

HEALTH

DEPARTMENT OF HEALTH/HUMAN SERVICES ANNOUNCES NEW CAMPAIGN AIMED TOWARDS AFRICAN AMERICANS

HHS Secretary Louis W. Sullivan, M.D., announced a national media campaign aimed at dispelling misconceptions about alcohol and other drug use among African-American youth and at reinforcing the strengths and positive activities among these youths.

Secretary Sullivan unveiled the campaign at an assembly of students and teachers at Fletcher Johnson Education Center in Washington, D.C. He was joined at the event by Mayor Maynard Jackson of Atlanta.

Atlanta and the District of Columbia are two of the 14 target cities of the campaign. The others are New York, Los Angeles, Baltimore, Chicago, Dallas, Ft. Worth, Memphis, Houston,

Philadelphia, Raleigh, Durham and Detroit.

Entitled "By Our Own Hands," the education campaign has been in development by community groups from these areas for many months, in partnership with HHS' Office for Substance Abuse Prevention. This partnership reinforces the prevention objectives in the President's National Drug Control Strategy by promoting positive messages to the inner city youth who are at high risk for drug use.

"Even before the recent disturbances in Los Angeles and many other cities across the United States, we recognized that the time has come to put an end to misconceptions about the extent of drug use among black

youth," Secretary Sullivan said. "Our studies show that contrary to many misconceptions, these youngsters are less likely to use alcohol and other drugs than are kids from other ethnic groups. We need to make the facts known, and for black communities, we need to build on these strengths."

An analysis of data from the National High School Senior Surveys for 1985 to 1989 shows that 88.3 percent of white males had used alcohol in the past year, but only 72.5 percent of African-American males had done so. Twelve percent of white male seniors had used cocaine, compared with 6.1 percent of African-American male seniors. Forty percent of white male

seniors has used marijuana, compared with 29.8 percent of African-American male seniors.

Data from a private sector survey, carried out by the Parents Resource Institute on Drug Education Inc. (PRIDE) of Atlanta, show that 35.1 percent of white male junior high students had drunk beer, while 30.6 of the African-American males.

Comparable differences between white and African-American girls were found in both of the above surveys, although in all cases the proportion of girls using alcohol and other drugs was less than for males.

Despite these lower use rates, "Black youth who live in our inner cities clearly are affected by alcohol and other

drugs," Secretary Sullivan said.

"They are often exposed to drug-related behavior by adults; they can be involved in some aspect of the drug trade; and they are often victimized by drug-related neglect, crime and violence."

Secretary Sullivan said that the campaign has two principal purposes: "First, to reinforce the resiliency of these children by reaching them with prevention and self-esteem reinforcing messages between the ages of 9 and 13, before the average age of first drug use. And second, to convince their communities and the general public that these youngsters...have better things to do than drugs," the slogan of this education campaign."

The campaign will include television and radio public service announcements, billboards, bus cards, brochures, and posters, and other printed materials. Community volunteers will assist in securing donated media time and space in print media.

Although this community-based effort targets 14 cities, campaign materials will be available nationally to other interested localities and organizations. They are available on request from OSAP's National Clearinghouse for Alcohol and Drug Information at (800) 729-6686.

OSAP is a unit of the Alcohol, Drug Abuse, and Mental Health Administration, one of the eight Public Health Service agencies within HHS.

Fact and Fiction About Ulcers

Are you the one American in 10 who has or will develop an ulcer at some time in your life? An ulcer is a break or sore in the lining of the stomach or the first part of the small intestine, called the duodenum. Most people know that ulcer disease can be very painful, but the condition is often painfully misunderstood as well. How much do you know about ulcers? Will you recognize the problem if it strikes?

Test your knowledge with this quiz provided by Marion Merrell Dow Inc.

Q. What causes ulcers?

A. The exact cause(s) of ulcer disease remains unidentified, although scientists have linked several factors such as smoking, alcohol, intake of large doses of aspirin and certain other medications, and aging to the disease. It is generally accepted that ulcers develop when either too much acid is secreted or the membrane lining of the stomach and duodenum is unable to protect itself.

Q. What are some typical ulcer symptoms?

A. Ulcers typically produce a gnawing or burning pain in the abdomen, usually between the navel and the lower end of the breastbone. The pain often occurs when the stomach is empty; it may subside when food is eaten.

