

Portland **Health/Education** Observer

# Mark O. Hatfield to help guide OHSU as member of its governing board

CONTRIBUTED STORY FOR THE PORTLAND OBSERVER

Gov. John Kitzhaber has named former U.S. Sen. Mark O. Hatfield to the Oregon Health Sciences University's Board of Directors. The Oregon Senate confirmed the nomination Feb. 24.

"Throughout a political career spanning five decades, Mark Hatfield has distinguished himself as a leading voice and powerful advocate for health care," says Kitzhaber. "This is a natural progression to his ongoing commitment to the missions of Oregon's academic health center." Since retiring from the U.S. Senate in 1997, Hatfield continued his involvement in the academic and health care communities. Upon returning to his roots in Portland that same year, he joined the Oregon Health Sciences Foundation board of trustees, a position he will vacate this spring to become a director on OHSU's governing board.

In 1998, President Clinton appointed him to the National Institutes of Health Advisory Council on Aging. Hatfield has been a champion of biomedical research, serving as chairman of Funding First, a research funding initiative associated with The Albert



Mark O. Hatfield and Mary Woodard Lasker Foundation.

"During my years in public service, it was exciting to participate with OHSU in building a premiere medical research institution in Oregon," Hatfield says. "Now, I am grateful to Gov. Kitzhaber for the opportunity to serve on the OHSU Board of Directors. It is my hope that as a result of a collaborative effort and commitment to biomedical research, Oregonians will one day witness and be the beneficiaries of dramatic scientific breakthroughs that will provide answers to much of our human suffering."

Hatfield brings a lifetime of leadership and success to OHSU. After serving the Oregon Legislature for six years, he was voted in as Secretary of State in 1956 at the age of 34—the youngest person in Oregon's history to hold that office. He was elected governor in 1958 and re-elected in 1962, becoming the state's first two-term governor in the 20th century. In 1966, he was elected to the U.S. Senate, where he focused on health, education, research and social service programs. In more than 46 years of political service, Hatfield never lost an election.

"OHSU is honored to have Mark Hatfield join our Board of Directors," says OHSU President Peter O. Kohler, M.D. "Sen. Hatfield has been leading the fight for medical research at the national level for several years. He will provide excellent guidance for OHSU during the most promising time in history for medical discoveries, both for cures and for health promotion."

Hatfield will fill the position formerly held by Neil Goldschmidt, who retired from the board this winter. "We have enjoyed Goldschmidt's participation on the board for almost five years, and we will miss his keen wit and insight," says Kohler.

# Allergy remedies may impair driving

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A drug common to over-the-counter allergy medicines used by millions might affect drivers more than liquor, suggests a study published today. University of Iowa researchers who tested 40 allergy sufferers in a driving simulator found the standard dose of antihistamine contained in Benadryl and similar medicines had a greater effect than a few drinks on driving "coherence," or the ability to match the speed of the vehicle ahead.

The antihistamine, diphenhydramine, also had an effect similar to alcohol on steering stability and the likelihood of crossing into the oncoming lane, according to the study in today's *Annals of Internal Medicine*. "We were quite surprised to find that diphenhydramine may have an even greater impact on the complex task of operating an automobile than does alcohol," said Dr. John Weiler, a University of Iowa medical professor. "That sends a chilling message. You would not want to be on the road when someone is driving at you who is taking these."

The study also looked at a newer antihistamine, fexofenadine, used in the prescription drug Allegra. The researchers said that when it came to driving ability, fexofenadine was indistinguishable from a placebo. The maker of Benadryl, Warner-Lambert Co., attacked the new study as "seriously flawed" because it was partially funded by Aventis, the maker of Allegra. Weiler strongly defended his work, saying, "I am not for sale."

"We are in no way recommending that these medications be taken off the market. Benadryl is an extremely effective antihistamine, it is the side-effect profile that is disturbing," Weiler said.

The researchers said more than 39 million Americans suffer from hay fever and allergies and 4.8 million take



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Benadryl is seen Monday, March 6 in Philadelphia. Over-the-counter remedies like Benadryl, which is used by millions of hay fever sufferers, may impair driving more than alcohol, a new study indicates.

prescription drugs. Most go without treatment or take over-the-counter medications.

