

**BRIEFS**

**BEWARE OF RAW OYSTERS**

People with chronic illnesses who eat raw oysters are playing Russian roulette. "When you eat an uncooked oyster, you risk exposure to possibly fatal organism," said Dr. Herbert DuPont of Baylor College of Medicine in Houston, "especially if you have diabetes, liver disease, cancer, AIDS or other severe chronic illnesses." The only guaranteed safe way to eat oysters is to cook them because you can't tell by appearance, smell or taste whether they contain potentially dangerous organisms. The bacteria known as *Vibrio vulnificus* poses one of the greatest health risks to consumers of raw oysters. These bacteria release a poison that kills body tissue, causing black skin lesions resembling those produced by flesh-eating bacteria. Initial symptoms develop 24 to 48 hours after the bacteria are eaten and include fever, muscle aches, redness of skin, a drop in blood pressure and light-headedness. Infection by *Vibrio vulnificus* can be fatal within 24-hours, so immediate medical treatment is required. "Be sure to tell your doctor that you've eaten raw oysters within the last few days because treatment requires a special type of antibiotic," DuPont said.

**RELIEF FOR PARKINSON'S DISEASE TREMORS**

An electrode implanted in the brain allows doctors and patients to "turn off" Parkinson's disease tremors. "The procedure, deep brain stimulation, is still in the research phase in the United States," said Dr. Richard Simpson, a neurosurgeon at Baylor College of Medicine in Houston. The technique requires patients to be awake under local anesthesia while doctors implant an electrode into the deep portion of their brain called the thalamus. Once placed, the electrode is connected to a transmitter and tested at different frequencies. Researchers believe the high-frequency stimulus generated by the electrode jams the brain impulses that create the tremors. "The results are dramatic," Simpson said, "with tremors stopping while the current is on and starting once the current is off." The best candidates are Parkinson's patients in good overall health who have tremors as their main problem and do not respond to medications. The procedure has been successful in Europe and is being tested at Baylor and five other U.S. medical centers.

**TEENAGERS MORE PRONE TO RISKY BEHAVIOR**

Four leading risk categories make the teens years especially fraught with hazards. "Drinking alcohol while doing other activities, failure to use safety devices, access to firearms and sports are the big four," said Dr. Albert C. Hergenroeder, chief of adolescent and sports medicine at Baylor College of Medicine and Texas Children's Hospital, both in Houston. In the 1940s, school "dangers" for teens included being caught chewing gum, running in the hallways or wearing improper clothing. Today's teen must contend with drug abuse, date rape and assault. What's a parent to do? Talk, inquire and wait, Hergenroeder said. "Don't wait for them to talk to you," he said. "Talk with them first. Many parents fall for the 'not my child' myth and fail to realize their teen could be engaging in risky behavior." When talking, ask specific, sometimes blunt, questions: What do you do for fun? Do you drink and drive? Do your friends? If your teen's behavior is not risky, congratulate them. Even the best teenagers will do dangerous things. Hergenroeder urges parents not to give up.

**SIGNS OF CHILDHOOD CANCER**

Childhood cancer is extremely rare, but parents can have a healthy awareness about possible symptoms by remembering the acronym CHILDREN. "Childhood cancer can be difficult to recognize because the symptoms are similar to other childhood illnesses," said Dr. David G. Poplack, head of the Texas Children's Cancer Center at Baylor College of Medicine and Texas Children's Hospital in Houston; however, parents can know the eight warning signals of possible childhood cancer by thinking "CHILDREN": • Continued, unexplained weight loss; • Headaches with vomiting in the morning; • Increased swelling or persistent pain in bones or joints; • Lump or mass in the abdomen, neck or elsewhere; • Development of a whitish appearance in the pupil of the eye; • Recurrent fevers not due to infections; • Excessive bruising or bleeding; • Noticeable paleness or prolonged tiredness. "It's always a good idea to see your pediatrician if you have concerns," Poplack said.

