

HEALTH MATTERS

Shoddy Practice Spreads Hepatitis C

Clinic tried to save money

(AP) -- Nearly 40,000 people learned last week that a trip to the doctor may have made them sick. In a type of scandal more often associated with Third World countries, a Las Vegas clinic was found to be reusing syringes and vials of medication for nearly four years. The shoddy practices may have led to an outbreak of the potentially fatal hepatitis C virus and exposed patients to HIV, too.

The discovery led to the biggest public health notification operation in U.S. history, brought demands for investigations and caused scores of lawyers to seek out patients at risk for infections.

Thousands of patients are being urged to be tested for the viruses. Six acute cases of hepatitis C have been confirmed. The surgical center and five affiliated clinics have been closed.

"I find it baffling, frankly, that in this day and age anyone would think it was safe to reuse a syringe," said Michael Bell, associate director for infection control at the national Centers for Disease Control and Prevention.

One of the infected patients is retired airplane mechanic Michael Washington, 67, who was the first to report his infection. On the advice of his doctor, he received a routine colon exam in July at the Endoscopy Center of Southern Nevada.

In September, he started to get sick. He was losing weight fast. His urine turned dark. His stom-



Michael Washington, 67, believes he contracted hepatitis C while having a preventative colon examine at the Endoscopy Center of Southern Nevada last July. Washington's wife Josephine, 70, is shown nearby. (AP Photo)

ach hurt. By January, it was clear what had happened.

Washington describes his virus as a "creeping death sentence" and worries that others will hear his story and think twice before getting preventive care they need.

Health officials say they are most worried about the spread of hepatitis C, which targets the liver but shows no symptoms in as many as 80 percent of infections.

Hepatitis C results in the swelling of the liver and can cause stomach pain, fatigue and jaundice. It may eventually result in liver failure. Even when no symptoms occur, the virus can slowly

cause damage to the liver.

Health inspectors say they observed clinic staff using the same syringe twice to extract anesthesia from a single vial, which was then inappropriately used to treat more than one patient. The practice allows contaminated blood in a used syringe to taint the vial and infect the next patient.

Bell said such improper procedures appear to be more common in outpatient surgical centers like the endoscopy center. Unlike hospitals, such centers often do not have employees whose sole responsibility is to monitor and educate staff on best practices. Clinic staff told inspectors they

had been ordered by management to reuse the vials and syringes.

Investigators were told the practice was an attempt to cut costs, according to a letter of complaint from the city, which revoked the facility's business license. The clinic's majority owner, Dipak Desai, a political contributor and member of the governor's commission on health care, has refused to comment on the allegations.

Of the thousands of people who have rushed to be tested, many will get positive results, officials fear. More than 15,000 people already have called the health district for information.

For Your Health Glaucoma Screening Saves Sight

BY MARGARET CARTER

In celebration of World Glaucoma Day, organized to call attention to the importance of glaucoma screenings, it's important to understand how glaucoma can steal vision without warning. That is why it is called the "sneak thief of sight."

With glaucoma, you may not notice any symptoms until you lose some vision.

The good news is that a simple, painless screening by an optometrist or ophthalmologist can de-



tect glaucoma. Early detection is essential to save vision.

I want to add my own personal message of encouragement to Oregonians over the age of 40--especially African Americans--to get a glaucoma screening.

All of us are at risk for glaucoma, some of us more than others. African Americans are five times more likely to get glaucoma than Caucasians, and six times more likely to become blind from the disease. In fact, glaucoma is the lead-

ing cause of blindness among African Americans.

No one knows why glaucoma occurs more often, and with more devastating consequences, among African Americans. But clearly, glaucoma screenings need to be part of our regular medical routine.

Other high-risk groups include people over 60, family members of those already diagnosed, diabetics and people who are severely nearsighted.

Glaucoma screenings are a personal cause for me. Several members of my family have been stricken with this "sneak thief of

sight." Some of them whose glaucoma was detected early received appropriate medical treatment and still have vision. Others were less fortunate, and their vision loss haunts me.

During the last session of the Legislature, I sponsored a bill to facilitate appropriate medical treatment of glaucoma once it has been diagnosed. But to stop the "sneak thief of sight," each of us is responsible for taking the first step: getting a glaucoma screening.

Margaret Carter is a state senator, representing District 22 in Portland.

Emergency Contraception for Victims Made Available

State public officials are implementing a new law that requires hospitals to offer emergency contraception to female victims of sexual assault.

The law requires hospitals to inform female sexual assault victims about emergency contraception, the option of receiving it,

and to provide it to the victim if she asks for it.

"We want women to be aware that emergency contraception is available to all sexual assault victims," said Katherine Bradley, Ph.D., administrator of family health programs in DHS. "It is a safe, effective treatment option

and the sooner it is taken, the better it works."

Emergency-contraception pills have the same hormone used in birth-control pills and reduce the likelihood of pregnancy by 81 to 90 percent when taken within 72 hours of unprotected sex. The pills may work up to five days

(120 hours) after unprotected sex.

