

From the Editor-in-Chief: Section Previews

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Original Reports on Focus Area: Heart Failure

Factors Underlying Racial Disparities in Hospital Care of Congestive Heart Failure

Shen et al

Using cross-sectional data from more than 370,000 discharges with heart failure in the 1995-1997 National Inpatient Database, Shen et al examine relationships between race and five aspects of hospital care. Compared to White patients, African American and Hispanic patients with heart failure were more likely to seek care through the emergency department, stayed in the hospital longer, and incurred higher total charges, yet were less likely to receive clinical procedures or die in the hospital. While differences may reflect patient preferences and/or biases in provider recommendations, other factors such as a lower degree of illness severity and a lower risk of coexistent coronary artery disease cannot be excluded. The latter may also be reflected in the lower hospital mortality rate.

Guidelines for Management of High-Risk African Americans with Multiple Cardiovascular Risk Factors: Recommendations of an Expert Consensus Panel

Williams et al

African Americans suffer from exceptionally high rates of cardiovascular disease (CVD) and associated premature mortality. Despite having at least one major risk factor for CVD, African Americans are often underdiagnosed and under-treated. Williams and colleagues provide guidelines for the management of high-risk African Americans based on existing evidence. They also note the paucity of data for treating African Americans with multiple CV risk factors and the need for additional evidence-based studies.

Are There Gender Differences in the Reasons Why African Americans Delay in Seeking Medical Help for Symptoms of an Acute Myocardial Infarction?

Banks and Dracup

African Americans are more likely to delay seeking medical care for symptoms of acute myocardial infarction (AMI). Banks and Dracup assessed potential gender

differences in this behavior in 61 African Americans. Median delay time was about 25% longer for women compared to men (4.4 hours vs. 3.5 hours), although the difference was not statistically significant. Women who received advice to seek help or call 911 upon symptom onset had shorter delays compared to women who did not. Interestingly, men with emergency room insurance delayed longer than men without emergency room insurance. This study suggests specific characteristics that can serve as a profile to those African Americans most likely to delay seeking treatment for AMI, and clearly highlights the need for greater AMI awareness for African American women.

Original Reports: Cardiovascular Disease and Risk Factors

Epidemiologic Profile of Peripartum Cardiomyopathy in a Tertiary Care Hospital

Isezuo and Abubakar

An epidemiologic link between peripartum cardiomyopathy (PPCM) and customary puerperal practices, such as postpartum excess consumption of dried lake salt, warm water bath, and lying on a heated mud bed, has been described among Nigerians. Isezuo et al prospectively analyzed PPCM cases from 6,535 deliveries between January 2003 and December 2005 in a tertiary care hospital in Sokoto, northwest Nigeria. The incidence of PPCM was 1 case per 102 deliveries. PPCM constituted 32.5% of overall heart failure admissions and 60% of heart failure admissions for females. Customary puerperal practices were observed in 53 (81.5%). PPCM is an important cause of maternal morbidity and mortality in this population.

Profile of Diabetic Ketoacidosis in a Predominantly African American Urban Patient Population

Seyoum and Berhanu

Diabetic ketoacidosis is a serious but mostly preventable complication of diabetes mellitus and has been on the decline in recent years for some populations with the exception of ethnic minority patients in inner-city settings. In this study, Seyoum and Berhanu

analyzed five-year hospital admission data for diabetic ketoacidosis at a single inner city hospital that serves a largely uninsured adult African American population. Of those admitted with diabetic ketoacidosis, 571 (90.6%) of the patients had type 1 diabetes, and 59 (9.4%) had type 2 diabetes. Factors contributing to the hospital admission included: discontinuation of insulin, infection, and other medical illness in 501 (59.1%), 136 (16.1%), and 30 (3.5%) of the admissions, respectively. These findings demonstrate that diabetic ketoacidosis continues to have a major effect in urban African American patients with diabetes. Interventions are needed for this population to improve diabetes care.

Inpatient to Outpatient Transfer of Diabetes Care: Perceptions of Barriers to Postdischarge Followup in Urban African American Patients

Wheeler et al

Diabetes remains a major cause of morbidity and mortality. To better understand obstacles to postdischarge followup of patients hospitalized for diabetes, Wheeler et al found that 95% of more than 300 respondents (average age: 50 years; 46% women; 91% African American) indicated that they planned to use follow-up services. However, 50% anticipated encountering barriers to keeping outpatient appointments, such as transportation problems, inability to afford the visit, and lack of health insurance. Their findings reinforce the need for discharge planning programs that emphasize the need for long-term followup and effective assistance, especially for patients with diabetes.

The Contribution of Soul and Caribbean Foods to Nutrient Intake in a Sample of Blacks of US and Caribbean Descent in the Adventist Health Study-2: A Pilot Study

Akbar et al

Akbar and colleagues evaluated the dietary contribution of culturally preferred foods in a population of 161 Black Seventh-Day Adventists from southern and northeastern United States in order to improve the standard food frequency questionnaire. Red beans, along with various legumes, cruciferous vegetables, and okra-corn-tomatoes, were the most frequently consumed special foods.