**KEEPING THE WEIGHT OFF**

Exercise alone, not diet and exercise, is the key to keeping the weight off. According to a two-year study conducted at Baylor College of Medicine's DeBakey Heart Center in Houston, people who exercise without following a restricted diet maintain their weight. "This confirms what we have known all along — people who diet fail at it because they feel deprived," said Dr. Ken Goodrick of the Behavioral Medicine Research Center at Baylor. "By overcoming negative attitudes about exercise, people can learn to enjoy it and appreciate the benefits." The study consisted of 127 overweight men and women who were placed in one of three groups: a diet-and-exercise group, a diet-only group and an exercise-only group. During the first year of the study, the diet-only and diet-and-exercise groups lost the most weight. But by the second year, both groups regained the weight. The exercise-only group members were taught the psychological and physical benefits of exercise. They lost weight and maintained the loss. The study findings were published in the *Journal of the American Dietetic Association*.

**HEALTH**

**Walking toward greater fitness**

(NAPS)—The more you know about walking for your health, experts agree, the better you'll be able to do it. Here are a few hints from *Walking Magazine* that may help you get off on the right foot:

- Choose a walking environment in which you feel comfortable. This may be at home, on a treadmill. Or you may want to walk around the neighborhood, near the office, in a mall or on a track.
- Decide what degree of sociability you desire. Do you want to go solo, work out in the company of a crowd or have the support of just a partner or two?
- What will you wear? Some

people are more comfortable in clingy workout clothes, others prefer the baggy kind.

- Protect your feet by wearing shoes designed for walking and replacing them every 500 miles or so.
- If your exercise routine begins to bore, vary your walking routes, walk with a friend, or listen to a personal stereo.
- If you're using a treadmill, remember not to grip the side safety rails unless you slip or need support while you adjust the controls. If you have to hold on to keep from inching back, decrease the speed.
- For maximum benefit, walk at a brisk, comfortable pace—

fast enough to get your heart rate up, but comfortable enough that you can still carry on a conversation.

- When walking in cold weather, layer your clothing so you can shed or unzip pieces as you warm up. Inner layers should transport perspiration, middle layers provide insulation and outer layers shield you from the elements.
- Start with thin tops and leggings. For the middle layer a full zip fleece jacket or a half zip

fleece anorak can be a good choice. Finally, wear a warm, water-resistant jacket and protect your extremities with fleece or wool mittens and socks, a neck warmer or scarf. Top it off with a hat to hold in the heat.

Follow this advice and you will find yourself walking on the sunny side of good health. For more on walking, read *Walking Magazine* available on local newsstands. Or call (800) 924-0084 for a complimentary copy.

**New help for 16 million**

(NAPS)—Diabetes mellitus is a disease that afflicts approximately 16 million people in the United States, half of whom are not even aware they have the disease. It can have many serious consequences, such as loss of vision, heart problems, kidney failure, and lower limb amputations.

Fortunately, there are health care professionals who can help those with diabetes save their lives, limbs and money. For example, the doctor of podiatric medicine is a highly trained physician with skills in early recognition and treatment of diabetic foot disease.

A podiatrist is often the first medical professional to spot signs of diabetes. Regular visits, particularly by those over 60, can mean treatment starts while it can still do the most good.

The person with diabetes should make regular visits to a podiatric physician for foot inspections.

Poorly fitted shoes are involved in as many as half of the problems that can lead to the threat of amputation. Shoes should have leather or canvas uppers, fit both the length and width of the foot, and be cushioned and sturdy. Avoid high heels and shoes with pointed toes. Never wear open toes or heels.

Wash feet daily, with mild soap and warm water. Test the

water temperature with your elbow, since your feet may be unable to detect scalding temperatures.

Dry the feet carefully with a soft towel, especially between the toes. If the skin is dry, use a good moisturizing cream daily, but avoid getting it between the toes.

Inspect feet and toes daily for cuts, bruises and sores. If self-inspection is hampered by age or other factors, use a mirror or get the assistance of another person.

Wear thick, soft socks; avoid socks with seams, which could cause skin injuries. Never go barefoot, especially out of doors.

Smokers should give up the habit; tobacco can contribute to circulatory problems. Consumption of alcohol should be moderate. Close observance of good dietary habits is very important.

Cut toenails straight across, then use an emery board or pumice stone to gently file away sharp corners.

Never try to cut calluses without professional guidance, and never use commercial preparations to remove corns or warts; they contain chemicals which can burn the skin.

Keep these hints in mind and keep up your visits to your podiatrist and you may find you can fight diabetes if ever you do develop that disease.

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