At the HEART of the Matter
Disparities Exist in Symptoms and Treatment

Most people associate heart attacks with intense chest pain. Indeed, public-awareness campaigns designed to encourage people to seek early treatment for heart attack—myocardial infarction (MI)—have stressed the presence of chest pain as a primary warning signal. But recent research by a team of scientists led by John G. Canto, a UAB cardiologist and School of Public Health graduate, shows that one third of patients diagnosed with MI did not have chest pain when they arrived at the hospital.

Results of the study, which was conducted during a five-year period ending in 1998, were published in the June 28, 2000, issue of the Journal of the American Medical Association.

“A substantial number of patients with MI present without chest pain on initial evaluation,” writes Canto, who was the lead author of the JAMA article titled “Prevalence, Clinical Characteristics, and Mortality among Patients with Myocardial Infarction Presenting without Chest Pain.” The study found that patients who delayed seeking care “were less likely than other patients to receive crucial therapies and had worse outcomes,” says Canto. “MI patients without chest pain had more than twice the in-hospital mortality of patients with chest pain.”

One reason for that high mortality rate, says UAB epidemiologist Jeffrey Roseman, is that doctors have been reluctant to use potentially life-saving (but also potentially dangerous) reperfusion therapies—including chemical clotbusters and various types of angioplasty—on patients without chest pain. He points out that the Canto study is an excellent example of properly conducted epidemiological research.

(continued on page 2)
“Planning and organizing well controlled studies takes a lot of work and attention to detail,” says Roseman. “The methodology used by Canto was rigorous and sound. The research team analyzed for confounding variables and used appropriate statistical measures including multivariate analysis. The data support their conclusions.

“Dr. Canto’s study presents important, groundbreaking research that adds significantly to medical knowledge. These surprising findings have dramatic implications for both medical treatment and health education aimed at the public,” Roseman says.

The Danger of Delaying

Canto’s methodology for the JAMA study involved examining the records of 434,877 patients with confirmed heart attacks.

“Our results reveal that one-third of MI patients in the study population as a whole presented without chest pain on initial evaluation,” Canto says. “That percentage was effectively the same for both whites and nonwhites.”

Patients in the JAMA study who experienced MI without chest pain tended to be older—the average age being 74—and 49 percent were female. MI patients without chest pain also had a higher prevalence of diabetes, hypertension, prior heart failure, and stroke than did MI patients with chest pain.

Canto’s study shows that MI patients without chest pain tended to experience more severe heart attacks than patients presenting with chest pain, but they were still less likely to be admitted to the hospital with an initial diagnosis of confirmed MI. They also were more likely than patients with chest pain to have delayed—in some cases by as much as two hours—before going to the hospital. Once they were at the hospital, it took twice as long for doctors to order EKGs for these patients as for patients with chest pain.

Furthermore, patients experiencing MI without chest pain were less likely than chest-pain patients to receive aspirin or other anti-platelet agents, which resulted in a higher rate of in-hospital deaths for these patients. “The magnitude of these differences in mortality was surprising,” Canto says, “and we found that they occurred independently of other reasons, such as differences in age, other medical problems, and severity of the MI.”

Heed the Warnings

Canto’s data carry special warnings for females and for African Americans regardless of gender. His JAMA study shows that blacks and women are slightly more at risk than others for experiencing heart attacks without chest pain.
The six most important variables associated with MI without chest pain, according to Canto’s study, are prior heart failure, prior stroke, older age, diabetes, female sex, and membership in nonwhite racial/ethnic groups. “Patients who had at least three of these risk factors had almost a 50-percent greater probability of having an MI without chest pain,” Canto says.

Canto says that his study results illustrate the need for national educational initiatives emphasizing that the absence of chest pain doesn’t rule out a heart attack.

“National health-care initiatives targeting the public and medical professionals must stress that the presence of chest pain is not necessarily the hallmark feature of MI,” says Canto. “Public-health campaigns should emphasize that other warning signals of MI may be just as important as chest pain.

“People should be alert to the possible significance of dyspnea [shortness of breath], nausea and/or vomiting, sweating not caused by exercise, and pain spreading to the shoulders, face, jaw, neck, or arms,” he says. “We hope that early recognition of the possible significance of these signs and symptoms will encourage patients—especially those in high-risk groups such as diabetics and the elderly—to go to a hospital. Also, medical professionals need to recognize that lack of chest pain in the presence of some of these other symptoms calls for timely diagnostic and therapeutic interventions that are known to improve the chances for survival.”

