

HEALTH & WELLNESS

Healthbeat

Cocaine may cause heart attack symptoms

DALLAS (AP) — Younger ER patients with heart attack symptoms should be asked if they've recently used cocaine, which can cause similar chest pain, the American Heart Association warns doctors. For these patients, honesty can be a matter of life or death: Some heart attack treatments can be deadly to someone using cocaine.

New guidelines published online last week in the American Heart Association journal *Circulation* say that emergency room doctors need to be aware that symptoms of a heart attack in younger patients with no heart disease risk factors may be caused by cocaine use.

The drug can cause chest pain, shortness of breath, anxiety, palpitations, dizziness, nausea and heavy sweating — all symptoms of a heart attack.

"Not knowing what you are dealing with and giving the wrong therapies could mean death rather than benefit," said Dr. James Reiffel, professor of clinical medicine at Columbia University Medical Center/New York Presbyterian Hospital.

The number of cocaine-related users visiting ERs rose 47 percent from 1995 to 2002, increasing from 135,711 to 199,198, according to the government's Substance Abuse and Mental Health Services Administration. That's a tiny percentage of the more than 100 million patient visits to emergency rooms each year.

Cocaine can cause a heart attack, but only about 1 percent to 6 percent of patients with cocaine-associated chest pain actually have a heart attack, the statement says. Still, doctors say it's important for anyone with chest pain to get it checked out.

Cocaine increases blood pressure and the heart rate, constricting arteries into the heart, said McCord, cardiology director of the chest pain unit for the Henry Ford Health System in Detroit.

Three-star rating for Baptist

Wake Forest University Baptist Medical Center has received a three-star rating by the Society of Thoracic Surgeons (STS).

The STS recently developed a comprehensive rating system that allows for comparisons regarding the quality of cardiac surgery among hospitals across the country. Approximately 15 percent of hospitals received the three-star rating, which denotes the highest category of quality.



Lundy

"Achieving the highest rating from the Society of Thoracic Surgeons is a reflection of the high quality of heart care available at our heart center," said Rich Lundy, administrative director of cardiology diagnostic services at Wake Forest Baptist.

These results reflect the dedication of our multidisciplinary team of experts which include world-renowned physician experts in cardiovascular care."

The analysis of national data from the STS National Adult Cardiac Surgery Database covered the period from Jan. 1 through Dec. 31, 2006.

City's water is bacteria source

DENVER (AP) — It could be three more weeks before residents of a southern Colorado town can drink water straight from the tap after dozens of cases of salmonella poisoning were linked to municipal water, putting seven people in the hospital.

An analysis indicates the municipal water system in Alamosa is the source of the bacterial outbreak, as suspected, said Ned Calonge, chief medical officer for the state health department.

Gov. Bill Ritter declared an emergency Friday in Alamosa County, activating the National Guard and providing as much as \$300,000 for response efforts.

The city and county have also declared emergencies as officials scrambled to provide safe water and disinfect the system with chlorine.

As of last Friday, 138 cases of salmonella linked to the outbreak had been reported in people from infancy to age 89, of which 47 were confirmed by lab testing, Calonge said. The conditions of those hospitalized weren't released.

Alamosa, with about 8,500 residents, gets its water from a deep well system. The water is pure from the aquifer and is not chlorinated.

Investigators are seeking how the system was contaminated. Possibilities include a compromise in a storage tank or cross-contamination with a sewage line, Calonge said.

Stubbs invited to symposium

Dr. Allston J. Stubbs is one of four orthopaedic surgeons from around the country invited by the American Academy of Orthopaedic Surgeons and the Orthopaedic Research Society to participate as a young investigator in an upcoming symposium.

Stubbs, an assistant professor in the Department of Orthopaedic Surgery at Wake Forest University Baptist Medical Center, has been invited to participate in the Advanced Imaging and Computer Assisted Surgery of the Knee and Hip Research Symposium May 15-17 in Providence, R.I. The Academy pays all the expenses for the young investigators.

Stubbs, who recently joined the sports medicine team at Wake Forest Baptist, has served as one of the team physicians for Duke University, the Denver Broncos, the U.S. Ski Team, the Colorado Rockies, the Boston Marathon, and the Boston Ballet.

An expert on hip arthroscopy, Stubbs has authored research journal articles, created orthopaedic instructional videos, and given lectures at national and international orthopaedic surgery conferences.

Another honor for med student

SPECIAL TO THE CHRONICLE

Bryant Cameron Webb, a second-year student at Wake Forest University School of Medicine, has received a \$5,000 David E. Satcher Research Fellowship from the Student National Medical Association (SNMA) to explore racial and ethnic health disparities in academic research.

"Cameron is an outstanding student and champion for reducing and eliminating health disparities," said Ronny A. Bell, Ph.D., professor of epidemiology and prevention and director of the Maya Angelou Research Center on Minority Health at Wake Forest Baptist. "We are privileged to have him as part of our work here at the center."

