

Rx Briefs

■ Cancer advances

Research efforts at the University of Michigan Comprehensive Cancer Center are zeroing in on ways to prevent, delay, stop or reverse cancer growth. By searching for molecular targets in cancer cells, research scientists are taking the first steps towards "smart" drugs, targeted treatments and genetic therapies - without impacting healthy tissues and without adverse side effects.

Find out what's new in cancer research. A free community program will be held 7-8:30 p.m. Wednesday, Oct. 2, at the Livonia West Holiday Inn (on Six Mile Road, just east of I-275). The presenter will be Dr. Max Wicha, director of the U-M Comprehensive Cancer Center.

Reservations are encouraged and can be made by calling (800) 742-2300, category 7870. Or make reservations online at www.cancer.med.umich.edu/learn/cansnights.htm.

■ "Women at Risk"

Since 1984, more women have died from heart disease in this country than from any other health factor.

The American Heart Association and the Michigan Chapter of the American College of Cardiology will present "Women at Risk," a one-day cardiovascular health conference, 7:30 a.m. (registration) to 3 p.m. Saturday, Sept. 28, at St. John's Conference Center in Plymouth. Cost is \$100. Dr. Rose Marie Robertson, immediate past-president of the AMA, will be the headline speaker. Conference topics include: coronary artery disease in women, psychosocial factors related to heart disease, lipid therapy and stroke prevention. The seminar will end with a panel of experts discussing the recent changes in hormone replacement therapy.

To register, call the American Heart Association at (517) 349-3102.

■ SUI/MUI study

Doctors at Beaumont Hospital in Royal Oak are recruiting women to test an experimental oral medication for reducing the number of stress incontinence episodes. The drug is being tested in women with SUI, or stress urinary incontinence, and MUI, or mixed urinary incontinence.

SUI is the involuntary loss of urine that occurs if the muscles that support the bladder are weakened. MUI is the involuntary loss of urine as well as a strong urge to urinate.

Participants will be compensated for their participation. Call (248) 551-0642.

■ Assisted living

The Michigan Center for Assisted Living has released the first-ever Consumer Guide to Michigan Assisted Living Communities. This 200-plus-page book contains helpful consumer information about assisted living options in Michigan, including a checklist to use while visiting providers and searching for services.

The guide contains listings of all licensed communities with 18 or more units serving seniors, as well as several communities that do not require licensure, along with the various services they provide.

To order, contact Michigan Center for Assisted Living, P.O. Box 80050, Lansing, MI 48908-0050. An online version is available at www.hcam.org.

Sisters join efforts to lose weight



TOM HOFFMEYER / ECCENTRIC

Sandra Dalka-Przyby is joined by her sisters Kathy Barton, left, and Marilyn Ormiston, right, as they walk together around the track at Birmingham Groves High School.

Sandra Dalka-Przyby, a Beverly Hills-based freelance writer, has set out to lose weight once again. Since reaching her goal last year, she has hit a few potholes. However, she's back on track and wants you, our readers, to join her in her quest for health and fitness. This is her second article.

BY SANDRA DALKA-PRZYBY
CORRESPONDENT

M"fitness forever" quest has become a sister experts say losing weight with a friend is the best way to go. Now I have two friends along on the journey to weight loss and fitness.

My sisters, Kathy Barton of Troy and Marilyn Ormiston, a Clarkston teacher, have joined me in this challenge. And together we have discovered that six W's — water, walking, writing down what we eat, weighing our food and Weight Watchers — are helping us achieve success.

Water is one of the best diet tools. Drinking six to eight 8-ounce glasses of water a day has always been touted by the experts as an important factor in achieving weight loss. And we know why! Water fills you up and if you're full, you eat less. We found that when we drank water before meals, we were less tempted to reach for second helpings. And when we drank water with meals, we didn't always eat all of the first helpings!

One discovery I made was that many times when I thought I was hungry, I found I was just thirsty. Instead of automatically reaching for food,

especially when cravings struck, I drank a large glass of water. Most times this worked. My cravings were washed away!

My sister Kathy hates to drink water. Like many Americans, young and old, her beverage of choice is soda pop, specifically caffeinated cola beverages. Also, she drinks a lot of coffee at work. Caffeinated beverages, she has learned, are a problem. Those beverages act like a diuretic and can lead to dehydration.