These medicines often come with warnings that they can cause drowsiness and should not be used while operating heavy machinery. National Highway Traffic Safety Administration researcher Richard Compton said that there had been too little research on the effects of allergy medications on driving safety and that people often ignore warnings about mixing them with alcohol.

However, Compton said a study of blood tests on victims of fatal crashes in the early 1990s suggested that antihistamine impairment was far less prevalent than alcohol impairment. The Iowa researchers had the allergy sufferers, ages 25 to 45, report once a week over a four-week period to the driving simulator.

Each was tested once after being given the usual dose of diphenhydramine; once with the usual dose of fexofenadine; once with enough alcohol to produce a blood-alcohol concentration of 0.1 percent,

the legal limit in some states; and once with a placebo containing no medication or alcohol.

Over a simulated 45-mile course on a two-lane rural road, the machine measured participants' ability to match speeds as a lead vehicle speeded and slowed, their ability to stay in their lane, and their ability to avoid a crash when a vehicle pulled out from a driveway in front of them. Test drivers' following ability was significantly better after they took alcohol or fexofenadine than after diphenhydramine. Steering instability was greater with diphenhydramine or alcohol than fexofenadine or placebo. The number of times they crossed into the oncoming lane was twice as great after taking diphenhydramine as after fexofenadine or placebo.

Weiler also pointed out that the participants' assessments of how drowsy they were did not correlate with their performance, suggesting that people who take antihistamines may not be able to judge when they are impaired.

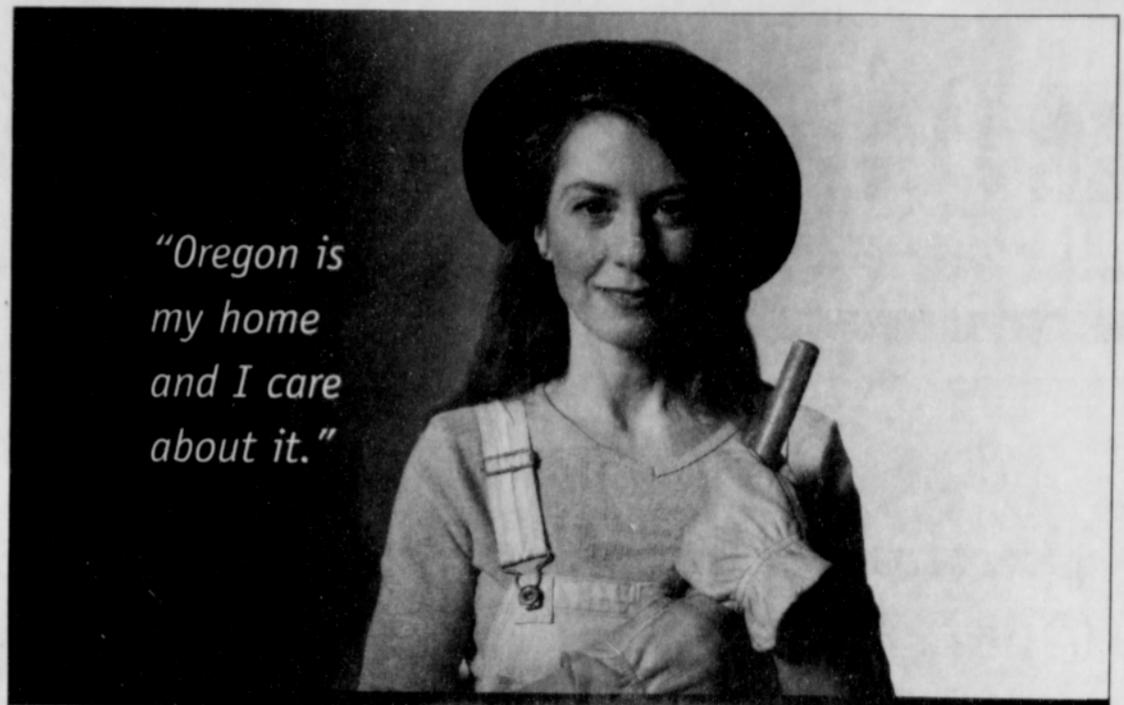
# OHSU looks at new alternative to open-heart surgery

