The Head Start dental component: evaluation of an urban program............ 433 Warren A. Parker, R. Paul Fultz, and William R. Nail III

## DEPARTMENTS

## PROGRAMS, PRACTICES, PEOPLE

The runner is the message, Michael E. Bird - New institutes on nursing, arthritis added to NIH - Community health promotion grant program announced by Kaiser Foundation - Health fair screening examined in monograph - Foundation's new initiative will help older persons to remain independent - Births, deaths, divorces up in 1985; marriages down Hospital outpatient visits soared in 1985, inpatient occupancy dropped Fitness of U.S. school children deteriorating - Community health center and migrant health programs funded - Infantile apnea conference begins September 29 at NIH - New study provides close look at health services in New York City - IHS engineer is cited for inventing fluoridator based on Venturi principle - Hierarchical patterns of U.S. health sector are subject of APHA report - Cancer data for 1935-79 in Connecticut are basis of NCI monograph - Limb-sparing treatment 'appropriate' for adult soft tissue sarcomas, osteosarcomas - FDA's Radiological Health Bulletin is available electronically - Smoking research directory details 1,600 projects Practices of improving pregnancy outcomes outlined by author - Senate committee issues new report on aging - WFPHA calls for abstracts of papers for March 1987 meeting in Mexico City - 900 NHSC scholarship recipients to be matched to shortage areas, Frank Sis - Matching grants program announced for primary care health centers - New HHS regulation assures continued indigent care - Safety belt law States report fewer fatalities Errata - "Contribution of smoking to sex differences in mortality" 437-446

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Test your healthy heart I.Q.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Otis R. Bowen, MD, Secretary

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Training courses in occupational safety and health are given by the Na tional Institute for Occupational Safety and Health (NIOSH) directly or in cooperation with professional organizations or agencies. NIOSH also sponsors Educational Resource Centers in universities throughout the country. Following is a list of courses being offered by those centers in the next few months. For further information such as application deadlines, contact the persons specified in the listing.

## HARVARD EDUCATIONAL RESOURCE CENTER

Advanced Topics in Occupational Health, August 4-8, \$800.
Occupational and Environmental Radiation Protection, August 11-15, \$800.

Write or call the Office of Continuing Education, Harvard School of Public Health, 677 Huntington Ave., Boston, MA 02115 (617: 732-1171).

## NEW YORK-NEW JERSEY EDUCATIONAL RESOURCE CENTER

Industrial Ventilation, August 4-8, $\$ 500$.
Biohazards-Biosafety, September 17-18, $\$ 200$.
Training and Certification in Hearing Conservation, September 23-24, \$330.

Sampling and Evaluating Airborne Asbestos Dust (NIOSH 582), 5 days in October, $\$ 500$.

Microcomputer Applications in Occupational Safety and Health, 3 days in October, cost to be announced.

Contact Lee Laustsen, Office of Consumer Health Education, University of Medicine and Dentistry of New Jersey, Rutgers Medical Schnol, Piscataway, NJ 08854 (201: 463-4500).

## JOHNS HOPKINS EDUCATIONAL RESOURCE CENTER

Recent Advances in Occupational Health, October 21-22, \$350.
Toxicology for Lawyers, October, cost to be announced.

Contact Jacqueline Corn, Department of Environmental Health Sciences, Johns Hopkins School of Hygiene and

Public Health, 615 North Wolfe St., Rm. 1101, Baltimore, MD 21205 (301: 955-2609).

## ALABAMA EDUCATIONAL RESOURCE CENTER

Ergonomics and Occupational Safety, August 19-20, \$285.
Health Assessment of the Adult, August, $\$ 150$.

Contact Kent Ostenstead, University of Alabama School of Public Health, University Station, Box 99, Birmingham, AL 35294 (205: 934-7032).

## NORTH CAROLINA EDUCATIONAL RESOURCE CENTER

Ninth Annual Occupational Safety and Health Summer Institute, August 4-8, $\$ 390$ for each course except Sampling and Evaluating Airborne Asbestos Dust, which will be $\$ 550$.

Contact Ted M. Williams, Occupational Safety and Health Educational Resource Center, UNC-CH, 109 Conner Dr., Suite 1101, Chapel Hill, NC 27514 (919: 962-2101).

## CINCINNATI EDUCATIONAL RESOURCE CENTER

Comprehensive Review for Industrial Hygiene Professionals, August 4-8, $\$ 525$.

Safe Methods of Asbestos Removal, August 19-22, \$395.
Non-Ionizing Radiation, September 16-17, \$375.
Respirator Fit Testing, September 22-23, \$295.
Occupational Ergonomics and Physical Hazards, October 7-10, \$500.
Occupational Health Update, October 22-24, \$325.

For further information, contact Kay M. Hayes, Field Service Instructor, Director, Continuing Education, ML 182, University of Cincinnati, 231 Bethesda Ave., Cincinnati, OH 45267 (513: 872-5733).