Webb will conduct his investigation under the direction of a team of mentors including Bell, Kristen G. Hairston, M.D., M.P.H., assistant professor of internal medicine-endocrinology and metabolism, and David L. Mount, Psy.D., M.A., assistant professor of internal medicine

and a health disparities scholar through the National Institutes of Health National Center on Minority Health and Health Disparities.

He and other fellowship awardees will be honored during a luncheon at the 2008 Annual Medical Education

Conference, March 21 in New York City. The research projects will be featured in the *Journal of the SNMA* and presented at the Annual Wilbert C. Jordan Research Forum at the 2009 Annual Medical Education Conference in New Orleans, La.

"This research touches on my interest in the intersection of health policy and legislation with the elimination of health disparities—both

passions of mine," said Webb. "Dr. Hairston helped craft the original idea for the research and has been invaluable in providing overall guidance on the project."

"The goal of the project is to translate the wealth of health disparities data into a tool for more effective creation and review of health policy and legislation. A variety of state health care intervention indicators, such as state health spending, Medicaid program analysis, state-sponsored health disparities legislation and the function of state minority health offices will be used as a composite of state efforts aimed at eliminating disparities," he said.

Late last year, Webb received the 2007 National Association of Medical Minority Educators Inc. scholarship award. He also serves as president of the class of 2010 at Wake Forest University School of Medicine. A native of Fredericksburg, Va., he graduated from the University of Virginia in 2005.



Webb



Galson

Doctors to discuss obese kids

Surgeon General expected in Greensboro for discussion

SPECIAL TO THE CHRONICLE

Acting U.S. Surgeon General Rear Adm. Steven K. Galson will speak on preventing adolescent overweight and obesity to members of the Society for Adolescent Medicine (SAM) at their annual meeting tomorrow in Greensboro.

In early March Dr. Galson kicked off a nationwide tour to promote the U.S. Department of Health and Human Services' Childhood Overweight and Obesity Prevention Initiative, "Healthy Youth for a Healthy Future," which targets overweight and obesity prevention and the promotion of healthy lifestyles for children.

The tour coincides with the theme for SAM's annual meeting: Adolescent Obesity: Prevention and Treatment. Members of SAM will discuss

how they can help create environments for children and adolescents that focus on improving access to affordable healthy foods and providing opportunities for safe physical activity in schools and communities. In addition, experts in adolescent obesity will review how current treatment strategies that tackle adolescent obesity (behavioral, pharmacological, and bariatric surgery) can be implemented.

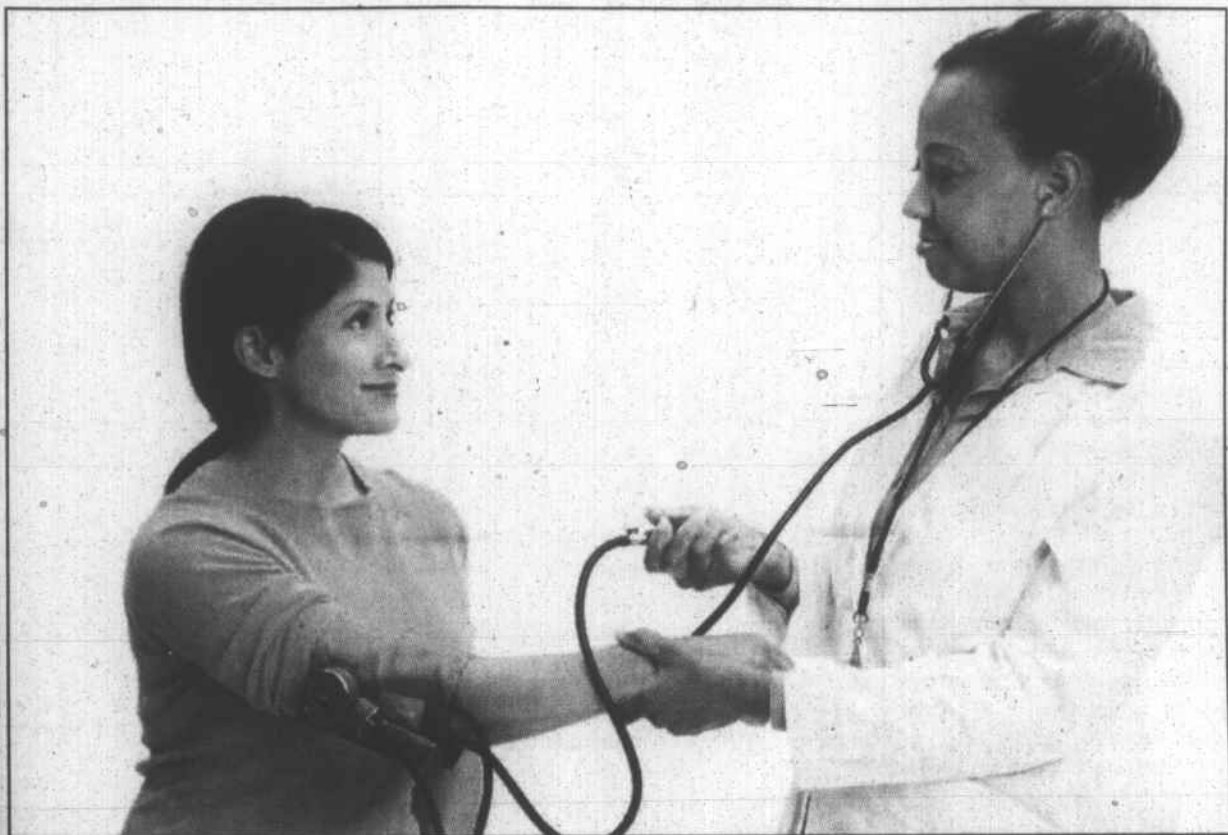
According to Dr. Galson, "Today more than 12.5 million children and adolescents two to 19 years of age are overweight and are at greater risk for numerous health consequences such as cardiovascular disease and type 2 diabetes. By taking a look at what each of us can do in our lives and communities to make ourselves and our families healthier, we can begin to tackle this epidemic."