Race Matters

In a separate study including patients with chest pain, Canto and colleagues from UAB’s Center for Outcomes and Effectiveness Research Education (COERE) found that African-American heart-attack patients are significantly less likely than whites to receive potentially lifesaving reperfusion therapies. The results of this study were published in the April 13, 2000, issue of The New England Journal of Medicine in an article titled “Relation of Race and Sex to the Use of Reperfusion Therapy in Medicare Beneficiaries with Acute Myocardial Infarction.”

“Our research shows that African Americans, regardless of gender, do not receive reperfusion treatments as often as whites when eligible,” says Canto.

The study, which was partly funded through grants from the Agency for Healthcare Research and Quality and the National Center for Research Resources, reviewed the hospital records of 234,769 Medicare patients diagnosed with acute heart attacks at 6,684 hospitals in all 50 states. The researchers examined the records of a random sample of 26,575 heart-attack patients who met strict eligibility criteria to receive thrombolytic drugs or coronary angioplasty to unblock clogged arteries.

They found that white men received therapy with the highest frequency, followed by white women, black men, and black women. After adjustments were made for age, smoking, and other diseases, gender differences became minimal but racial differences remained significant.

“We don’t know why these disparities exist,” Canto says. “Our study wasn’t designed to explore causes, and further research is needed to identify the factors at work.” The Agency for Health Care Policy and Research and the Veterans Administration Health Care System are funding multimillion-dollar research programs to identify those factors.

“This type of research will ultimately provide keys to understanding how to reduce racial disparities in medical care,” Canto says.

Research Helps Survival Rate

Roseman says that Canto’s two studies “represent medical research at its finest. Dr. Canto and his fellow researchers have identified previously unrecognized health dangers and areas of further research that will ultimately improve survival for MI patients who present without chest pain. In addition, clinicians and emergency medical service personnel now have a greater understanding that a heart attack can’t be ruled out if a patient doesn’t present with chest pain, especially if there are other risk factors involved. That awareness alone will result in the saving of lives that would otherwise end prematurely.

“Also, the knowledge that African Americans may not be getting lifesaving reperfusion therapies quickly enough should help remedy disparities in treatment. Once an inequity such as this is identified, research is funded to address and correct the problem.

“John Canto recognizes the importance of good epidemiological research,” Roseman concludes.

Canto agrees. “My education at the UAB School of Public Health and my formal training in the UAB Division of Cardiology have allowed me an opportunity to use my experience as a practicing clinician to study potentially important research questions pertinent to situations faced in the real world.”
Curbing Teen Sexual Activity

Intervention Targets Kids at Risk

Public-health professionals strive constantly to make a difference in the lives of others—but sometimes it's hard to measure the effectiveness of public-health efforts. That's not the case, however, for UAB health-behavior scientist Leslie Clark. She has strong evidence that a program she designed has benefited a group of young people who were at risk of becoming sexually active at an early age. These teenagers may have a chance at better lives because of Clark's program.

Sexual activity by adolescents at an early age is a public-health problem that is associated with increased risk of sexually transmitted diseases including HIV/AIDS, an increased risk of teenage pregnancy with resulting high infant morbidity and mortality, and increased risks of dropping out of school.

High-Risk Demographics

From previous research, Clark, who is also a psychologist, knew that some adolescents are at increased risk for engaging in early sexual activity for a variety of reasons, including a lack of social support. High-risk kids, she explains, tend not to have close parental relationships or strong community ties, such as church and school involvement. She calls this high-risk group “anticipators” because they anticipate initiating sex within the next year. In contrast, “delayers”—kids who delay becoming sexually active—“feel much more connected to their families and communities,” Clark says.

Armed with that knowledge, Clark envisioned a program in which young men and women would go into economically depressed communities and act as role models and mentors to children at risk. In 1997, she received a $500,000 grant from the Centers for Disease Control and Prevention (CDC) to put her ideas into action.

“Often kids who engage in early sexual activity live in single-parent households in economically depressed communities,” she says. “The school that we chose to implement our intervention has students from this type of background. These students are struggling with problems such as discipline and literacy. Our goal was to provide them with information and opportunities to clearly demonstrate their potential to become successful adults.”

Leaving a Legacy

The program Clark designed is called Project AIM—Adult Identity Mentoring.

