

Health Notes

By Audeen Wagner



Swimming information:

The clinic has been seeing a number of young patients with "swimmer's ear." Here are some pointers from Providence Family Medicine-Vernonia, for prevention and treatment:

Soon after going swimming, you can treat ears with equal parts of white vinegar and distilled water—this helps maintain an acid balance in the outer ear and, thus, prevents the uncomfortable infection. Just put three to four drops in each ear. If swimmer's ear is suspected, it is necessary to make an appointment and have it diagnosed and treated with ear drops.

Also regarding swimming: Those instructions that your grandmother gave you about not eating before swimming? It's not just an "old wife's tale," it's true! Laura Nichols, P.A., says, "Allow two hours after eating before going swimming, to prevent potentially dangerous cramps in the cold water."

Sports and School Physicals:

It is that time again! The clinic hopes that families will get this important visit out of the way early, to avoid the rush just before school starts. Call the clinic for more information.

Mammovan visit:

Next opportunity for a mammogram in Vernonia is August 20. Call the clinic, 429-9191, for your appointment.

"Beyond Words" art exhibit slated

Northwest women artists of The Portland Artists Group will present their premier collective exhibit "Beyond Words" August 5-30 at the Columbia Center for the Arts in St. Helens. This mixed-media exhibit will showcase altered books, fabric art, acrylics, mixed-media collage and assemblage.

The public is invited to an artists' reception Thursday, August 7 from 6:30-8:30 p.m. Jo Reimer will present a talk and slide show on altered books at 7:00 p.m. in the Columbia Center Auditorium.

The Portland Artists Group is a diverse group of Northwest women artists whose interest in mixed-media art has led them to establish a supportive community in which to explore and en-

courage both art and education. "Beyond Words" is being presented as a part of the Literary Arts Series. The Columbia Center is located at 375 S. 18th St., St. Helens.

West Nile Virus is not easily contracted

The likelihood of contracting West Nile Virus is very low, but publicity surrounding the virus has many people seeking more information about the symptoms.

Most cases of infection by the mosquito-borne virus result in no symptoms or mild, flu-like symptoms. In rare cases, the virus can cause inflammation of the brain (encephalitis), which interferes with brain and spinal cord functions and can result in death.

The virus has been found in West Asia, the Mediterranean, Africa, and the Middle East. It was first identified in the United States in New York City, in 1999. The virus has not yet been found in Oregon, though public health officials expect it to arrive this year. Washington and California have each reported at least one case.

West Nile Virus is transmitted to humans from mosquitoes that become infected by feeding on birds that are infected with the virus.

Most infections develop 3 to 14 days after being bitten by an infected mosquito. Mild infections include fever and flu-like symptoms and generally do not require medical attention. Se-

vere symptoms can include high fever, headache, neck stiffness, stupor, disorientation, coma, tremors, convulsions, muscle weakness, vision loss, numbness and paralysis. Persons with severe symptoms of West Nile Virus should seek medical attention immediately. There is no specific treatment for the virus. In severe cases, supportive treatment may include intravenous fluids, breathing help and nursing care.

The incidence and severity of West Nile Virus in the U.S. has varied greatly: In 1999, 62 cases of West Nile Virus were connected with seven deaths in the New York area. In 2000, 21 cases were diagnosed, resulting in two deaths and, in 2001, there were 66 cases with nine deaths. As the virus spread throughout the country, more than 400 cases and 263 deaths were reported in 2002. As of July 11, the Center for Disease Control (CDC) has reported three cases for 2003.

The key to prevention of the West Nile Virus is to reduce or eliminate contact with mosquitoes, which are most active from dusk to dawn and from April through October. Methods

for reducing contact include the following:

- Eliminate standing water in tires, buckets, and tree stumps.
- Replace water weekly in outdoor containers, including bird baths.
- Stock mosquito-eating fish in ponds and water troughs.
- Maintain screens on windows and doors.
- Wear long sleeves and long pants when mosquitos are out.
- Use an insect repellent with DEET (N, N-diethyl-meta-toluamide).

The likelihood of being infected is still very low, according to the Oregon Department of Human Services. Even in areas where mosquitoes carry the virus, fewer than one percent are infected, and fewer than one percent of people become severely ill when bitten by an infected mosquito.

