

HEALTH

Plastic surgery can correct problems as well as improve looks

Special to Sentinel-Voice

HOUSTON — For some patients, plastic surgery is not a luxury — it's a necessity.

"Plastic surgeons are often thought of as someone who does face-lifts, tummy tucks, breast enlargements and fat removal," said Dr. Jeffrey Friedman, assistant professor of surgery at Baylor College of Medicine in Houston.

"But approximately 60 percent of the work done by Baylor plastic surgeons is reconstructive surgery to

repair problems resulting from birth defects, disease or accidents."

Friedman recently created a new esophagus for a patient whose cancer had robbed him of the ability to swallow food. Friedman was able to create a new "food tube" by transplanting a portion of the patient's small intestine from his abdomen.

A patient with Romberg's disease also benefited from reconstructive surgery.

This rare disease causes

soft tissue on one side of the face to shrink over time, resulting in an anorexic appearance on half of the face.

Friedman transferred skin and fat from the teenager's back to her face to replace the missing tissue. Using microsurgery techniques, he connected the blood vessels from the transplanted tissue to blood vessels in the face.

"This is critical, because unless it is connected to a blood supply, the transplanted tissue will die,"

Friedman said.

For a child born with black hairy nevus, or birthmark, on two-thirds of her face, Friedman performed a skin graft to correct the problem. He stretched the skin on the girl's abdomen to create enough tissue to transfer to the forehead after the birthmark had been partially removed.

He attributes the success of these types of reconstructive procedures to advances in plastic-surgery

tools and techniques. Surgical instruments that are smaller than the width of a pencil tip are used in microsurgery to reconnect very small blood vessels and nerves.

Free-flap surgery, in which a section or flap of tissue is transferred from one part of the body to another, can help avoid tissue death when there's not enough tissue to work with on the part of the body being repaired.

"With these improve-

ments in plastic surgery, we can be more innovative in our treatment," said Friedman, a member of the plastic-surgery services at Texas Children's Hospital, The Methodist Hospital and St. Luke's Episcopal Hospital.

"For patients born with deformities, plastic surgery can improve their quality of life significantly, either for cosmetic benefit or functional purposes — or both," Friedman said.

Report: Black women more likely to be breast cancer victims

TRENTON, N.J. (AP) — Rates for breast cancer in New Jersey declined significantly between 1992 and 1995, but overall rates show black women are more likely to die

of breast cancer than white women.

The research comes from the state's first report on breast cancer, released Wednesday by the state

Department of Health and Human Services. It examines trends in breast cancer incidence and mortality, including differences among black and white women.

The data show the state's overall breast cancer cases peaked in 1988, and remained relatively steady until 1992. Between that year and 1995, the incidence rate decreased 10 percent. The overall mortality rate also declined in those years by about the same percentage.

The report shows that black women have lower incidence rates than white women, partly due to different risk factors. But blacks appear more likely to die from the disease.

Mortality rates for the group were higher in seven out of the last eight years of the study, which spanned 1979 to 1995.

In 1995, the mortality rate among black women was 32.7 out of 100,000, compared with 27.6 among white women.

Health officials said the overall decreased breast cancer rates mirror a national trend and may reflect earlier detection through mammograms and self-examinations.

Breast cancer is the second leading cause of cancer death in women, after lung cancer. It is the most common cancer in women, after skin cancer.

"Early detection is critical to improving black women's survival rates," Health and Senior Services Commissioner Len Fishman said. "That's why we've been out in communities actively promoting the importance of breast cancer screening and referring low-income and minority women to screening sites in all 21 counties."

Problems

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educated are more overweight — a trend that begins in adolescence.

So there's little surprise they end up dying more often from heart disease, lung cancer and diabetes.

Still, the report notes, even when these risk factors are accounted for, poorer, less-educated people die more frequently from heart disease, suggesting other environmental factors.

In some cases, public health strategies have improved the nation's health overall

but widened the disparities. The widespread dissemination of information about diet, exercise and smoking has reached richer, better-educated people first, improving their health but widening the gap, Jones said.

The solution, Shalala said, is targeted messages. She pointed to successes in reducing teen pregnancy and increasing immunizations.

"We need to modernize our messages," Shalala said. "That means music and television and getting to young people much earlier."

Asthma increasing among African-American children

Special to Sentinel-Voice

Five million American children suffer from asthma and inner-city African American children are twice as likely to suffer from the disease and six times more likely to die from it.

Asthma is a disease caused when there is an allergic

reaction causing passageways in inflamed lungs to constrict, making it difficult for the sufferer to breathe.

While there are genetic components to asthma, scientists believe that environmental factors are to blame for the sudden rise of the disease over the past 20 or 30 years. Whatever the reason, poor black children are gasping for breath in cities across the nation.

As scientists have been studying the growth of this life-threatening disease, they have found that allergies to dust, cigarette smoke, cockroaches, ozone and mold are common triggers for asthma attacks. Stress, obesity and low birth rates are also factors.

Many poor African-American children are at risk for many of these factors, so the prevalence of this disease in our community should not be surprising.

Public health officials and others have been watching this troubling growth of asthma and now have begun to set up special programs

targeted at inner city African-American children.

For instance, in Washington, D.C., Howard University's College of Medicine has started an asthma counseling program. Using an asthma counselor who works in the public schools, it tries to educate the children about the importance of taking their medications every day, not just when they have an attack. These medications help keep their lungs from becoming inflamed so that they will avoid a full-scale asthma attack.

But they are finding that many poor mothers just don't have the wherewithal to manage this daily regimen of medication for their children.

"Being poor creates barriers to managing chronic disease... When you're poor, you've got other challenges to deal with," explained Dr. Floyd Malveaux, dean of the Howard University College of Medicine in a recent

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Civil Rights Journal

By Bernice Powell Jackson



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