Dr. Risa Lavizzo-Mourey, president and CEO of the Robert Wood Johnson Foundation, is slated to open the conference and discuss the scope of the adolescent obesity epidemic, its impact on health and on society, and the Robert Wood Johnson Foundation's vision for reversing the epidemic by 2015.

Dr. Lavizzo-Mourey is a national leader in transforming America's health systems so young people can live healthier lives and receive the health care they need. In April of 2007, the Robert Wood Johnson Foundation pledged \$500 million over the next five years to combat childhood obesity in the US — the largest commitment by any foundation to this issue.

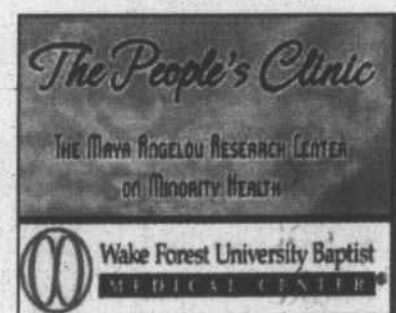
The keynote speaker for the conference is Kelly Brownell, Ph.D., MPH, Professor in the Departments of Psychology and Epidemiology and Public Health at Yale University and the Director of the Rudd Center for Food Policy and Obesity.

Dr. Brownell is an internationally known expert on weight control. He has written 13 books and more than 200 research papers and book chapters, and holds appointments on 10 editorial boards.



PARTICIPATING IN RESEARCH IS EVERYONE'S RESPONSIBILITY

Medical research has played a very important role in our understanding of the risks and burdens associated with various diseases and health conditions and in the development of practices that can treat these conditions or avoid them altogether. Much of what we know about health disparities has come from dedicated medical researchers who have committed their time and energy to understanding and alleviating these terrible tragedies. Unfortunately, our history is scarred by the exploitation of people of color and other vulnerable populations, such as the poor, people with limited mental capacity, and prisoners. Probably the most famous of these cases is the Tuskegee Syphilis Study. In this study, which began in 1932, African American men were intentionally withheld treatment for syphilis after it became available in 1945 in order to study the natural history of this disease. The study was finally stopped, but not



until nearly 40 years after it began.

Fortunately, numerous efforts have been put into place to ensure the safety of participants in medical research. Funding for federal research through the National Institutes of Health mandates that minorities and women be included in research studies or that a strong justification be given for excluding them. At medical centers in the US, Institutional Review Boards (IRBs) review and approve research studies conducted by their faculty before these studies can be conducted to ensure that the studies are safe, ethical, and beneficial.

These faculty members and their staff must also go through research ethics training before they are allowed to participate in research. Many medical centers also have training programs to educate their faculty on cultural appropriateness in working with various populations. Yet, despite these efforts, numerous studies have shown that, because of the legacy of the Tuskegee study and other barriers, many ethnic minorities remain reluctant to participate in medical research.

Why is it important for me to participate in research studies?

For one thing, getting input from communities of color during studies helps ensure that the products of research (such as interventions, educational materials, new programs, etc.) are culturally acceptable and appropriate to the community. Secondly, it is important for researchers to understand whether certain drugs, regimens,

See Research on A11

Wal-Mart says Rx program saving customers millions

CHRONICLE STAFF REPORT

In an address to the Council of Teaching Hospitals in New Orleans last week, Wal-Mart's senior vice president and president of health and wellness, Dr. John Agwunobi announced that the company's \$4 prescription program has saved Americans more than \$1 billion.



Agwunobi

Wal-Mart launched the program in September 2006, and as of March 10, the company estimated that consumers had saved \$1,032,573,012.61.

Agwunobi, a former U.S. Assistant Secretary for Health and Human Services and Admiral in the U.S. Public Health Service Commissioned Corps, said that



more than 100 of Wal-Mart's \$4 prescriptions are used to treat serious conditions such as heart disease and diabetes.

"While \$1 billion in savings is an astonishing achievement, the

real savings to America — and its health care system — are even larger. That's because many of our competitors have also lowered their prices. \$4 prescriptions now

See Wal-Mart on A11