

HEALTH

HEALTHWIRE NEWSBRIEFS

AIDS CASES RISE DISPROPORTIONATELY AMONG AFRICAN AMERICANS & LATINOS

The Federal Centers for Disease Control and Prevention (CDC) report that AIDS cases more than doubled last year under a broader definition of the disease — showing a dramatic increase in infection among heterosexuals. The CDC expected the new definition to increase the number of cases by 75% but found that the number of new cases had jumped by 111% instead. The increase was greater among women (151%), African Americans (102%), and Latinos (123%). Data for Native Americans and Asian Americans was considered unreliable because of the small number of cases reported. Other CDC data showed that for women the most dramatic rise in cases was among African American women in the South. FOR MORE

INFORMATION CONTACT: Tom Skinner, CDC Press Office, 404-639-3285.

STUDY INDICATES DISCRIMINATION IN AIDS TREATMENT

A study, conducted at Johns Hopkins Medical School in Baltimore, M.D. by Dr. Richard Chaisson, showed that obtaining quality AIDS treatment is extremely difficult for people of color. Dr Chaisson's study looked at African Americans and whites with identical HIV status who were applying for admission to a Johns Hopkins AIDS treatment program. He found that 63% of the white applicants had been given AZT (the most effective AIDS drug available) by their physicians, while only 48% of African American applicants were being treated with the drug. Further, when examining the applicants usage of other drugs designed to extend

the lives of AIDS patients by preventing infections, Chaisson found that 82% of the white applicants were receiving preventive drug therapy, compared with only 58% of the African Americans. Since all applicants surveyed agreed to receive the same type of drug treatment once they were admitted to Johns Hopkins, Dr Chaisson said that he could only conclude that "there really is a racial difference in how physicians are treating people."

While the study only reviewed patients in Baltimore, similar treatment discrepancies have been found in New York State programs. In New York, African Americans and Latinos were less likely to be enrolled in state-controlled AIDS treatment services than whites. FOR MORE INFORMATION CONTACT Dr. Richard Chaisson, Johns Hopkins (See Healthwire, Page 21)

ASPIRIN DISCOVERY MAY LEAD TO A BETTER PAIN RELIEVER

CHICAGO - A safer aspirin with fewer side-effects may be marketed in years ahead now that researchers have unlocked the ancient mystery of how the pain reliever works.

"The drug companies are already hot on this," said Dr. Michael Garavito, of the University of Chicago Medical Centre.

"The bottom line is that one can now build a better aspirin. It won't be more efficacious, but it would be safer to take," said Garavito, who together with French scientists has shown how aspirin and pain relievers like it stop pain and inflammation.

Aspirin has been used by humans for thousands of years. It was first taken as an herbal preparation made from willow tree bark and then synthesized in pure form a century ago.

Its chemical dynamics remained a mystery until recently. They have now been explained by Garavito and colleagues at the Institut de Biologie Physico-Chimique in Paris.

Aspirin already was known to interfere with the activity of an enzyme called prostaglandin H2 synthase, or PGHS, which helps produce pain-signalling

prostaglandin hormones.

Using X-ray crystallography, the Chicago-Paris team looked at how aspirin acts on PGHS at the molecular level. They found that the enzyme is a crystal with

a tube running through its centre.

"Normally, the chemical precursors of prostaglandin move up through this channel," said the researchers in a (See Aspirin, Page 21)



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YOUR HEALTH

Five Criteria for Selecting A Good Family Health Plan

News USA

(NU) - Today's families have more choices than ever when selecting a health plan. Often, employers are offering two or three plans, but the selection process needn't be confusing.

"To help ensure that families make an appropriate choice, it's helpful to consider five specific components of a health plan," says Dr. Edward J. Smith, vice president of medical management for CIGNA HealthCare, Inc., one of the nation's largest operators of health maintenance organizations. Here are his criteria:

- **Quality care** — There is no substitute for quality. Look for a plan that maintains a strict physician credentialing program to ensure that participating doctors are well-qualified. The plan also should encourage preventive care and be able to demonstrate a quality-management program to provide ongoing improvement of health care services.

- **Network of participating physicians and hospitals** — Research the directories provided by health plans to see which family practice physicians, internists, pediatricians, obstetrician/gynecologists and other specialists are in the network. This becomes even more important if you have young children or if someone in your family is receiving on-going care for a chronic disease. A health plan should have a comprehensive network of participating physicians, hospitals and other facilities located close to your home.