“It’s based on the Theory of Possible Selves,” she explains. “I believe that all adolescents—even those considered to be the biggest troublemakers—have wonderful qualities inside them, and they just need to know how to look for and develop these qualities. Too often, high-risk children don’t have opportunities to explore possible future identities—a step that's necessary if they're to achieve their full potential.”

Thanks to the CDC funds, Clark was able to recruit a corps of eight UAB graduate students—primarily from the School of Public Health—to act as mentors. This group, along with Steve Nagy of the University of Alabama, Tuscaloosa, helped Clark design Project AIM, which the mentors then used to “connect” with high-risk kids.

Clark says that the intervention used a “legacy” motif because “leaving a legacy is important in the African-American community, and the youth in the study group and the mentors are African-American.”

The eight-member mentor group was comprised of an equal number of males and females. Twice a week for six weeks, the mentors, or “interventionists,” attended seventh-grade health-education classes, where they worked as a group with high-risk adolescents.

“This intervention focuses on cultivating the person each kid wants to become,” Clark explains. “Instead of going into the school and lecturing about abstaining from sex, not doing drugs, and not dropping out of school, we provided the kids with an alternative agenda—helping them discover for themselves their own positive identities. The program was involving and self-relevant. It really got kids excited about building a positive legacy.”

To help kids identify their interests and goals, the interventionists had them complete questionnaires designed to correlate their interests with relevant occupations. The mentors also encouraged students to participate in group discussions of their hopes and aspirations. During the six-week period of the intervention, mentors then guided participants through a series of activities designed to help them develop the necessary skills to move toward their goals.

“We emphasized that after recognizing what they wanted to do in life, they had to initiate efforts and put energy into the exer-
Positive Mentoring Experiences

One of the Project AIM interventionists was Leigh A. Willis, who is now an American Teacher of Preventive Medicine fellow with the Youth Violence and Suicide Prevention Team at the CDC’s Violence Prevention Division in Atlanta, Georgia.

“It was immensely satisfying to be involved in this program and to be able to touch the hearts and minds of these students,” Willis says. “Many of the kids weren’t enthused about school at all, but we were able to ‘turn them on’ and get them excited about participating in the program. In many programs, students are lectured to, and no one asks them for their opinions. We paid attention to what students had to say. There were all sorts of opportunities for self-expression and creativity. Students really enjoyed that, and it motivated them to ‘buy into’ the program.”

The actual intervention was conducted at James A. Davis Middle School in Bessemer, Alabama, during the nine-month school calendar, and there’s an ongoing assessment of the intervention’s outcomes.

“Although the program is still in its early stages, we’re already seeing positive effects when we compare surveys of the youths conducted before and after the intervention,” says Clark. “The adolescent males in the intervention group are refraining longer from initiating sexual activity compared to youths in a control group. In questionnaires, these youths report more positive attitudes and values regarding refraining from sexual risks and the use of alcohol.”

Questionnaires were given to students participating in the intervention and to students participating in a control group. Clark and her team also administered a follow-up survey to both groups one year after the intervention was initiated.

“Our analysis shows that boys in the control group developed riskier attitudes and engaged in riskier behavior during the five-month period from the pre-test to the concluding questionnaire,” Clark says. “They initiated sexual activity for the first time and their aspirations for finishing high school declined. Their answers indicate that they don’t believe sex and drugs interfere with their achievement of life goals.”

“So far she and her team have shown that it does.”

Part of the value of the program is that kids realize someone is paying attention to who and where they are and where they want to go,” Clark points out. “Every one of the exercises we employ has the goal of boosting students’ self-esteem by encouraging self-responsibility and teaching them planning and decision-making skills.”

School principal Albert Soles vouches for its success.

“Those adverse outcomes, they are making a positive difference in the lives of the young people they reach out to. Dr. Clark and her corps of young mentors are proving that inner-city children can be motivated to avoid certain risky behaviors, including premature sexual activity. I feel strongly that Project AIM should be expanded and made available to inner-city students throughout the United States.”

“Ultimately,” Clark says, “we want to train teachers or teacher aides to implement the program in their classrooms, but first we had to demonstrate that the intervention works.” So far she and her team have shown that it does.
How do you get fruit flies drunk and what happens when you do?

You just spray alcohol into the air they breathe and watch as they begin to "stagger"—much like inebriated humans.