## MICHIGAN EDUCATIONAL RESOURCE CENTER

Management Briefing Seminars, to be held in Traverse City, MI, July 31-Au-
gust $1, \$ 200$ for one day or $\$ 375$ for both days.

Occupational Low Back Pain Conference, October 6-8, \$350.
Ergonomic Interventions to Prevent Musculoskeletal Injuries in Industry, October 9-10, \$300 (\$275 ACGIH members).
Impairment Evaluation and Disability Consideration: A Medical and Legal Perspective, October 27-29, \$250.

Contact Randy Rabourn, Director, Continuing Education, Center for Occupational Health Safety Engineering, 1205 Beal, IOE Bldg., University of Michigan, Ann Arbor, MI 48109 (313: 763-0567).

## MINNESOTA EDUCATIONAL RESOURCE CENTER

Comprehensive Industrial Hygiene Review Course, August 11-15, \$600.
Fourth Annual Occupational Safety and Health Institute, September 8-19, \$450 for first course; $\$ 200$ for each additional course.

Contact Ruth K. McIntyre, Director, Continuing Education, Midwest Center for Occupational Health and Safety, 640 Jackson St., St. Paul, MN 55101 (612: 221-3992).

## UTAH EDUCATIONAL RESOURCE CENTER

Rocky Mountain Comprehensive Review of Industrial Health, August 4-8, \$600.

Fifth Annual Utah Conference on Safety and Industrial Hygiene, September 16-18, \$75.
Occupational Low Back Pain, October 6-8, \$350.

Contact Connie Crandall, Director, Continuing Education, Rocky Mountain Center for Occupational and Environmental Health, Bldg. 512, University of Utah, Salt Lake City, UT 84112 (801: 581-5710).

## SOUTHERN CALIFORNIA EDUCATIONAL RESOURCE CENTER

Hazardous Materials: Handling and Disposal, August 11-15, \$700.

Application of Microcomputers to Occupational Health and Safety, August 18-19, \$375.

Industrial Hygiene Sampling Strategies, August 25-27, \$450.
Recognition of Occupational Health Hazards, September 29-October 3, $\$ 700$.

Management and Administrative Skills for the Occupational Safety and Health Professional, October 6-10, \$700.

Contact the University of Southern California, Institute of Safety and Systems Management, Extension and Inservice Programs, University Park, MC 0021, Los Angeles, CA 90089-0021 (213: 743-6523).

## WASHINGTON EDUCATIONAL RESOURCE CENTER

Occupational Hazards to Health Care Workers, September 10-12, \$250.

Legal Aspects of Occupational Health, October 15, cost to be announced.

Contact Sharon Morris, Continuing Education Coordinator, Northwest Center for Occupational Health and Safety, Department of Environmental Health, SC-34, University of Washington, Seattle, WA 98195 (206: 543-1069).

## NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH (NIOSH)

Industrial Hygiene Laboratory Quality Control (NIOSH 587), August 25-29, $\$ 360$.

Contact Thomas Ratliff, $R$ \& $R$ Associates, P. O. Box 4681, Cincinnati, OH 45246 (513: 771-2490).

Industrial Ventilation (NIOSH 588), August 18-22, \$420.

Industrial Hygiene Sampling, Decisionmaking, Monitoring, and Recordkeeping: Sampling Strategies (NIOSH 553), September 8-12, \$420.

Contact Charles M. Nenadic, CES, P. O. Box 75120, Cincinati, OH 45275 (606: 341-8874).

Ionizing Radiation (NIOSH 584), August 4-8, \$420.

Industrial Hygiene Measurements (NIOSH 550), September 8-18, $\$ 760$.

For more information about NIOSH courses, contact Donna Welage, Training Registrar, Division of Training, National Institute for Occupational Safety and Health, 4676 Columbia Parkway, Cincinnati, OH 45226 (513: 533-8225).