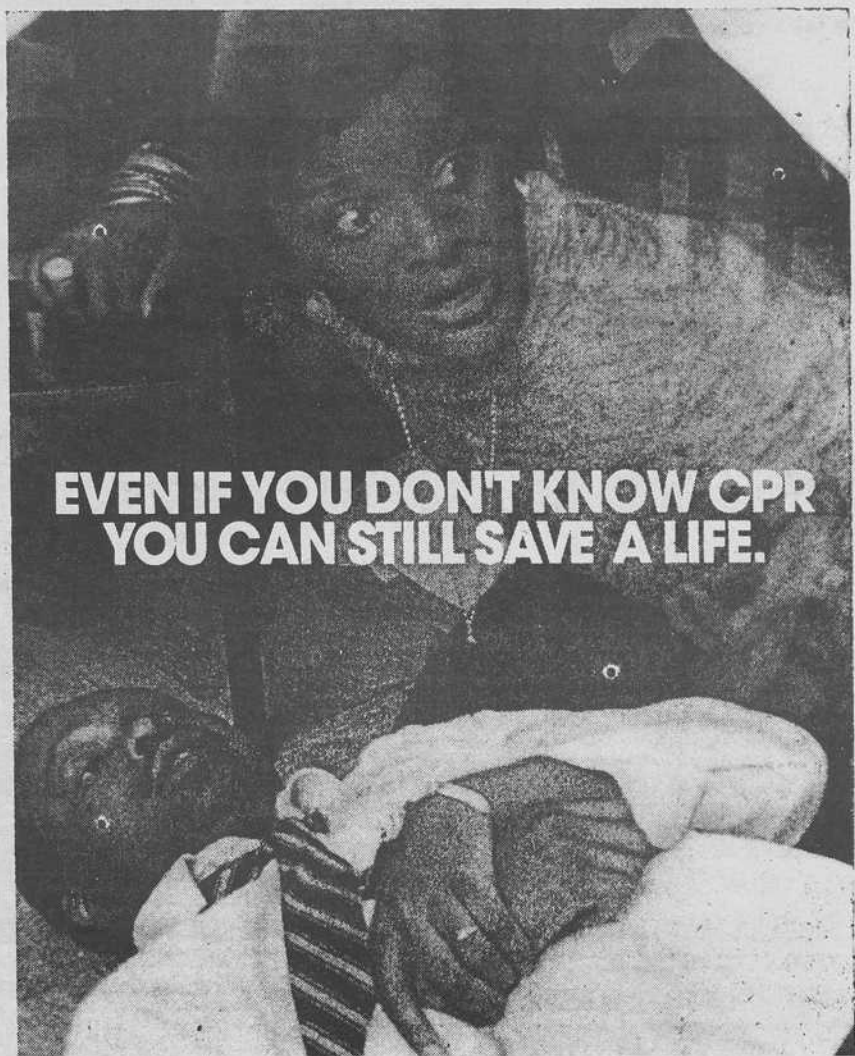
- **Flexibility and service** — A plan should be easily accessible to answer your medical questions and have a formal grievance procedure. You

ought to be able to choose a different primary care physician for each family member, and change your doctors at least twice a year. Flexible plans allow you to use other medical facilities during emergencies or vacations. Good plans may offer after-hours medical advice lines.

- **Experience and financial stability** — Choose a reputable health plan. In recent years, many small health plans have gone bust, leaving customers responsible for their outstanding medical bills. A financially stable company will have a strong claims-paying ability and credit rating provided by A.M. Best, Standard & Poor's and Moody's, the major agencies that evaluate the financial stability of insurance companies.

- **Wide spectrum of products and services** — A broad-based health plan should offer at least three choices: a basic Health Maintenance Organization (HMO) with no deductibles and only a small co-payment for doctors' office visits; a "dual choice" plan, featuring an HMO and Preferred Provider Organization (PPO) option, which lets people choose from a broader range of physicians, but which includes deductibles and co-payments; and a traditional "Point of Service" option, which enables people to see physicians outside the HMO if they pay a deductible.

"On balance, when choosing a health plan, look for a company with the products, services and financial strength to provide quality, consistent health care coverage at a reasonable cost," says Smith.



EVEN IF YOU DON'T KNOW CPR YOU CAN STILL SAVE A LIFE.



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To learn more about life-saving techniques, call your Red Cross.