However, getting fruit flies drunk and observing their behavior is not a joke. It's a serious part of UAB School of Public Health environmental science researcher Douglas M. Ruden's investigation into alcoholism in humans. Determining how alcohol affects the common fruit fly, known scientifically as Drosophila melanogaster, may ultimately lead to new treatments for alcoholism in humans, says Ruden.

Human Flies

"If we understand what molecules in the brain are affected by alcohol, we can use that knowledge to develop drugs for treatment," he explains. "Drosophila is a model organism for probing the genetic basis of alcohol sensitivity. One advantage is that the fruit fly has a very small genome, which has been completely sequenced. That genetic knowledge allows us to use the fruit fly as a living biochip to determine which genes are turned on by exposure to alcohol."

Moreover, Ruden points out, the fruit fly brain, while much smaller than the human brain, actually contains approximately 90 to 95 percent of the same protein matter.

"It even has the same neurotransmitters and receptors that the human brain has," he says. "I'm investigating how alcohol affects those brain pathways. Determining the mechanisms of signal transport down those pathways could be the key to developing new pharmaceutical agents to treat alcoholism."

Drunk Tanks

For his research on Drosophila, Ruden uses a new device called the inebri-actometer to measure the locomotor activity of up to 128 individual flies simultaneously. The device consists of 128 pairs of emitter/detector photo diodes connected in series through a computer interlink. A fly is placed in each of the 128 chambers, and then either humidified air or air containing variable amounts of ethanol vapor is pumped through the chambers.

Once exposed to alcohol, the flies become extremely active. When a fly wobbles—so to speak—in front of an infrared signal transmitted by one of the emitter photo diodes, the computer records that wavering movement. In one series of experiments using the "wild-type" [no pun intended] Oregon R. Drosophila, Ruden's computer monitored a threefold increase in locomotor activity in flies exposed to the ethanol vapors. The increased movements peaked at seven minutes—a long period of time in the lifespan of a fly. That peak was followed by a gradual decrease in activity leading to a nearly total cessation of movement after 30 minutes. Like fruit flies, inebriated humans usually fall asleep and cease nearly all movement after drinking sufficient quantities of alcohol. It just takes people longer.

Currently, Ruden is working to identify the precise enzymes that facilitate the functioning of a specific neurotransmitter known as the glutamate transmitter. Glutamate is a major player when it comes to transmitting messages within the brain. Whenever we move, glutamate is involved in causing neurons to fire messages to the brain to initiate and maintain movement.

Every motion and every thought requires neurotransmitters, Ruden notes. Alcohol interferes with the brain’s message transmission process, and that’s the reason fruit flies—and humans—get wobbly after ingestion of alcohol.

“There are about a dozen different enzymes that can make the glutamate transmitter work, but it’s not really known yet which are active,” Ruden explains. “That’s why it’s important to conduct more basic research.”

But why is Ruden’s research part of the environmental health sciences department? “Alcohol is considered an environmental agent,” he says. “When people drink to excess, it affects public health and safety.”
Imagine that you are pregnant and just found out you are infected with the HIV virus. If that’s not scary enough, imagine that you also live in a desperately poor African country where the average income is $1 a day, and you can’t afford the expensive drugs that might prevent the spread of the deadly virus to your unborn baby. Perhaps the worst part of this nightmare scenario is that it’s not a dream but a harsh reality for millions of African women.

So what’s being done to end this public health outrage? For its part, UAB is doing quite a lot.

Promising Studies

Epidemiologist, pediatrician, and international-health scientist Sten Vermund has been instrumental in obtaining funding from the National Institutes of Health (NIH) and from a private foundation for three programs designed to evaluate alternative strategies for preventing mother-to-child HIV transmission in sub-Saharan Africa. In the countries that make up sub-Saharan Africa, an estimated 4.5 million people have HIV, the virus that causes AIDS. As many as one out of four pregnant mothers in those countries may be infected.

“The comparable figure in the United States is one in a thousand,” says Vermund, director of UAB’s John J. Sparkman Center for International Public Health Education, director of the UAB Division of Geographic Medicine, and a member of the AIDS Research Advisory Council of the NIH.

Interventions Target Transmission

The South-African study seeks to identify a safe dose of chlorhexidine—a topical antiseptic cleansing agent—for use during childbirth to help prevent mother-to-child HIV transmission. About 200 women have been recruited for the present study.