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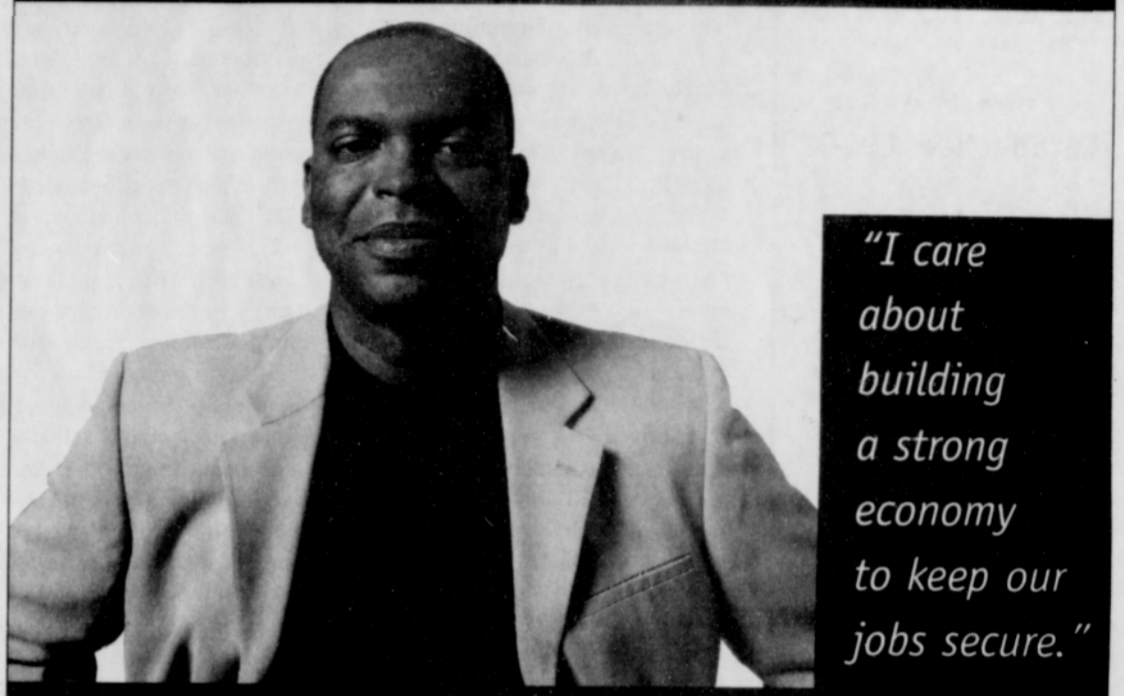
Anne Lingle flew all the way from Alaska to be one of the first two patients to participate in a new study at Oregon Health Sciences University. The 79-year-old grandmother was born with a hole the size of a dime between the upper chambers of her heart. It's a congenital heart defect called atrial septal defect (ASD) and one out of every 1,500 children are born with it, but also is the most common form of congenital heart defects diagnosed in adults. The only procedure

currently available to correct the defect is open-heart surgery, a surgery that requires a four- to seven-day hospital stay and weeks of recovery. But a new study at OHSU's School of Medicine and Doernbecher Children's Hospital is looking at the effectiveness of a new device that can close the hole without surgery and only requires a 24-hour hospital stay, allowing patients to resume normal activity soon after discharge. The device is called the CardioSEAL STARFlex Septal Occlusion System. It looks like two small umbrellas facing each other and is made of polyester fabric attached to metal that can be

