



STRONG HEART STUDY

Cardiovascular disease in American Indians

NEWSLETTER

September 1992

Volume 4, No. 2

AGENCY DIRECTORS MEET TO MARK STRONG HEART STUDY MILESTONE AND DEVELOP PLANS FOR A NEW STUDY OF AMERICAN INDIAN CHILDREN

With the completion of the Phase I goal of 4,500 clinical examinations, the time was perfect for Dr. Claude Lenfant, Director of the National Heart, Lung, and Blood Institute (NHLBI) and Dr. Everett Rhoades, Director of the Indian Health Services (IHS), (pictured left and right, respectively, in the photograph below) to meet and review accomplishments to date of the Strong Heart Study (SHS) and plan for future studies of American Indians. Accompanying Dr. Rhoades were Dr. Gene Gerber, Special Assistant to the Director, IHS, and Karen Strauss, Chief, Nutrition and Dietetics Section, IHS. From NHLBI, Richard Fabsitz and Marguerite Evans presented progress reports on the completion of Phase I and plans for Phase II

of the SHS and plans for a new study to prevent obesity in young American Indians/Alaska Natives. Richard Fabsitz, SHS Program Manager, presented the update of the SHS that included the completion of 4,500 examinations from the three centers. In his remarks, he cited the numerous contributions of the dedicated staff of the SHS as well as the IHS that made the achievement of this milestone a reality. He emphasized that the variation in rates of disease and levels of risk factors among the three centers indicates that the SHS will offer unique data to help in understanding what causes heart disease. Dr. Lenfant remarked that based on Phase I data, this study of American Indians will add signifi-



cantly to our knowledge of cardiovascular disease in minority populations and that the study has been extended for five years because of its success to date and promise for the future. Marguerite Evans, Deputy Program Manager of the Obesity Prevention Initiative, provided equally exciting information about the future when she described a new effort by NHLBI to begin a school-based intervention study to prevent weight gain among American Indians. She indicated the Request for Proposals is expected to be released in the next few months

and awards will be made on a competitive basis. Richard Fabsitz indicated that this program will address one of the concerns voiced by many of the American Indians attending the SHS community meetings.

Dr. Rhoades voiced his appreciation for the efforts of NHLBI focused on the constituency of the IHS. He, as well as Dr. Gerber and Ms. Strauss, strongly supported the concept of prevention as the proper approach to reducing the high prevalence of obesity among American Indians.

COMMUNITY MEETINGS HELD IN ARIZONA

Community meetings were held at the three Arizona Indian Tribal sites during Dr. Barbara Howard's visit in May. During these meetings, Dr. Howard presented SHS appreciation certificates to the many people who were supportive during Phase I of the study. A framed certificate was given to the three Indian communities at Gila River, Salt River and Ak-Chin. Also, framed certificates were presented to the NIDDK branch of NIH and to the HuHuKam Memorial Hospital at Sacaton. In addition, Dr. Howard presented a summary of Phase I and explained the current and future activities of Phase II. Lists were provided showing the numbers of people examined (divided by age splits and tribal affiliation). Also, the type of data available from the

examination was listed so members can be aware of the data they will soon have at their disposal. The meetings were well received; not only was it a good time to express our feelings of appreciation to the many who have supported this study, but it also provided a setting for some lively discussions of community health concerns. One strong suggestion was the need to include younger members in the study, because of a fear that heart disease is increasing among the young. Another key issue was the possibility for studies in schools on risk factor reduction.

Both community members and the SHS staff have a strong desire to use the data from the study to implement changes in the community which will result in better health for the people.

CONGRATULATIONS TO ARIZONA STRONG HEART STUDY STAFF

Betty Jarvis won first place in the annual Salt River "Run for Diabetes" 5-mile fun run which was held in May. She was both "amazed and delighted" to have her name announced as the winner. Betty feels her performance supports the concept that youth and speed are not always necessary to win and that having a great deal of persistence can pay off.

Paula Harper was the recipient of at least five awards when she traveled to Europe in May to participate in the first international meeting of the International Diabetes Athletes Association. The meeting in Barcelona was preceded by a bicycle

ride from Brussels to Germany and to Barcelona; ten people with diabetes participated and Paula was the U. S. representative. Paula, the president of the IDAA, founded the organization with a local chapter in Phoenix in 1985. The purpose was to promote exercise among diabetics to improve their health. This has been achieved far beyond Paula's original dream. The IDAA now has 8 chapters in the U.S. with approximately 800 members and 9 chapters in other countries with 3,000 members. This could never have happened if it had not been for Paula's dream and her tenacity! Congratulations Paula, we are very proud of you!

