



Thomas C. Meyer, MD

Public health issues in cancer

Thomas C. Meyer, MD, Medical Editor, WMJ

What better way to open an issue primarily devoted to cancer than the positive report of the activities of the Breast Cancer Recovery Foundation Inc., founded by Ann Haney after the time she spent as Wisconsin's Health Officer (p 9). Always upbeat, it was typical of her to envision and implement the Infinite Boundaries retreats—and this report is a reflection of Ann Haney's vision. We are grateful to the authors for sharing the information.

The message of Mr Laing's occasional paper is directed at radiologists, but we believe that his report discussing the responsibility to communicate with attending physicians and/or patients applies equally to all specialists (p 13).

Treating cancer also means treating pain, and we thought Dr Dahl's piece, which was first printed in HospiceCare Inc.'s newsletter, contained some pertinent information for those physicians who may be a bit wary of prescribing opioid analgesics (p19).

Dr McCarty and her colleagues provide another of the reports that can only be generated from the Marshfield Epidemiological Study Area in which virtually the entire population looks to the Marshfield

Clinic and St Joseph's Hospital for their longitudinal health care and therefore provide extraordinary opportunities for studies that would not otherwise be possible (p 22). On this occasion they point to populations that do not meet accepted health screening recommendations—so perhaps special efforts could be made to advise farm residents and younger rural women of the importance of these health screens when they appear for an office visit.

Ms Foote's study of the apparently lower incidence and higher mortality for all major cancers, except breast cancer, in African American men and women when compared to whites (p 27) is an effective backdrop to the report by Dr Wolff and her colleagues on the literature relating to cancer prevention in underserved African American communities (p 36). The listed barriers are relatively well known but there is much wisdom in the listing of programs that seem to have been effective in dealing with many of the barriers.

The report by Ms Marbella and her colleagues (p 41) contains a reminder that we should persevere in our quit smoking advice to patients as an effective component of smok-

ing cessation programs. With it is a gentle reproof that only about two thirds of patients receive such advice and that we should, perhaps, be more vigorous in the advice with smokers 25-44 years old. While the authors concede that Wisconsin physicians do a better job of advising than what's being done on the national level, they would like us to do better.

Doctor Fillmore and her group describe the success they have had with a more aggressive approach to follow-up of abnormal results from the Milwaukee Breast Cancer Awareness Program (p 46).

Finally, the excellent report by Dr Katcher et al of the proceedings of the Wisconsin Perinatal Summit (p 48) contains some startling data relating to the differences between both the infant and maternal mortality rates of African American pregnancies when compared to those of other races—including black women who were born outside of the United States. The long-accepted parameters of education, lack of prenatal care, and income level don't seem to hold up all that well and the authors suggest other possibilities that deserve our attention.

"The people who make a difference are not the ones with the credentials, but the ones with the concern."

—Max Lucado



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