

HEALTH

Health Workers Vaccinate Against Deadly Virus

State prepares for unlikely, but possible, smallpox threat

BY DR. GRANT HIGGINSON

Oregon has begun vaccinating up to 800 health workers across the state against smallpox in preparation for the unlikely, but possible, release of the virus by a terrorist.

Smallpox is a devastating disease that, over thousands of years, has probably caused more deaths worldwide than any other infection. About a third of those who become ill with the virus die.

The disease is no stranger to public health. In Oregon, smallpox and other deadly diseases were major factors in the creation of the state Board of Health in 1903. One of the first state health officer's priorities was to develop a smallpox prevention and vaccination program.

Thanks to public health programs of vaccination and disease investigation, the disease was declared eradicated from the entire earth in 1980. Routine smallpox vaccination programs here and in other countries were discontinued.

Smallpox is once again a public health concern because there is a small chance that terrorists could obtain the virus. Although the probability that they would intentionally use it as a weapon is low, we need to be prepared.



Dr. Grant Higginson

In December, Oregon's two smallpox preparedness plans were approved by the federal Centers for Disease Control and Prevention. One plan calls for disease control

and response. The second plan, underway now, is to vaccinate health workers.

This month, health workers from all over Oregon will travel to one of three locations to receive smallpox vaccination. Once vaccinated, they are able to serve on a smallpox response team. This means they can immediately and safely be deployed to investigate a suspected case, provide care to the smallpox patient and vaccinate others.

Oregon is among the last of the states to begin vaccination. We have taken a conservative and cautious approach, weighing the need to prepare for smallpox against the risk of side effects that the vaccine carries. These side effects, though not common, can be severe.

Smallpox vaccination involves extensive pre-screening, informed consent procedures and clinical follow-up. The vaccination itself is time consuming, involving more than a simple shot.

We are not vaccinating professional groups other than health workers, nor is a smallpox vaccination a good idea for the general public right now. The last smallpox case was in 1978 and the vaccine is not completely safe. If Oregon ever had an outbreak, we would control it using "ring vaccination," which worked before, finding cases and vaccinating their contacts. If given within four days of exposure, the vaccination will prevent the disease or lessen the symptoms.

The health workers now being

vaccinated do so voluntarily. I respect and thank them for their commitment to protecting public health. I sincerely hope the day never comes when we need to rely on them for a response to smallpox in Oregon. But the fact that they have taken this step means we are better prepared.

For public health, it is ironic to find ourselves preparing for an old enemy that we already vanquished. As we prepare for this unthinkable threat, it's important to remember, we conquered smallpox once. We can beat it again if need be.

Dr. Grant Higginson is state public health officer in the Oregon Department of Human Services and oversees the state's bioterrorism preparedness program.

Spring Forward Without Sleep Loss

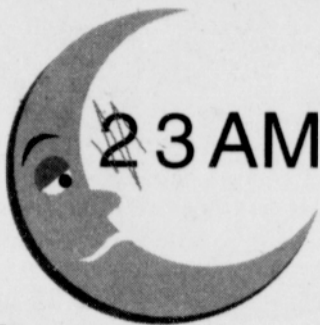
Doctors offer tips to reduce sleep deprivation

It happens in the middle of the night once a year, and can affect adults and children for several days. It's the return of daylight-saving time, which happens this year at 2 a.m. Sunday, April 6.

The annual spring forward ritual can cause disruptions in normal sleep patterns. However, experts from the Providence Sleep Disorders Center say there are steps that can be taken to minimize sleep loss.

National Sleep Foundation polls reveal that most adults already get less than the recommended seven to nine hours of nightly sleep needed to be fully alert the next day.

"Too many people will sacrifice yet another hour of sleep when the clocks change - an hour they cannot afford to lose, particularly



Too many people will sacrifice yet another hour of sleep when the clocks change.

- Louis Libby, M.D.

For adults there are a few steps to help transition into daylight-saving time. Try to sleep more than usual a few nights prior to and immediately following the time change. Also, napping in the middle of the afternoon on Sunday can help. Be sure not to nap within a few hours of regular bedtime because nighttime sleep may be disrupted.

To help children with the time change adjustment, Dr. Libby offers suggestions maintaining regular sleep, wake and nap times. Try not to compensate for the lost hour by delaying bedtime or allowing a child to sleep in. Gradual adjustments should also be made. Some parents find it best to try to start making adjustments on Saturday night rather than wait until Sunday, a school night.

