

**HEALTH**

**Limit fat in diet and reduce risk of prostate cancer**

HOUSTON — Men who restrict the fat in their diets may lower their risk for prostate cancer.

That's the indication of a six-month study to determine if limiting fat intake to 20 percent of total calories would reduce levels of prostate specific antigen, a blood marker used to indicate the risk for prostate cancer.

"In patients with really elevated PSA, we observed a 10 percent reduction," said Dr. Dov Kadmon, a urologist at Baylor College of Medicine in Houston. "We hoped this study would tell us if there was a downward trend in PSA levels associated with a lower-fat diet. We wanted to know the feasibility of conducting a larger study with a larger reduction in fat intake, perhaps as low as 10 percent.

The average PSA reduction in study subjects was one point.

"That's not a huge amount," Kadmon said, "but it was a measurable drop, and perhaps such drops in PSA levels have a cumulative effect."

Prostate cancer, the major cancer killer in men 50 and older, occurs significantly more often in black men than in white men.

"I think that in prostate cancer it makes all the sense in the world to address prevention rather than treatment and cure," Kadmon said, "because there is worldwide epidemiological evidence that extraneous factors, most likely including diet, make a difference."

Kadmon also suggested that all men 50 and older be screened annually for prostate cancer using a PSA blood test and a digital examination.

Black men and men with a family history of prostate cancer should be screened annually beginning at age 40.

**HEALTH TIPS**

**Night shifts can be easier if you work with your body's built-in clock**

Workers should move their shifts forward rather than backward whenever possible, says a Stanford University emergency medicine physician who studies what happens when people's sleep habits change.

"The best strategy is to stay on one shift as long as possible," suggests Dr. Rebecca Smith-Coggins, assistant professor of surgery (emergency medicine). "You'll have the best chance of getting restful sleep that way, so you'll be more alert — and potentially safer." A study of 79,000 nurses published in the December 1, 1995 issue of the journal *Circulation* showed those who worked irregular shifts for more than six years had a moderately higher risk of suffering a heart attack than co-workers.

But for people who must change their shifts, the healthiest approach seems to be to start the new shift later in the day, Smith-Coggins says. For example, it's easier on your sleep and rest patterns to change from an eight-hour shift starting at 7:00 a.m. to one starting at 3:00 p.m., rather than the reverse.

"Studies, including ones that we conducted here at Stanford, have shown that people who work random shifts in a 24-hour

work environment suffer in their ability to perform specific physical tasks and to make decisions. Other studies have shown that when workers are shifted forward rather than randomly, they perform better and have fewer sick days," she says.

"But it still takes two weeks to get used to a night shift after a day shift," notes Smith-Coggins, who along with many of her emergency medicine colleagues has extensive experience coping with varied shifts.

New night workers can help themselves adjust by recognizing that they won't immediately get a full six to eight hours' sleep in one stretch. To help make the change, Smith-Coggins recommends that new night workers take a three-hour nap before starting work, then sleep again after they finish their shift. "Studies and our own experience among emergency department workers point to this double sleep pattern as the easiest way to switch over," she says. Eventually, most shift workers will find themselves sleeping longer after they get home and napping less before they start work. For many, a full "night's" sleep is ultimately possible in the morning after

work, she says.

Understanding why moving forward is better is a bit complicated, but Smith-Coggins says it's basically because most humans operate on a 25-hour sleep-wake cycle. In other words, our body temperature and other natural functions rotate as if the day were 25 hours long.

"You can see how that works by studies that place people in darkened settings with no clues about time. They develop a natural tendency to get up one hour later every day, a clear indication that we are on a forward rather than backward or static cycle," she says.

Some other ways for night workers to get more efficient rest include darkening the bedroom as much as possible or using a sleep mask. Ear plugs or so-called white noise, such as a humming sound from a fan or air conditioner, can help, too. It's also helpful to maintain the same bedtime rituals, such as brushing your teeth or relaxing with a book or television show — particularly if the material is not unsettling.

Heavy exercise just before trying to go to sleep should be avoided. But to promote restful sleep, it helps to exercise moderately at some point every day, says Smith-Coggins.

**Sleep disorders in kids are often overlooked, says child neurologist**

Children and even some adults who appear irritable and have trouble concentrating in school or at work are sometimes misidentified as suffering from attention deficit disorder (ADD). For some, the real culprit might be sleep apnea, says a sleep expert at Stanford University Medical Center.

"A child who isn't getting enough sleep is going to fidget and be unable to concentrate, and to the teacher or parent, this looks a lot like ADD, says Dr. Rafael Pelayo, instructor in psychiatry and behavioral sciences at Stanford's Sleep Disorders Center. "After all, children who aren't getting enough sleep can't put their head down and go to sleep in class, so they have to respond somehow," he says.

ADD is a brain and hormonal ailment that according to national statistics, affects the behavior of about 3.5 million children and 2 million to 5 million adults, says Pelayo. Sleep apnea, which affects about 2 to 8 percent of the population, is caused by a blocked airway and an inability to breathe properly at night, which in turn causes lack of sleep.

"We don't know how many sleep apnea sufferers are

misdiagnosed as having ADD, but since both conditions are so common, it's likely that the numbers are high," Pelayo says. "While the daytime symptoms of ADD and sleep apnea appear similar, the nighttime symptoms of the two maladies are quite different, and so are the treatments."

Ironically, Ritalin, a prescription drug often given to people who have ADD, will temporarily relieve sleep apnea symptoms because as a stimulant it helps people stay awake and alert. However, the treatment is temporary at best and even potentially dangerous, because it only masks the symptoms until the body develops a tolerance for the drug.

Sleep apnea often is caused by a physical deformity such as an airway that has not grown to normal size or, particularly in adults, an airway that is blocked by surrounding fat caused by obesity.

It's up to family members to look for signs of sleep apnea. These include persistent snoring in both adults and children.

"Snoring is a common ailment, but it is never really normal behavior. When it occurs, especially in children, it's a warning sign of sleep apnea or

at least troubled sleep." Other signs of sleep apnea include night sweats caused by the increased work of breathing, as well as unusual sleep positions, especially bending the head and neck back, to open the airway. Pelayo says family members should look also for sleepwalking episodes and night terrors as symptoms of persistent interrupted sleep. Another sign is bed wetting, particularly among children who previously could control their bladders.

Sleep apnea can be diagnosed in a medical center where a team monitors sleep patterns for one or more nights, but Pelayo says "the first line of defense is an attentive family member or partner who can determine if the sufferer is getting appropriate sleep."

About half the adults who have sleep apnea are overweight, but children who get insufficient sleep because of the program often have trouble growing.

A simple remedy, such as coaxing the sufferer to sleep on the side, may relieve sleep apnea. In children, the condition is often caused by enlarged adenoids and tonsils, and in some cases, surgically removing (See *Sleep Disorders*, Pg 16)



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