Studies in the New England Journal of Medicine and Obstetrics and Gynecology indicate that emergency contraception does not cause abortion. It does not work if a woman is already pregnant and will not harm an existing pregnancy.

HEALTH WATCH

Learning to Live with Diabetes -- Thursdays, March 13 and March 20, 1:30 to 3 p.m.; \$10. To register, call 503-241-3059.

Tools for Caregivers -- Six-week educational series are offered to help family caregivers take care of themselves while caring for a relative or friend with a chronic illness. The classes are being held at several locations and dates. Call 503-413-6465 for more information.

Parenting Classes -- Newborns don't come with instruction manuals but parents and parents-to-be can learn about a variety of topics from pain and childbirth to breastfeeding to infant CPR and much more. For a schedule of events, call 503-574-6595 or visit: providence.org/classes.

Bereavement Support Groups -- Free, safe confidential group meetings for those who have experienced the death of a loved one offered on various nights and locations. For information and registration, call 503-215-4622.

Colorectal Cancer Discussion -- Wednesday, March 19, from 7 to 8:30 p.m., join oncologists Katherine Morris and Anupama Kurup to discuss prevention, colonoscopy procedures and latest treatment options including robotic surgery at Legacy Good Samaritan, 1040 N.W. 22nd Ave.

Cancer Resource Center -- Providence St. Vincent Medical Center and the American Red Cross have

joined forces to create the first in-hospital resource center providing books, printed material, computer access and more for individuals and families dealing with cancer. The center is open Monday through Thursday, 9 a.m. to 4 p.m.

Newborn Care -- Sunday, March 16, from noon to 5 p.m., learn all the basics of newborn care from bathing to diapering; \$45 per couple to register call 503-574-6595.

Maternity Orientation -- Thursday, March 20, from 7:45 to 8:45 p.m., this class is to familiarize expectant parents with the maternity unit and answer any questions you may have prior to labor and delivery. To register, call 503-574-6595.

Stroke Alert Screening -- Check your carotid arteries with a painless ultrasound to assess your risk. Fee \$40. To schedule a screening, call 503-251-6137.

Smoke-Free Support Group -- meets Mondays, 7 to 8 p.m. For more information, call 503-256-4000.

Free Body Basics -- This physician-recommended class is appropriate for all ages and health conditions. Plan to attend this one-session class and learn the simple guidelines for safe exercises, including stretching. Call 503-256-4000 to register.

Managing Chronic Hepatitis C -- Third Wednesday of each month at 5 p.m., this informative session is led by a nurse to help manage side effects of medications and dosage preparations and administration; doctor's referral is required. To register, call 503-251-6313.

Have you seen me?

1-800-THE-LOST

Endangered Runaway



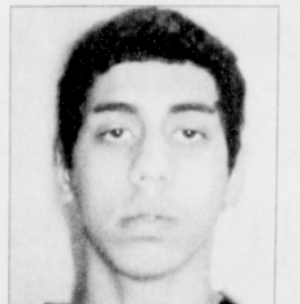
Samantha Cochran
Current Age: 15
Date Missing: Feb. 11, 2008
Missing From: Christiansburg, VA



Daniel Anderson
Current Age: 17
Date Missing: Feb. 14, 2008
Missing From: Aurora, IL



Larry Anderson
Current Age: 16
Date Missing: Feb. 20, 2008
Missing From: Miami Gardens, FL



Joel Andrade
Current Age: 16
Date Missing: Feb. 15, 2008
Missing From: Chicago, IL

If you have any information please contact:
The National Center for Missing and Exploited Children
1-800-THE-LOST (1-800-843-5678)
This public service announcement provided by the Portland Observer Newspaper.

Smoke around your children and they could inhale



equal to 102 packs of cigarettes by age 5.

Everyone has the right to breathe clean air, especially our children.

DHS TOBACCO AND EDUCATION PROGRAM

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Dr. Billy R. Flowers

THE SPINAL COLUMN™

An ongoing series of questions and answers about America's natural healing profession.

Part 9. Low Back Surgery:

The unkindest and most unnecessary cut of all.

Q: Should I try chiropractic for my low back pain or have surgery and get it "fixed right?"

A: We hear this question quite often and considering many physicians' pro-surgery pro-occupation, it's no wonder people ask such questions. That is, until they examine the facts. The truth is that in about 90% of low back pain, the problem is mechanical. Chiropractic has had and continues to have the best technique for treating spinal mechanical problems through gentle, exact adjustment with highly skilled hands. And Chiropractic requires no drugs, surgery, recuperation or expen-

sive hospital bills. With Chiropractic, the only side effects are the disappearance of symptoms and the recurrence of vitality.

Q: Which technique has better results for low back problems, Chiropractic or surgery?

A: According to a recent issue of Computer Medicine, low back surgery is one of the least effective procedures. In fact, 75 to 99% are unsuccessful. Before

you make any decision, heed the advice of the "father" of low back surgery: "exhaust all methods of conservative care before considering surgery to the lumbar (low back) spine." To find out how Chiropractic can help you avoid back surgery, or for answers to any questions you might have about your health, please call us at the phone number displayed below.

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