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Section

LIFE



IN RELIGION
Mega churches draw the ire of some black activists.

More states testing newborns

WASHINGTON — States have nearly doubled the number of newborns being tested for a host of rare but devastating genetic diseases—yet where you live still determines just how protected your baby will be, the March of Dimes reports.

For almost two years, specialists have urged that every U.S. newborn be checked for 29 disorders, to detect the few thousand who will need early treatment to avoid serious, even life-threatening, problems.

The geographic disparity is gradually easing. As of June 1, a total of 31 states required testing for more than 20 of those disorders, says the new analysis. Five states—Iowa, Maryland, Mississippi, New Jersey and Virginia—as well as Washington, D.C., required testing every newborn for the entire list of 29 conditions.

That's up from 23 states the previous year, and covered 64 percent of the nation's babies, nearly double the number tested in 2005.

Eight states—Arkansas, Kansas, Montana, New Mexico, Oklahoma, Pennsylvania, Texas and West Virginia—still were testing for fewer than 10 of those 29 conditions, the analysis found. The remaining states fall in the middle, although at least one, Wyoming, was scheduled to begin more comprehensive testing this month.

The March of Dimes report may confuse some consumers because it counts only the 29 conditions deemed most important for screening, and many states tout that they test for more—meaning they include "secondary" disorders not on the core list adopted by the March of Dimes and the American College of Medical Genetics.

Well over 1 million babies born this year will fall short of good protection, concluded the child advocacy group, which has urged the federal government to intervene and set a nationwide standard for newborn screening.

"There is a sense of urgency to this," said March of Dimes president Dr. Jennifer Howse. "Delay equates death or a medical catastrophe."

Federal health officials are reviewing the status of newborn screening and are expected to report recommendations to Health and Human Services Secretary Mike Leavitt within a few months, said spokesman Bill Hall.

Today, every U.S. newborn is tested for a few rare diseases: hypothyroidism and the metabolic disease phenylketonuria, or PKU, that can cause retardation if not treated quickly; the blood disease sickle cell anemia; and galactosemia, a life-threatening dietary disorder.

Most also are checked for hearing loss, because early intervention is key to preventing serious problems with speech and language development.

But new technology can analyze a single drop of blood for dozens of other serious and occasionally life-threatening genetic diseases. Just because a test exists doesn't mean everyone needs it. So at the federal government's request, the geneticists' group in 2004 studied testing accuracy and the benefit of early diagnosis—and recommend-

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Reaching beyond expectations

With less fanfare, second Black Gay Pride Weekend opens to entire community



PHOTO/WADE NASH

Monica Simpson, co chair of the Charlotte Black Gay Pride, performs at the Actor's Theatre of Charlotte to raise funds for the second annual Charlotte Black Gay Pride. This year's theme is A Family Affair.

By Cheris F. Hodges
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The second annual Charlotte Black Gay Pride weekend kicks off next week with less media attention but renewed excitement from event organizers.

This year's theme is "A Family Affair" and the event moves to Center City next Thursday with programs at Spirit Square and the Best Western Hotel.

"Year one we were just drowned by media," said

Monica Simpson one of the event's chairpersons. "We were brand new and everyone wanted to see if it was going to happen and what we had in the works and it was controversial. This year we're not getting as much of the media exposure but it is easier to approach community organizations. People are so open because they have something to look at and something to compare it to."

Nicole Hoagland, a member of the board of

directors, said there has been community support. Hoagland, who is white, said the weekend isn't just for black gays, but everyone in the community. "It's becoming evident why there is a need for black gay pride," Simpson said. "We're sharing our culture with the larger community."

Hoagland added: "It was born out of a place because the African American community couldn't get what they needed from the larger pride celebration. But

this isn't exclusively for the African American community. It's for everybody. I personally feel like other communities have a responsibility to participate in this."

The weekend will begin with a town hall meeting sponsored by the National Black Justice Coalition that will discuss "Transgender Visibility and Gay Marriage" held at Actor's Theatre of Charlotte.

Simpson said there are

Please see BLACK/3B

Book explores S.C.'s Lowcountry cuisine

THE ASSOCIATED PRESS

CHARLESTON, S.C. — The cuisine of this seaport city has long been a blend of international influences: French and African, Caribbean and even Middle Eastern.

Now comes a new book, part cookbook and part history book, exploring another influence on the cuisine that has become known as Lowcountry cooking.

"The Boathouse," subtitled "Tales

and Recipes from a Southern Kitchen," examines the culinary links between the South Carolina coast and the North Carolina highlands where Charlestonians have summered for almost two centuries to escape the oppressive heat.

The Boathouse is also the name of three restaurants operated by Richard Stoney, who wrote the book's foreword and grew up in Charleston but spent the hottest months in the mountains.