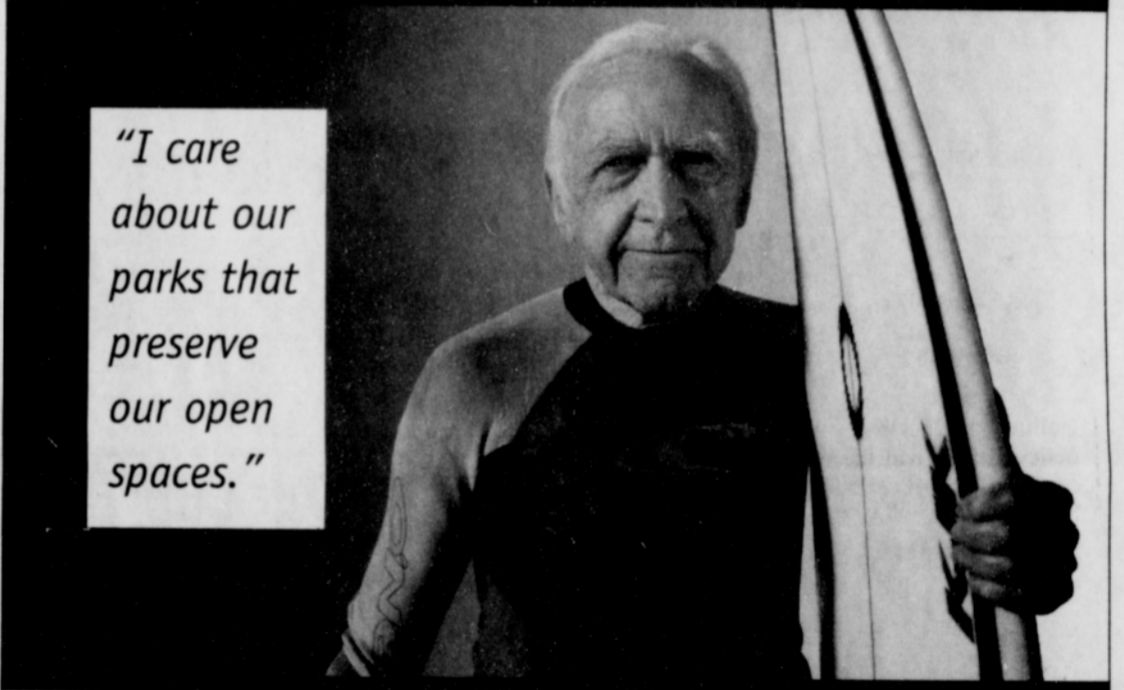
implanted in the body during cardiac catheterization. A catheter, with the device inside, is gently inserted into a vein in the patient's leg, then routed into the heart. Once in the heart, the device is pushed out of the catheter where it opens on each side of the hole to cover and close it. New tissue grows over the fabric of the device, closing the hole permanently. "I feel wonderful and so very happy because now I can go home," said Lingle. The hole in her heart was discovered more than a year and a half ago, but she didn't want to have open-heart surgery, so she waited for the opportunity to participate.



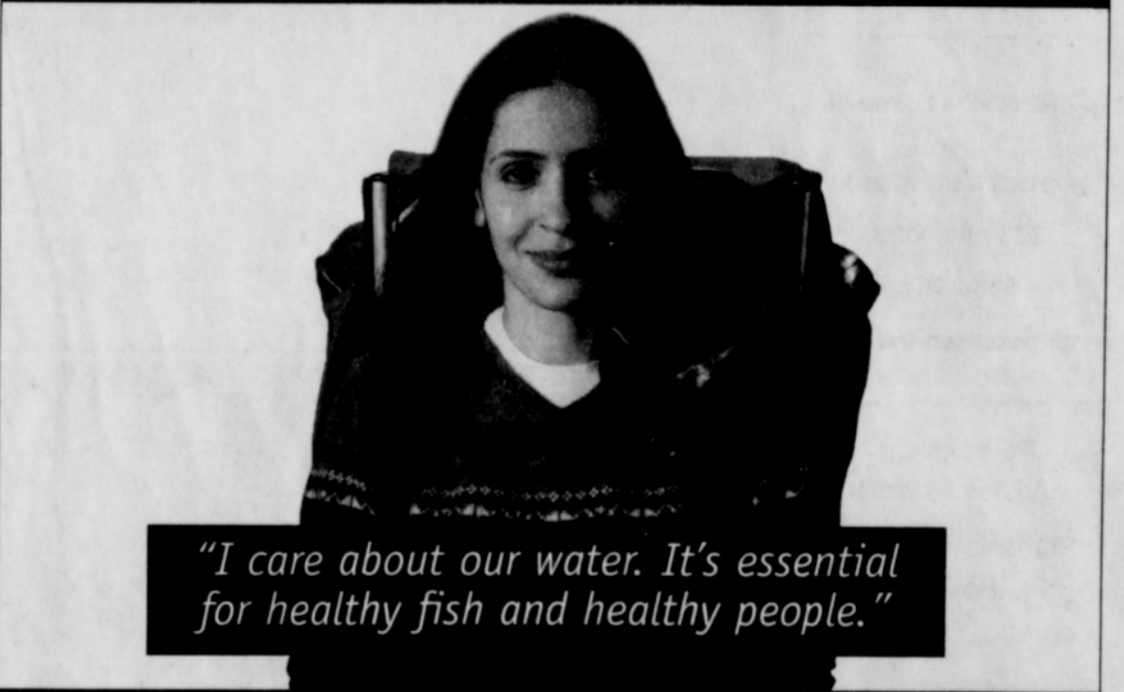
"Oregon is my home and I care about it."



