

HEALTH

Mothers-to-be should get tested for HIV

By Marian Wright Edelman
Special to Sentinel-Voice

I remember as if it were only this morning the first time I held each of my three sons in my arms. I said prayers of thanksgiving for their good health and dreamed of the futures they would have. I have been blessed to see them grow into fine young men.

Every day I pray for them and for the mothers and babies who will have such different fates.

The Centers for Disease Control and Prevention reports that there were more than 500 babies born with the AIDS virus in 1996. Since 1991 approximately 1,000 children and youth under 25 have died each year from AIDS, and half

of all newly diagnosed HIV infections in the United States now are in persons under 25.

But there is good news. Today there is only a 25 percent probability that an HIV positive woman will transmit the virus to her unborn child. Those odds could be brought down to only a five percent probability if she is treated with AZT during her pregnancy.

Many women don't know if they are HIV positive when they get pregnant. Sometimes they think, "It couldn't happen to me." A lot of women (and men) don't want to know.

Early prenatal care has always been crucial to giving birth to a healthy baby. In today's world, all pregnant women must insist on an early

HIV test as well.

This is a matter of such urgency that there has been much controversy over mandatory testing of pregnant women and/or newborns. About a year ago, an editorial in the *Washington Post* advocated legislation calling for mandatory testing of all pregnant women. Now pending in Congress is legislation sponsored by Tom Coburn, R-Okla., which would set up certain conditions under which states would be required to report a newborn's positive result to an HIV test.

In New York, Assemblywoman Nettie Mayersohn, D-Queens, sponsored a bill enacted into law last year mandating that

mothers be informed when their newborns show signs of HIV.

Since a baby is born with his or her mother's immune system, if a mother is positive a baby will test positive at birth, though many such infants are HIV negative and will convert to negative within the first six months. But infants can show signs of HIV infection early, and in most studies, symptoms appear earliest in Black infants. Warning signs include diaper rashes that do not respond to treatment, thrush and frequent and severe ear or other infections.

Both the CDC and the American Academy of Pediatrics encourage voluntary (See HIV, Page 15)

Know ABC's of viral hepatitis prevention

Special to Sentinel-Voice

HOUSTON — Avoiding viral hepatitis is as easy as knowing "ABC" — the three major strains of the disease that each year sicken millions of people worldwide.

"Whether it's viral hepatitis A, B, or C, there are certain precautions that can be taken," said Dr. Blaine Hollinger, a liver specialist and molecular virologist at Baylor College of Medicine in Houston.

All three diseases are caused by virus infections that are acquired in various ways. Other causes exist but are less common. Untreated hepatitis can have no symptoms, or can lead to medical problems including flu-like illness,

jaundice, liver failure, cancer, or death.

Common routes of infection are, for Hepatitis A, contact with an infected person's feces via contaminated food or water, day care settings or other situations where human feces may be present. This strain is commonly seen among travelers to developing countries with poor sanitation. In the United States it's more commonly caused by eating contaminated oysters or clams.

Hepatitis B results from contact with blood or other body fluids of infected people. It can be transmitted sexually, via needle sharing or passed from mother-to-infant.

Contact with blood or body

fluids of infected persons can produce hepatitis C, which is often seen among needle sharers, but infrequently transmitted through sex or from mother-to-infant.

According to Hollinger, vaccination is the best prevention for types A or B.

"Vaccination for hepatitis B is now routine for newborns in the U.S.," he said. "Travelers to developing countries may choose to get a vaccine for hepatitis A. There is no vaccine for type C."

Prevention for hepatitis B and C also includes using condoms for non-monogamous sex as well as practicing safe sex, and not sharing needles or other objects

that may have been contaminated with infected blood or body fluids.

To prevent type A, avoid nonchlorinated water or uncooked food that may have been contaminated with the virus. Treatment for types B and C includes antiviral drugs such as interferon.

"For type B, there has been some success with 3TC, an HIV drug. For type C, ribavirin and interferon are being studied in combination with promising results," Hollinger said. "Hepatitis is a major health problem. The good news is that it can be prevented and treated." No treatment is given for type A since recovery normally occurs in two weeks.

Managed care creates barriers for people with disabilities

Special to Sentinel-Voice

HOUSTON — A new study indicates that managed care has made access to medical care more challenging for people with disabilities.

Researchers with the Center for Research on Women with Disabilities at Baylor College of Medicine in Houston found that people enrolled in managed-care organizations encountered several obstacles that were not issues in traditional fee-for-service health plans.

The results of the study point to the need for the primary-care physician to have

more experience in treating disabilities and for consumers with disabilities to educate themselves and their doctors.

"People with disabilities were concerned that their gatekeeper physicians did not always know how to treat their disabilities," said study coordinator Ellen Grabis, a postdoctorate fellow at Baylor.

"The participants in our study were also concerned about the brief office visits they sometimes had with their doctors and not getting approval for the most effective medications or the expert specialist they needed."

Managed care is a system, usually available through a person's employer, in which consumers pay a set fee to a health plan and receive care from a network of providers in the plan.

Some participants in the study were also concerned about delays in receiving approval for services from managed-care companies.

"Persons with disabilities

are often extremely vulnerable medically and might need care more frequently and more quickly," Grabis said. "The managed care system, although cost-efficient, doesn't always meet their special needs."

Advantages of managed care for people with disabilities include lower cost of medications and assistance with the purchase of equipment and assistive devices.

HEALTH BRIEFS

NO MORE PROGESTERONE NEEDLES FOR IVF

HOUSTON — Women trying to become pregnant through in-vitro fertilization no longer have to endure weeks of daily needle sticks to get the hormone progesterone. "Traditionally, women undergoing IVF procedures have had to inject progesterone into their hips every day from the time the embryo has been transferred until the eighth week of pregnancy," said Dr. Sandra Carson, director of the Assisted Reproductive Technology program at Baylor College of Medicine in Houston. Now natural progesterone, marketed as Crinone, can be applied through the vagina like a contraceptive foam. The new treatment targets the drug directly where it is needed, maintaining lower blood levels and minimizing side effects from high progesterone, Carson said.

SCLEROTHERAPY CAN HELP WITH SPIDER VEINS

HOUSTON — Unsightly spider veins can vanish with sclerotherapy treatment. Spider veins are extremely small veins close to the skin that become dilated. Occurring most often on the legs, they tend to be grouped and look like a bunch of legs coming off a spider's body, said Dr. Ted Rosen, a dermatologist at Baylor College of Medicine in Houston. During sclerotherapy, a hypertonic saline, or salt water, solution is injected into the vein or group of veins. The solution destroys the blood vessel linings and causes the vessels to collapse. Once collapsed, the veins do not transport blood and lose the bright color the blood created. The procedure does not disrupt circulation because the veins involved are so tiny.

NASAL FLU VACCINE EFFECTIVE AND SAFE

HOUSTON — A nasal influenza vaccine is proving to be breakthrough in the battle to immunize children against flu without fear or pain of a shot. In trials conducted at Houston's Baylor College of Medicine and nine other U.S. sites, only one percent of 1,070 children who received the nasal vaccine developed culture-confirmed influenza during last year's flu season versus 18 percent of the 532 same-age children who received placebos. "This spray could well have widespread public-health implications," said Dr. Pedro A. Piedra, a pediatrician in Baylor's Influenza Research Center. "We recognize that children are the major carriers of flu," he said. "Every year influenza sweeps through schools, and the children take it home to their parents." Because this new vaccine is more easily administered, it could help control flu in school-age populations and thus control it in the adult population, Piedra said.

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