 10, P.O. Box 11, Center City, MN 55012-0011. For more resources on substance abuse, call Hazelden at (800) 257-7800 or check its web site at www.hazelden.org.

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