“A solution of 0.25-percent chlorhexidine is used as a topical cleansing solution during labor and delivery, but the South-African study has found that this concentration can safely be quadrupled to a strength of 1 percent to kill the HIV virus,” Vermund says. UAB pediatrician Craig M. Wilson and UAB epidemiologist and international-health scientist Susan Allen are spearheading the chlorhexidine effort.

Another Zambian study seeks to determine the best way to encourage the use of antiretroviral medication to prevent mother-to-child HIV transmission.

“The antiretroviral medication Nevirapine (NVP) is a one-dose treatment given to the mother at the onset of delivery and to the baby right after delivery,” explains Vermund. “We know that NVP cuts HIV transmission by half.”

The intervention is designed so that NVP will be offered to all pregnant women at one clinic, while at another clinic, women will be offered HIV testing and counseling. At the latter clinic, only women who agree to testing and counseling will be given the drug.

“We don’t know how women in the Zambian culture will react to the offer of...
Sex and the Cuban Teenager

Curbing STDs and Unplanned Pregnancies

Newly married in August, 28-year-old doctoral student JoAna Dodson left her husband in December—but she returned that same month. Dodson traveled to Cuba to study sexual behavior among Cuban teenagers for her dissertation. She hopes her research will ultimately help slow the spread of sexually transmitted diseases (STDs) and reduce unplanned pregnancies there and elsewhere in Latin America.

“Actually, Cuba has one of the lowest rates of HIV compared to other countries,” Dodson says. “There’s a possibility I will learn something that could also be useful to other Latin American countries.”

A $16,000 fellowship from the National Security Education Program (NSEP) is funding Dodson’s current research. The fellowship, administered by the Academy for Educational Development, was created by Congress for students enrolled in U.S. graduate degree programs. It provides opportunities to conduct research that could enhance the understanding of countries or geographic areas critical to our national security.

Inspired by Previous Visits

Dodson visited Cuba twice before in preparation for the December trip. She first traveled there in June 1999 as part of the Medical Education in Cooperation with Cuba (MEDICC) program. That trip involved eight weeks of coursework and visits to Cuban medical facilities, including maternity homes, family clinics, pain clinics, a senior-care center, an institute for biomedical research, an after school center, and a sanitarium for patients with HIV. She came away with a desire to do at least part of her dissertation research in Cuba.

“While I was visiting the Cuban National School of Public Health in Havana during the MEDICC trip, professors there expressed interest in incorporating useful theory-based training into their programs in order to design better prevention programs,” recalls Dodson.

She resolved to help meet that need, and so in March 2000—with help from a $3,500 training grant from UAB’s Sparkman Center for International Public Health Education—she made her second trip to Cuba. While there, she presented theory-based seminars on adolescent sexual behavior to Cuban students and faculty members—many of whom will be helping her with her own research this fall.

“The Sparkman Center-financed trip really got me off the ground in terms of planning and making contacts to accomplish my dissertation research,” says Dodson.

Fortuitous Collaboration

One of the most important contacts Dodson made was with her Cuban collaborator Maricela Torres, a doctoral student at Cuba’s National School of Public Health. “Maricela is also working on a dissertation on teen sexual behavior, and therefore has a vested interest in collecting data. We’re helping each other,” Dodson says.

To gather the data they need, Dodson and Torres plan to administer questionnaires to about 1,000 Cuban teenagers.

“We’ve already made arrangements to go to specific high schools where students will fill out the questionnaires,” Dodson says. “Our goal is to gather information that will assist in the development of prevention programs tailored to Cuban adolescents. We know we can’t just plug in American-designed programs and expect them to work. We have to formulate programs geared to the needs of the people we are seeking to help.

“Cubans are a warm and friendly people who have to make do with limited resources, yet they have created a strong public health system,” says Dodson. “The first time I met the dean of the National School of Public Health in Cuba, I got the traditional greeting of a kiss on the cheek. I was expected to kiss back and did. It’s a custom that makes you feel connected. The U.S. could learn from Cuba, culturally and in approaches to public health.”
Russia’s TB Epidemic
The Fight Continues

A group of eight Russian health officials recently traveled to UAB to train in the development of effective strategies for identifying and treating tuberculosis (TB) in their home region of Kemerovo. Members of the group included representatives from Kemerovo’s Oblast TB dispensary, health department, corrections department, Medical Academy, and Medical Institute. The training course was sponsored by the Gorgas Tuberculosis Initiative and coordinated by UAB in collaboration with the international medical relief organization Doctors Without Borders.