SOUTH DAKOTA TRIBES RECEIVE STRONG HEART STUDY REPORTS

On July 9, 1992, Dr. Tom Welty and Beverly Blake presented the results of the SHS to the tribal council at Eagle Butte and recognized their contribution to the successful completion of the study. The talk was well received and a number of council members expressed appreciation for the efforts of the staff to improve the health of tribal members. The council was pleased that funding would be available for research to determine the most effective ways to prevent obesity in Indian children. Mr. Vernon Mestes, the Chairman of the Health and Welfare committee, suggested that part of the problem of obesity in children stemmed from the concern about malnutrition and tuberculosis that existed when he was growing up and attended boarding schools. At that time tuberculosis was the most serious health problem affecting tribal people and children who were overweight seemed to be protected from tuberculosis. Thus, the boarding school staff were encouraged to provide frequent feedings to Indian children and obesity seemed to be a sign of adequate nutrition rather than a health problem. Thus, Mr. Mestes felt that the concern for tuberculosis and the perception that obesity was protective likely contributed to the current problem of obesity and its sequela of diabetes and coronary artery disease. Dr. Welty mentioned a similar experience on the Navajo reservation where severe malnutrition was well documented in the late 1960's and early 1970's when he began his practice. Because of this serious problem, a number of nutritional programs such as commodities, WIC and food stamps were instituted; and the problem of malnutrition has now disappeared and has been replaced with the problem of obesity. At the time, the consequences of obesity were not well recognized and the serious malnutrition facing Navajo people resulted in high rates of infant mortality, especially from diarrhea.

Three Georgetown medical students working on the chart review for the Strong Heart Study were introduced: Mike Karch, Craig Baker, and

LaMona Monteiro. Ms. Monteiro is a member of the Narragansett tribe in Rhode Island and has a 437 scholarship for her education and a four-year obligation to serve in an IHS facility. All the students enjoyed their experience in Eagle Butte and were encouraged to consider returning to serve there after completion of their training. Eagle Butte is currently severely underserved with no permanent physicians on staff and five physician vacancies. This critical health manpower shortage is undoubtedly the most serious problem currently facing the tribe. On July 15, 1992, Dr. Tom Welty, Beverly Blake and Neva Zephier presented the results to the Oglala Sioux Tribal Council in Pine Ridge. Due to the full agenda, a very abbreviated presentation was made and the tribe was recognized for its contribution to the successful completion of this study. Mr. John Steele, Chairman of the Tribe, was a participant in the study and was especially interested in learning about the results. Since previous meetings with the council, a smoke free policy has been adopted and Dr. Welty recognized the contribution this would make in terms of preventing heart disease and cancer. He encouraged the tribe to adopt a smoke free environment throughout its office space. Follow-up meetings are scheduled with the Health and Human Services Committee of the Tribe to establish the publication policy for SHS publications.

The presentation to the Devil's Lake Sioux Tribe was scheduled on July 28, 1992, but had to be postponed due to scheduling conflicts of Dr. Welty and Beverly Blake. This site is located a long distance from Rapid City (a 10-hour drive) and has been especially challenging to manage. Tribal chairman, Peter Belgarde, was a participant in the study and his contribution will be recognized when the presentation is made.

The Dakota Center tribes are all looking forward to participating in Phase II of the study and have expressed great interest in the results of the Phase I examinations.

APPRECIATION EXPRESSED IN OKLAHOMA AND STRONG HEART STUDY STAFF PARTICIPATED IN AMERICAN INDIAN EXPOSITION

Three community meetings were held in Oklahoma during July and August. The first meeting was held on July 2 at the United States Public Health Service (USPHS) Lawton Indian Hospital, the second was held on July 8 at the Bureau of Indian Affairs Agency Office in Anadarko, and the third was held in Oklahoma City on August 3 in the College of Health building on the campus of the University of Oklahoma Health Sciences Center.

Invitations were sent to people in the greater Lawton-Anadarko and Oklahoma City areas whose assistance throughout Phase I of the SHS greatly facilitated surpassing the goal of 1,500 examinations in Oklahoma. Those invited included people who helped in every aspect of the study from the tribal leaders who provided initial approval as well as continuing support throughout Phase I, to clinic and hospital employees and people in the community.

The purpose of the meetings was threefold: Dr. Elisa Lee was given the opportunity to personally thank those who have helped the SHS in Oklahoma as well as to present them with certificates of appreciation; some summary information from Phase I data was presented; and a brief discussion of Phase II was held. Framed certificates were presented to each of the Seven

Tribes of the Anadarko Agency, the Anadarko Indian Health Center and the USPHS Lawton Indian Hospital. Framed certificates will be presented also to the Oklahoma City Indian Clinic, the Carnegie Indian Health Center and the IHS Oklahoma City Area Office.

The SHS staff members participated for the fourth year in the annual American Indian Exposition during the week of August 17-22, 1992, in Anadarko, Oklahoma. Several important things were accomplished during the week. Because the Exposition is so well attended, contact with many people in the study area was possible to let them know that Phase II is currently under way, that Phase I participants will be contacted soon to determine whether or not they have had any morbid events since their Phase I examination, and that Phase II examinations will begin in August 1993. In addition, release form signatures and current addresses for Phase I participants who had moved were obtained, and informants were interviewed for completion of the Phase I mortality survey. Also, health education materials were handed out and, because most Exposition activities were held outdoors, fans that were printed with "I'M A STRONG HEART STUDY FAN" were given to interested people who stopped by the booth.

Strong Heart Study Coordinating Center
Center for Epidemiologic Research
College of Public Health
University of Oklahoma Health Sciences Center
P. O. Box 26901
Oklahoma City, OK 73190