## ANSWERS TO THE HEALTHY HEART I.Q. TEST (ON INSIDE BACK COVER)

1. TRUE. Though there are other risk factors that you cannot change, such as family history and age, the three major risk factors that you can change are high blood pressure, smoking, and elevated blood cholesterol. Someone who has all three of these risk factors is about eight times as likely to develop heart disease as someone who has none of them.
2. TRUE. A person with high blood pressure or elevated blood cholesterol may feel fine and look great; there are often no signs at all that might signal these conditions until a heart attack or stroke occurs. To find out if you have elevated blood cholesterol or high blood pressure, you should be tested by a doctor, nurse, or other qualified health professional. The blood cholesterol test currently requires a laboratory analysis of a sample of your blood.
3. FALSE. High blood pressure does not mean that a person is nervous or tense. It means that the blood flowing through your body is pressing against your artery walls too strongly. Calm and relaxed people can have high blood pressure.
4. TRUE. The higher your blood pressure is, the higher your risk of developing heart disease or having a stroke. To reduce high blood pres-sure-that is 140/90 or higher (either number)-it must be treated and controlled. If you have high blood pressure, follow your doctor's advice: get and keep your weight down to normal; decrease your consumption of sodium-not only table salt, but also foods with a high sodium content such as some snack and processed foods; and remember to take your medicine if it is prescribed.
5. TRUE. While high blood pressure affects more than 28 out of every 100 white adults, it affects more than 38 out of every 100 black adults. Also, high blood pressure is generally more severe among blacks than whites.
6. FALSE. Scientific studies have shown that people with high blood cholesterol are more likely to develop heart disease than people with lower levels of blood cholesterol. People with a blood cholesterol over $265 \mathrm{mg} / \mathrm{dl}$ (milligrams per deciliter of blood) may have four times the risk of developing heart disease as those with a level of $190 \mathrm{mg} / \mathrm{dl}$ or lower. It has also been shown that people who have elevated blood cholesterol and reduce it also reduce their risk of having a heart attack.
7. TRUE. Dietary cholesterol is never found in foods from plants. All meat, poultry, fish, and butter fat contain cholesterol; the richest sources are liver, brain, kidney and egg yolks.
8. FALSE. Reducing the amount of cholesterol in your diet is clearly important, however, eating less saturated fat would probably be the more effective dietary means of lowering your blood cholesterol levels, along with eating less cholesterol and substituting polyunsaturated fat
whenever possible for saturated fat. Saturated fat (found in meats, dairy products such as whole milk, cream, ice cream, cheese, and butter, and certain cooking fat like shortening) contribute greatly to the raising of blood cholesterol. To reduce your consumption of saturated fat, you should choose lean meats, poultry, or fish; trim excess fat off meats before cooking; broil, bake, or boil rather than fry; and use skim or low fat dairy products.
9. FALSE. A product can contain no cholesterol and still be high in saturated fat-which will raise your blood cholesterol. Examples are commercial baked foods made with coconut oil, palm oil, or a heavily hydrogenated vegetable oil. As you shop be sure to check the labels on food products. You will often find a listing of the amounts of saturated and polyunsaturated fat contained in the product. Your best choice is a product that contains more polyunsaturated fat than saturated fat; polyunsaturated fat will lower your blood cholesterol. Vegetable oils that are high in polyunsaturated fat include safflower, sunflower, corn, and soybean oil.
Remember, though, that all fats are a rich source of calories, and for people who are overweight, it is desirable to consume fewer calories and less fat of all kinds.
10. TRUE. Smoking is a definite and strong risk factor for heart disease. The heart disease death rate among smokers is 70 percent greater than that of nonsmokers. Heavy smokers are, of course, at even greater risk, and those smokers with elevated blood cholesterol or high blood pressure increase their chances of heart disease dramatically.
11. TRUE. Emphysema, a lung disease that makes breathing difficult and often leads to death, would be almost eliminated if people did not smoke.
12. TRUE. Absolutely. Smokers can and do reduce their risk of coronary heart disease and early death when they quit smoking. In one major study, cigarette smokers who quit smoking had a risk of heart disease death that was about one-half ( 54 percent) that of those who did not quit.
13. FALSE. It is the \#1 killer. Of the 750,000 Americans who die each year of heart disease, 350,000 of them are women. In addition, almost 100,000 women die each year of stroke.
14. TRUE. People who are inactive tend to have more heart disease than people who are physically active. Regular brisk and sustained exercise improves overall conditioning. It can often help reduce blood pressure levels and also help people lose excess weight and lower blood cholesterol. In addition, there are reports which suggest that smokers who exercise are more likely to give up smoking. Finally, regular aerobic exercise can improve the way that you look and feel.

## Information for contributors

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Prepared by the National Heart, Lung, and Blood Institute
The following "true-or-false" questions test your knowledge of heart disease and how to reduce the risk of developing it.
1.

The three most important heart disease risk factors that you can do something about are: high blood pressure, smoking, and elevated blood cholesterd.
2.

A heart attack or stroke is often the first symptom of high blood pressure
3. People with high blood pressure are generally nervous and tense people.

4.A blood pressure of 140/90 or more is generally considered to be high.
5.

High blood pressure is even more of a problem among blacks than it is among whites.
6.

It is only a scientific theory that elevated blood cholesterol is related to heart disease.
7. Dietary cholesterol is found only in animal foods.
8.

The most effective dietary way to lower the level of your blood cholesterd is by eating less cholesterol.
9. A food product in your grocery store that is labeled "no cholesterol" is a
2. safe choice for people with elevated cholesterol levels.
10. Cigarette smoking by itself will increase your risk of heart attack.
11. In addition to the large number of cancer and heart disease deaths that result from smoking, more than 90 percent of all emphysema deaths
true

$\square$


are due to smoking.
12. People who quit smoking reduce their chances of developing heart disease.

13. Heart disease is the \#2 killer of women in the United States.
14. Physical inactivity is related to heart disease.


The answers appear on page 450. Copies of The Healthy Heart IQ Test (NIH Publication No. 85-2724) can be obtained from the National Heart, Lung, and Blood Institute, Bethesda, MD 20894.