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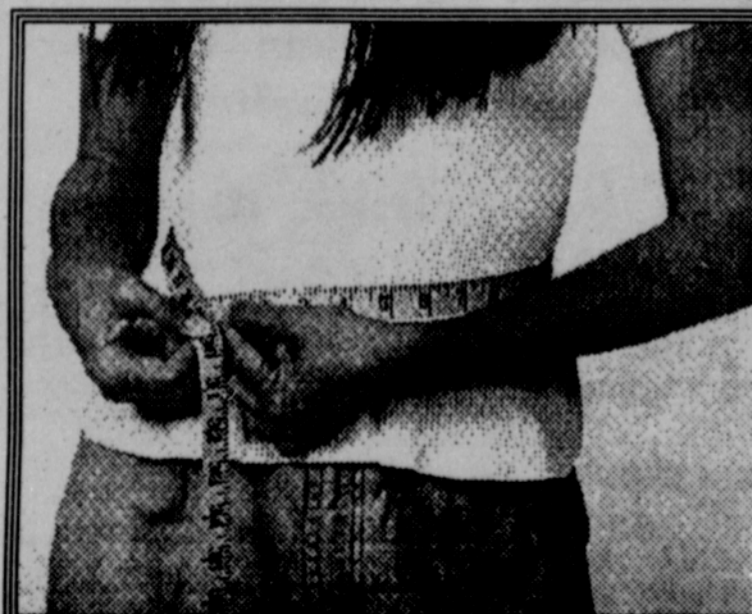
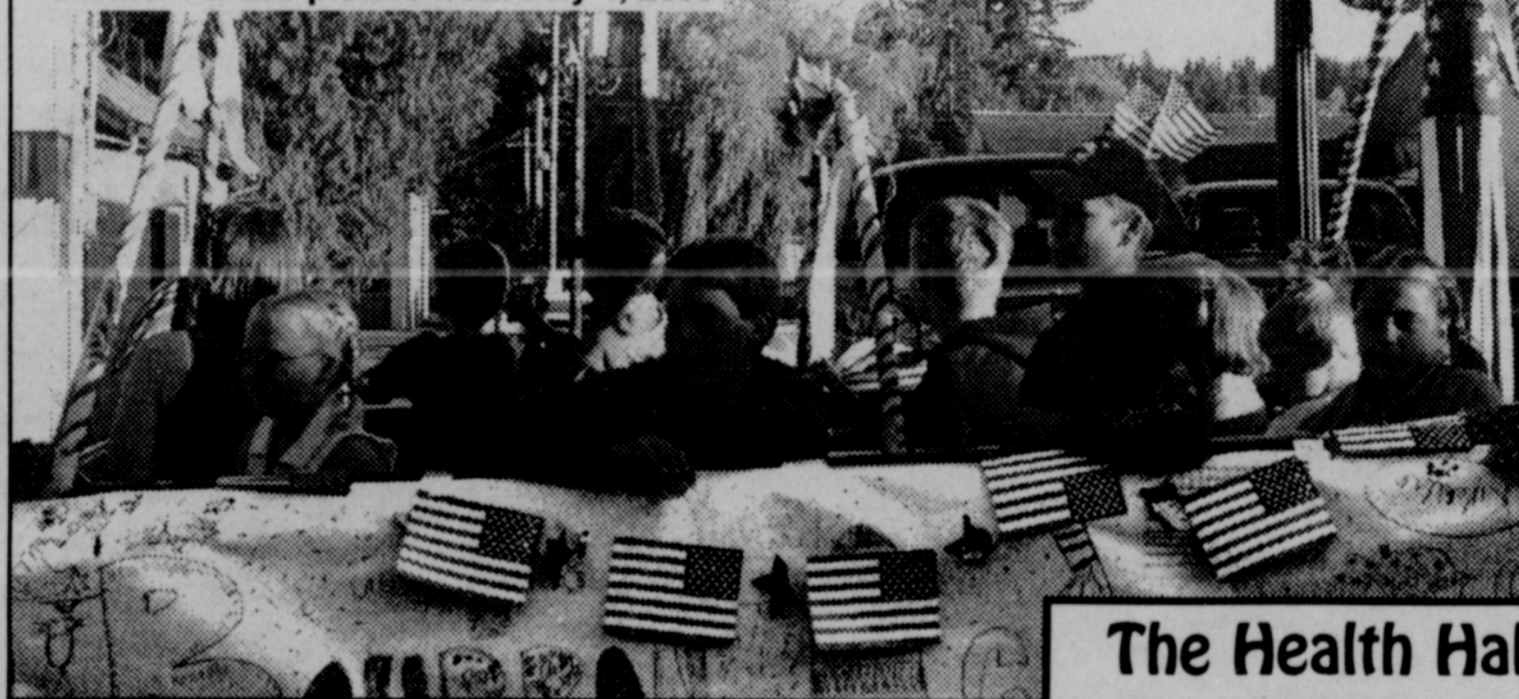
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