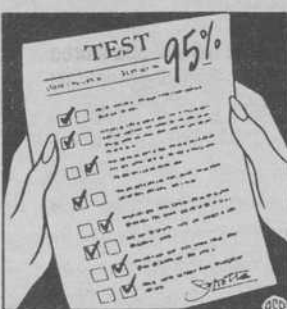
Although most ulcer patients experience pain, not all do. Some people, especially the elderly, may have silent ulcers.

Q. Are ulcers more common in men than women?

A. No. Statistics show a significant increase in ulcer disease among women. Ten years ago, twice as many men had ulcers as women. Today, the number is about equal. Changes in life-style for women certainly may play a role. More women are smoking, and it's clear that as the cigarette smoking rate has gone up, ulcers have gone up. Whether increased stress on the job as more women enter the job market contributes to ulcer disease is unclear at this time.

Q. Will smoking cause ulcers?

A. Smokers are much more likely to get ulcers than nonsmokers. The nicotine in cigarettes has been shown to break down the delicate lining of the stomach or the duodenum. Research shows that cigarette smoking actually doubles a person's chances of getting an ulcer; it slows healing and causes ulcers to recur faster.



Q. Can stress cause ulcers?

A. Stress alone is not a major cause of ulcer disease. When people are stressed they participate in various activities to relieve the stress. They may smoke more. They may use alcohol and medications more. And these things contribute to ulcer disease. Therefore, it may not be stress per se but how one handles stress that plays a contributing role. A high stress level may, however, aggravate an existing ulcer.

Q. Can ulcers be treated?

A. Yes. Medications are the primary treatment for ulcer disease. It's important to note that people should never self-medicate for a suspected ulcer without first consulting a physician. Ulcers can be life threatening.

You can purchase some medications over the counter such as antacids, while others require a prescription. Among these prescription drugs is Carafate® (sucralfate), a nonsystemic medication that does not need to enter the bloodstream to work. It helps heal duodenal ulcers by enhancing the body's natural healing process. Nonsystemic drugs are especially useful in people taking several medications, which can interact with each other causing unpleasant or even dangerous effects.

Q. Is there a cure for ulcer disease?

A. Unfortunately, there is no cure for ulcer disease. While most ulcers can be healed without difficulty, the old saying "once an ulcer always an ulcer" still holds true for most ulcer patients. But if you take medication, listen to your doctor, and maintain a healthy life-style, you can reduce your chances of recurrence and live a normal life even while you do have an active ulcer.

New Skin Patch Can Help Smokers Kick the Habit

Are you one of the 17 million Americans who tried to quit smoking in the last year? Did you succeed on your first try? If not, try not to be discouraged; only 10% of smokers are able to quit on their first attempt.

Most smokers realize quitting isn't easy. What they don't always understand is the reason why. Smoking is not just a habit, it is often a serious addiction. In fact, the Surgeon General has reported that 90% of all smokers are physically addicted to nicotine. But if you are seriously committed to quitting, there is good news. The newest tool in the smoking cessation battle is a nicotine patch such as Nicoderm® (nicotine transdermal system). It could be the help you need to quit.

The patch, available by prescription only, resembles a simple adhesive bandage and is applied once every 24 hours to a non-hairy skin site. Nicotine is delivered through the skin at a rate controlled by a membrane in the patch, reducing the craving and other physical withdrawal symptoms that many smokers

experience when trying to quit "cold turkey."

The Nicoderm system provides enough nicotine to relieve urges and cravings, yet not quite enough to support existing levels of addiction. As the body adapts to the lower drug level, the amount of nicotine is gradually reduced in a simple three-stage weaning schedule helping most patients to become nicotine-free in 10 weeks.

Marion Merrell Dow, marketer of the patch, cautions smokers not to view it as a "magic bullet" for quitting. Nicotine dependence also has psychological dimensions which can't be ignored. As a result, behavioral changes are necessary to successfully conquer the nicotine addiction. Marion Merrell Dow has addressed this aspect by providing patients with a "6-2-2 Committed Quitters" booklet, which helps smokers deal with the social and environmental cues often associated with smoking.

To learn more about smoking cessation, see your doctor.

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Recreational Drug Abuse Recognition and Treatment, is the topic of a public lecture scheduled for 1 p.m., Saturday, June 6 at the Stewart/Mojave Sports Center, 275 N. Mojave Rd. The program is designed for ages 16 and older, and sponsored free by the City of Las Vegas. Call 229-6563.



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