This is the second year that Russian TB-fighters have sought training in the United States. Last year, a group of Russian medical professionals spent five weeks, including one week at UAB, traveling to medical centers throughout the country to learn new methods of fighting TB. Their search for effective techniques to combat and treat the disease has become urgent because Russia has been designated as a “hot spot” for multidrug-resistant TB by the World Health Organization (WHO).

UAB primary-care physician and epidemiology/international-health scientist Michael Kimerling led the Russian TB training course. He also directs the Gorgas TB Initiative at UAB.

As part of their UAB training, members of the Russian contingent and Gorgas Institute officials signed a Protocol of Intention to create a region-wide TB control program in Kemerovo. The program would include organizing a TB-control training site and training multi-level medical staff to implement procedures and conduct applied scientific research in all of the Kemerovo region.

Protocol of Intention to create a region-wide TB control program in Kemerovo. The program would include organizing a TB-control training site and training multi-level medical staff to implement procedures and conduct applied scientific research in all of the Kemerovo region.

Correction: The graphic for the article “Options for Medicare Reform” on page 8 of the Fall 2000 issue of the SPH Newsletter should have included:

Pediatric AIDS
(continued from page 7)

the drug coupled with voluntary testing and counseling,” Vermund says. “It may be that some Zambian women are more willing to simply take the pill without having to know their HIV status. On the other hand, it could be that they will take the pill only if they know exactly why they should do so. It could work either way.”

Participating in this portion of the study, which is supported by the Elizabeth Glaser Pediatric AIDS Foundation, are Stringer and UAB School of Public Health graduates Moses Sinkala and Julia Stout, who is based in Zambia.

High Price of Hope

Pediatric AIDS is disappearing in the United States because more and more women are being tested and treated, but the public health infrastructure in sub-Saharan Africa is far too weak to support the enormous cost of prevention.

“Antiviral therapies that cost $20 a day in Western nations are not sustainable in those countries,” says Vermund. “What we hope to accomplish with our three studies is to further the ability of the world’s poorest countries to save the lives of newborn infants. In addition, we want the interventions that we propose to be affordable for the people living in those countries. Finally, we want to support health care for the infected mothers in order to give them a better quality of life and the ability to raise their own children.”
Twice in Two Years

MCH Students Win Coveted AHRQ Grant

Doctoral student Amanda Liddle (Maternal and Child Health) recently won a highly competitive—and prestigious—$32,400 grant from the federal Agency for Healthcare Research and Quality (AHRQ) to complete her dissertation. She is the second MCH doctoral student to win the grant in two years. Denise Giles won the award in 1999.

Liddle’s dissertation examines the variation in time from birth to death in the United States during the first year of life. The study covers the years 1985 to 1995. “This study is the first to be conducted from a racial and birthweight perspective since the implementation of advances in neonatal technologies during the early 1990s,” says Liddle.

Denise Giles was the first MCH doctoral student to be awarded an AHRQ grant in 1999. Her dissertation focuses on “Hospital Profiling of Maternity Length of Stay.”

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Public Health in Action

Advisory Board Sees Benefit

The annual November advisory board meeting was fast approaching, and UAB School of Public Health Dean Eli Capilouto wanted to show board members and select guests how public health research is applied in the real world.

So he rented a bus and took them on a tour of public health practice in action in the Birmingham area. Their first stop was the James A. Davis Middle School in Bessemer, Alabama, where an intervention developed by UAB health-behavior scientist Leslie Clark has helped to curb teen sexual activity through implementing Project AIM (Adult Identity Mentoring). From Bessemer, the bus carried the group back to the UAB Emergency Department’s triage unit to meet John Canto. Canto, a cardiologist, School of Public Health alumnus, and director of UAB’s Chest Pain Unit, outlined two important studies he and his colleagues recently conducted and which were published in *JAMA* and *The New England Journal of Medicine*, respectively.

Leaving Legacies

By the time the bus returned to the Ryals Public Health Building, board members had a strong sense of where research and practice intersect. Clark’s Bessemer project struck a chord with community leader Margaret Porter, who is co-chair of the Campaign for UAB.

“I value a philosophy that orients our young people toward the future,” Porter says. “That’s why I was impressed that Project AIM asks kids participating in the program what type of legacy they want to leave, as well as emphasizing that they can shape their legacies. I also found it interesting that the kids were asked to sign a career contract with goals to work toward. They had business cards that listed the position they want to hold once they’ve finished with school. And they learned to write resumes and even carried a portfolio around.