To learn what can be done to improve sleep and to learn how recognize signs of potentially serious sleep disorders, visit the Providence Sleep Disorders Center Web site at www.providence.org/sleep.

on the weekend, when people try to catch up on the sleep they missed during the week," said Louis Libby, M.D., medical director of the Providence Sleep Disorders Center. By making a few simple lifestyle changes, most people can find the sleep needed to feel alert, refreshed and ready to take on the day.

Hospital Offers Birth Control Procedure

A new permanent birth control technique is being offered at Oregon Health and Science University.

The Essure permanent birth control method, developed by Contracept Inc., was approved by the U.S. Food and Drug Administration in November 2002. It has been used in Australia, Europe, Singapore and Canada for several years. It is the first alternative to invasive surgery for women seeking permanent birth control in the United States.

The procedure does not require any incisions and can be performed without general anesthesia in an outpatient setting in about one hour. Tubal ligation, another form of sterilization widely used by women, requires one or two incisions and usually is performed under general anesthesia.

Dr. Mark Nichols, associate

professor of obstetrics and gynecology in the OHSU School of Medicine and member of the Center for Women's Health, said that Essure is irreversible, so women should be absolutely certain they want this permanent type of contraception.

"For some, that is a very attractive way to have permanent birth control," he said. "There are no hormones involved and it doesn't require using something at the time of sexual activity. It has been attractive to women as permanent birth control because it gives women control."

To perform the procedure, the physician places a scope through the vagina, the cervix and into the uterus. A flexible tube is inserted through the scope into both of the fallopian tubes. Attached to the end of the tube is the micro device that is inserted into the fallopian tube. The device is

about the size of a pencil lead in diameter and about two inches in length. Once in place, the tiny device uncoils and stays in the fallopian tube. It is designed to promote tissue growth, thus blocking the fallopian tube so that sperm can not reach the egg. The tissue growth is similar to that in a vasectomy. The insert is made of material similar to that used in heart vessel surgery for years. The patient usually returns home about 45 minutes after the procedure. Only minor cramping, which generally can be controlled by over-the-counter pain medications, has been reported in some cases during clinical trials. After 12 weeks the patient must return for an X-ray to ensure the insert has been effective. Until then, patients must use another form of contraception. In clinical trials Essure was found to be greater than 99.8 percent effective.

REACH
Racial & Ethnic Approaches to Community Health
A program of the African American Health Coalition, Inc.
Sponsored by the CDC (Centers for Disease Control and Prevention)

Wellness Within REACH: Mind, Body, and Soul Activity Calendar

	Mon	Tues	Wed	Thurs	Fri	Sat
Matt Dishman 77 NE Knott	Strength Training 8-9am and 2-3pm Brown		Strength Training 8-9am and 2-3pm Brown		Strength Training 8-9am and 2-3pm Brown	African Dance 10:00-11:00am Addo
Salvation Army 5325 N Williams	Salsa 6:30-7:30pm Haugland	Water Aerobics 2:00 - 3:00pm Hampton	Tai Chi 6:30 - 7:30pm Lyles Begins 4/16/03	Water Aerobics 2:00 - 3:00pm Hampton		
Nature's 3535 NE 15th		Yoga 7:30-8:30 pm O'Rourke		Yoga O'Rourke 7:45-8:45 pm (begins 3/27/03)		Body Conditioning 9:30-10:30am Nickerson
Peninsula Park 700 N Portland		Walking Group 6:00-7:00 pm Nickerson (Meet inside the Lloyd Center in front of Sears)				Walking Group 12:30 pm Nickerson
Mallory Avenue Christian Church (Gym) 126 NE Alberta	Aerobics 6:30-7:30pm Nickerson		Aerobics 6:30-7:30pm Nickerson		Aerobics 6:30-7:30pm Nickerson	
Highland United Church of Christ 4635 NE 9th Ave.	Aerobics 6:00-7:00am Pierce	Aerobics 6:00-7:00pm Keller	Aerobics 6:00-7:00am Pierce	Aerobics 6:00-7:00pm Keller		

**Must be 21 or older to participate. Please check with AAHC before showing up to the first class 503-413-1850. Please receive approval from your doctor before beginning exercise class. All classes are free of charge!

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