One restaurant is located on the Isle of Palms at Breach Inlet, one in downtown Charleston and the third in Asheville, N.C.

In the 1950s, before interstates, it often took two days to drive to the highlands, Stoney said. He recalls coming home with apples, preserves and other delights not readily available along the coast.

"People going to the mountains

Please see BOOK/4B

Whole hog: Lexington more than BBQ capital

By Erica Singleton
FOR THE CHARLOTTE POST

Though you may have heard of them for their Eastern Carolina style barbecue, just an hour up I-85, waits a day trip filled with treats for all of your senses. The drive is short, but the opportunities are many in Lexington, North Carolina. Plan your trip how you like, but I began my day at the Childress Winery. Set off of 85 at the crossroads of Highways 52 and 64, the Childress Winery is the brainchild of NASCAR team owner Richard Childress and his business partner Greg Johns. Childress nurtured his vision from the days he first began racing in California and went to wineries with his friends. For Childress, what began as a hobby became a passion and he was driven to build a winery in his home state. In Johns' case, wine making is a family tradition, passed from one Italian generation to another. Together they have created the newest winery and tourist attraction

in North Carolina's growing wine industry. As you turn in at the sign for the winery, you pass through the lush greenery of the grapes used for creating many of the wines you will taste inside. The winery itself is a 35,000 square-foot Italian Renaissance-styled complex, completed in 2004 and is the largest winery in the state. Walk through the beautifully carved dark wooden doors, into another world filled with soft lighting, fountains, and a sense of calm. "The Childress Winery rivals many of those in California wine country," explained Director of Marketing and PR, Kathleen Watson. Both the Italian and California influences compliment each other in creating an environment that is both appealing and immediately relaxing. Tours are offered daily at 12, 2, and 4, and are free. My tour began in the Grand Foyer where the multi-tiered fountain, front and center, set the peaceful tone. Etched glass doors on either side lead to

the tasting room and Gift Shoppe to your left and meeting and Banquet hall to your right. The Banquet Hall, that day was occupied with Senior Staff from Winston Salem State University, who chose the winery for their two-day staff retreat. "We chose to do

our retreat here because of its proximity to the school and its beautiful setting," said Chancellor Harold Martin. The beautiful settings begin in the Grand Lobby, where you walk through to the entrance for the Bistro. Designed like a

Please see LEXINGTON/3B



PHOTO/ERICA SINGLETON

Pigs are a staple in Lexington, N.C.'s barbecue capital, even maintaining a presence at police headquarters.

Diagnosis, treatment for HIV and AIDS

Over the past decade, the death rate from HIV/AIDS has declined in general. However, it remains disproportionately high for certain racial groups, like African Americans. More than 16,000 African Americans were diagnosed with HIV in 2003. And the infection rate for women is highest in African American women.

A positive HIV test is scary news, but it does not have to be a death sentence. Many people live full and long lives after testing positive for HIV. It is important for individuals who are HIV positive (or "living with HIV/AIDS") to know they are HIV positive because it gives them a chance to work with medical providers to slow or prevent some of the possible adverse health consequences associated with HIV/AIDS. The earlier an individual knows of their HIV status, the sooner they can take actions to protect not only themselves, but their partners as well.

HIV status can only be determined by having a blood test provided by a trained medical provider. The testing process as well as the results are confidential and only shared with the person being tested. Most HIV testing sites provide counseling to help people who test positive handle the news. These sites also provide referrals to medical providers, social workers, and other support services. The real work, however, is up to the individual diagnosed with HIV/AIDS. Given the right attitude, the right information, and the right medical care and treatment, most people can live for a long time. Taking the necessary medications as prescribed and following instructions from one's provider are key to longer survival with HIV/AIDS.

HIV and the Immune System
As discussed in a previous article, HIV (Human Immunodeficiency Virus) is the virus that causes AIDS (Acquired Immunodeficiency Syndrome). Being HIV-positive does not mean that an individual has AIDS, but it does mean that the individual may develop AIDS because HIV attacks the immune system, gradually impairing its functioning.

The immune system keeps the human body healthy by recognizing and attacking foreign substances, like viruses or bacteria. Over time, if the immune system becomes seriously damaged or weakened by HIV, the body loses its ability to fight certain infections and cancers. As you may recall, AIDS is the syndrome that arises when the immune system can no longer fight off these invaders. It is the most serious outcome of HIV infection, occurring after one's immune system has been significantly damaged.

This gradual destruction of the immune system does not happen the same way in everyone, or even at the same pace. In a small percentage of people, HIV destroys the immune system very rapidly, in just a few years. But others remain well for 10-15 years or longer. Working with a medical provider, most people remain

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