“To me, this project not only gives the school a sense of hope and direction, it also enhances communication between children and their parents. In some cases, parents saw an interest sparked in their children for the first time. And because the project got kids focused on future goals—and on the future, period—it will make them think twice about engaging in risky behaviors.”

Heart Matters

Porter was equally impressed with Canto’s study on heart attacks without chest pain. “I had an older brother who experienced a heart attack without pain, so I think this research will cause many physicians to ask probing questions and investigate symptoms that normally might not be associated with heart attack, particularly among older patients.

“Also,” Porter says, “as co-chair of the Capital Campaign Committee, this meeting presented me with an excellent opportunity to learn about issues in public health, which will help us meet our future campaign goals. However, perhaps my best impression of the meeting was that we have an incredibly talented group of people working in the UAB system and in public health. The intellectual capital that they bring to this community enhances the lives of so many people locally and around the world.”

New Horizons

Advisory board member and civic volunteer Cameron Vowell was equally impressed with Project AIM and with Bessemer school administrators: “The school is staffed by exceptionally heroic individuals. The principal, Mr. Albert Soles, is an excellent role model, as is Mr. Michael Russell, superintendent of Bessemer schools.

“Project AIM targets an area that’s crucial for teen boys and girls,” Vowell says. “I’m on the board of directors of the Women’s Fund of Greater Birmingham—an organization dedicated to improving the lives of women and girls—and Project AIM dovetails with a needs assessment of women and girls that the Women’s Fund conducted this year. The concept of mentoring and improving girls’ horizons is absolutely critical to improving their futures. Dr. Clark’s work in this school is more in-depth than any I’ve seen before.”

Vowell, a former SPH faculty member, says the annual advisory board meeting “helps keep members apprised of public health needs and trends—both where
Alumni notes

Beth Stalvey, M.P.H., 1997, Ph.D., 2000 (Health Behavior), is a research analyst in the Division of Policy and Planning at the Texas Department on Aging. Her responsibilities include coordinating and conducting research activities of agency programs, drafting agency position papers, and working on special projects to develop a comprehensive system of community-based services and opportunities for older persons.

Tom Miller, M.D., M.P.H., 1990 (International Health), was recently elected to the Prattville, Alabama, City Council. Tom is also director of the Bureau of Family Health Services for the Alabama Department of Public Health in Montgomery.

Ron Grantland, M.P.H., 1982 (Epidemiology), will serve as acting administrator for the Alabama Department of Public Health’s Area 2. Ron has been with the ADPH for 29 years. He also serves on the UAB School of Public Health Advisory Board.

Congratulations to Jim Durant, M.S.P.H., 1997 (Environmental Health), who recently received certification as a Certified Industrial Hygienist. Jim is a safety specialist/industrial hygienist for the Central Arizona Project in Phoenix.

Rob McDonald, M.P.H., M.B.A., 1997 (Health Care Organization and Policy) was elected to the position of vice president of the UAB School of Public Health Alumni Chapter in October. Rob is assistant to the director for the UAB Center for AIDS Research in Birmingham.

Jim Tillery, M.P.H., 1999 (Environmental Health), assumed the office of president of the UAB School of Public Health Alumni Chapter in October. Jim is an industrial hygienist for Alabama Power Company in Birmingham.

Call for Nominations for the SPH Alumni of the Year and Distinguished Alumni Awards

Nominations are currently being accepted for the 2001 UAB School of Public Health Alumni of the Year award. This award recognizes a graduate of five years or more who has been exemplary in promoting the school’s mission of developing, disseminating, and applying knowledge to prevent disease and promote health in the human population. Through the generosity of the Hill Crest Foundation, this award carries a $1000 gift.

Nominations are also being accepted for the 2001 UAB School of Public Health Distinguished Alumni award. This award is presented to a graduate who has demonstrated a long-term commitment to the field of public health and the mission of the school through exemplary leadership and involvement.

Please provide contact information and supporting documentation for the alumna/alumnus being nominated and include your own name and contact information.

Nominations should be sent to:
Joan Ohrn
Alumni Director
UAB School of Public Health
RPHB 140L • 1665 University Boulevard
1530 3RD AVE S
BIRMINGHAM AL 35294-0022

All nominations must be received no later than Friday, March 30, 2001. The awards will be presented at the annual School of Public Health Honors Luncheon in June.

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