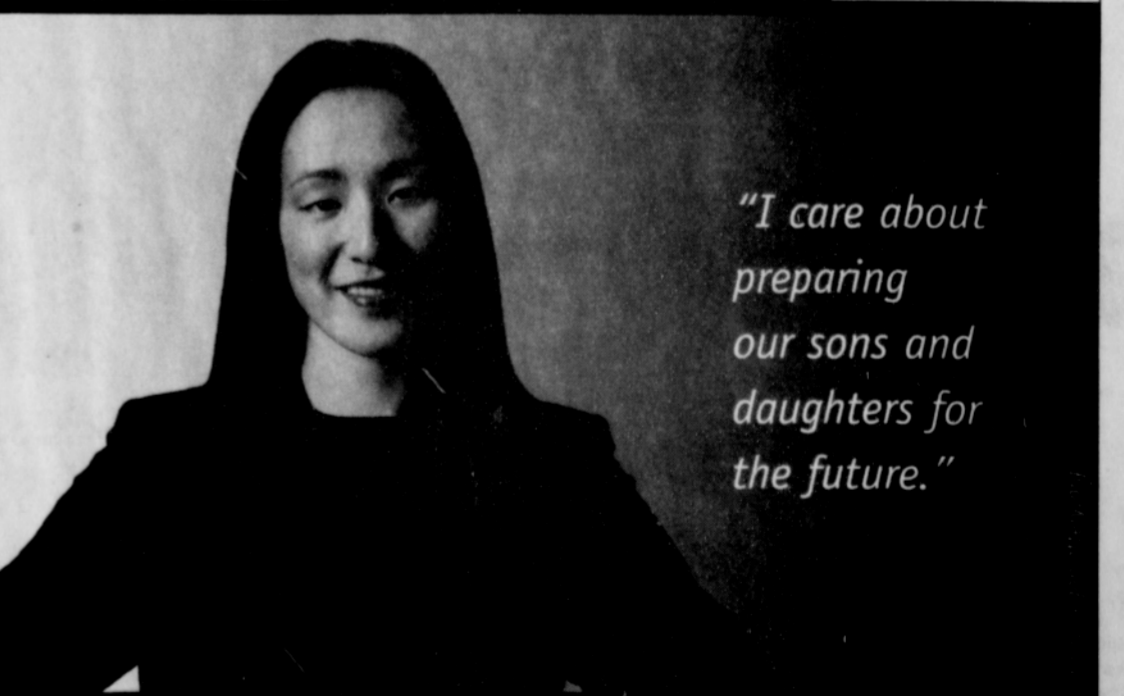
"I care about building a strong economy to keep our jobs secure."



"I care about our parks that preserve our open spaces."



"I care about our water. It's essential for healthy fish and healthy people."



"I care about preparing our sons and daughters for the future."

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