"I know how important it is to drink water. So now I've cut down on the pop and coffee and upped my water consumption," she says. "I have found that when I drink water, I lose more weight."

Six to eight glasses of liquid (water is the best) a day are not only important for weight loss, they are needed for normal body functions. Water helps to digest foods, rid the body of waste products, increases energy and endurance, and provides us with a feeling of well-being.

Keeping a food journal of what, when and why we eat helps us uncover eating habits and show us areas where we can make positive changes.

WALK THE WALK

Walking and other forms of physical activity are important not only for weight loss, but for overall fitness. According to the experts, physical activity is so critical for successful weight loss and maintenance that a person should not attempt to lose weight without committing to regular exercise. Exercise burns calories, controls appetite, preserves and builds muscle and increases metabolic

PLEASE SEE FITNESS, C8



Join the Fitness Forever Club

We want you to join us in reaching your own success in getting healthy and fit. Let us know how you are doing on, if you need help, e-mail Sandra Dalka-Przyby, an American Council on Exercise-certified Lifestyle and Weight Management Consultant, with your questions and concerns at sdpryby@hotmail.com.

Also, we want to report on your weight loss and exercise success. Send your story and picture to Renee Skoglund, Health and Fitness, The Observer & Eccentric, 36251 Schoolcraft, Livonia, MI 48150. Contact her at (734) 953-2128; fax (734) 591-7279; e-mail rskglund@oc.homecomm.net.

Syndrome causes thousands of deaths by cardiac arrest

BY RENEE SKOGLUND
STAFF WRITER

Denise Falzon's son would have been 28 years old this month. Instead of celebrating his birthday, Falzon marks the ninth year since his death. Time heals, said the Orchard Lake resident, but everyone has a different time frame. Hers has been a long one.

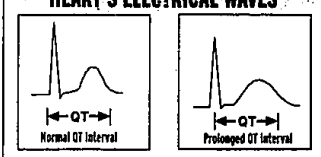
Brian Falzon was once a healthy 19-year-old student at Michigan State University. One day he stepped outside the computer lab, where he had been cramming to finish a paper, for some fresh air and died.

The cause of death was most likely Long QT Syndrome, a genetic abnormality of the heart's electrical system that predisposes a person to a very fast heart rhythm, said Falzon. The symptoms of the syndrome often go undetected until sudden death occurs.

Falzon, now a board member of the Sudden Arrhythmia Death Syndromes Foundation (SADS), wants to create an awareness of Long QT Syndrome among parents, school administrators, sports coaches, and doctors. She doesn't want to read any more news stories like that of her son or the 15-year-old Detroit high school boy who recently died during football practice.

"With stories like that, it hits home. We must stop the senseless deaths of these young people from lack of awareness," she said. A simple EKG, or electrocardiogram, done while a patient is resting and on a treadmill, can pick up

HEART'S ELECTRICAL WAVES



signs of the abnormality, she said. A Holter monitor, a device a patient wears for 24 hours to record heart activity, could also detect Long QT Syndrome.

ELECTRICAL WAVES

Two years ago, in an Observer story on Long QT Syndrome, Dr. Michael Lehmann, director of the Electrocardiology Laboratory at the University of Michigan, described the condition.

A heartbeat is an electrical wave that moves from the heart's upper chambers (atria) to the lower chambers (ventricles). In an electrocardiogram, the term "QT" refers to the time it takes for the heart to recover from one beat

and prepare for the next. In people with Long QT Syndrome, the start of the Q wave to the end of the T wave is abnormally long.

"When the QT interval is prolonged it predisposes the ventricle heart muscle cells to electrical instability," said Lehmann at the time.

Ions such as potassium, calcium and, to a lesser degree, sodium, move across cell membranes recharging the heart. Mutations can result in a dysfunctional channel, making the recharging process much longer. In a prolonged QT, electrical oscillation gives rise to extra beats. It can lead to a new, more threatening heart beat that comes from the cells and not from the upper chambers.

"Oscillation can result in a few premature beats to a whole salvo of events," said Lehmann.

A prolonged QT can cause a person to faint or experience ventricular fibrillation, a potentially life-threatening condition in which the electrical signals move chaotically through the ventricles, preventing the heart from beating properly. The year before he died, Brian Falzon had a fainting spell during a weight-lifting class at West Bloomfield High School.

CAUSES

According to the SADS Foundation, Long QT Syndrome can be genetically determined or acquired due

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