Macaroni and cheese was an important dietary source as well. Weekly consumption of red beans, rice and beans, pinto beans, black-eyed peas, plantains and poke salad was reported by between one quarter and one half the subjects. These reported foods make a major contribution to the diets of these subjects and should be included in dietary questionnaires designed for this minority population.

Prevalence of Diabetes and Glucose Intolerance in an Ethnically Diverse Rural Community of Hawaii

Grandinetti et al

Grandinetti et al examined the prevalence of diabetes, determined by a two-hour oral glucose tolerance test, among 1452 non-diabetic adults (men and nonpregnant women) in a rural, multiethnic community in Hawaii. Unrecognized diabetes was three-fold higher among Asian and Native Hawaiian ancestry groups than among Caucasians, even after adjusting for other risk factors, such as demographics, medical history, dietary intake, physical activity, and anthropometric measurements. Their findings suggest that there is a true increase in the prevalence of diabetes and dispel detection bias as the source of reports of increased diabetes.

Waist Circumference and Waist-to-Hip Ratio as Indicators of Fat Location in Black, White, and Mulatto Brazilian Men

Ferreira et al

Using a cross sectional analysis of 1235 healthy men aged 20–59 years in Cuiabá, Brazil, Ferreira et al assessed the relationship of skin color classification with abdominal fat, using electrical bioimpedance and anthropometric measures. There were no differences in body mass index according to race, but Whites had a greater risk of abdominal fat. After adjustment for age, percentage of body fat, smoking, alcohol intake, physical activity, income and schooling, Blacks, compared to Whites, had smaller waist circumferences (about 2 cm) and smaller waist-to-hip ratios (WHR). Mulattos were in an intermediate position. Race influences WHR, but the contributions from genes that may be linked to melanin or associated environmental and social factors have yet to be determined.

A Comparison of Weight-Control Behaviors in African American and Caucasian Women

Annunziato et al

Annunziato et al examined differences in help-seeking for specific weight-control behaviors among 121 females, of which 58% were African American. Caucasian women were significantly more likely to be classified as high help-seekers than African American women, and more likely to use commercial weight-loss programs. African American women were more likely to try herbal supplements. Enhanced understanding of ethnically associated weight-control behaviors can assist in tailoring more effective weight-reduction programs.

Body Mass Index in Monoracial and Multiracial Adults: Results from the Multiethnic Cohort Study

Albright et al

Albright and colleagues assessed the body mass index (BMI) with differing ethnic admixtures from more than 200,000 adults in the population-based multiethnic cohort of adults from Hawaii and California. The mean BMI of individuals with an ethnic admixture was either similar to the average of the BMIs for the monoracial groups comprising it, or was closer to the monoracial group that had the highest mean BMI. Thus, obesity risk for persons with ethnic admixtures trend toward the ethnic group with higher BMI, suggesting their risk profile should be assessed accordingly.

Physician Assessment of Stroke Risk in Hypertensive Patients in the Middle East and Africa: Results of the ACTION Survey

Badr et al

The Assessing and reduCing the risk of sTroke in hypertensION (ACTION) survey was a multi-center observational study of cardiovascular risk factors in 4747 hypertensive patients in nine Middle East and African countries. The study found blood pressure was controlled in only 18% of the population and in 12% of diabetics. The estimated stroke risk in the ACTION population was double that of an age-matched Framingham cohort. The mean 10-year stroke risk was significantly higher for men (25.4%) than for women (19.5%) and for diabetics (28.2%) than for non-diabetics (19.4%). ACTION was

successful in obtaining broad physician participation. The risk of stroke in hypertensive patients from the MEA region is higher than would have been predicted and is likely related to poor hypertension control.

Original Reports: Public Health

Descriptive and Analytic Epidemiologic Studies to Identify Modifiable Determinants of Disparities in Mortality Rates between Blacks and Whites

Levine et al

Descriptive and epidemiological studies of US national data reveal no sustained decrease in mortality disparities between Blacks and Whites over the last 50 years. Levine et al examined race and sex-specific, age-adjusted annual mortality rate ratios for Blacks compared to Whites in 41 peer-geographic areas similar to Davidson County, Tennessee in which Meharry Medical College resides. In 39 of the 41 areas, the mortality rate ratios were greater than 1.0, indicating higher death rates for Blacks, and was statistically significant in 32 counties. Findings were similar across counties with low and high Black:White poverty ratios. These variations in racial mortality trends across comparable geographic areas will provide new opportunities to formulate small area level hypotheses to identify modifiable determinants.

Older African Americans' Perceptions of Pharmacists

Sharon L. Youmans

Using six sex-specific focus groups of insured older African Americans with chronic disease, Youmans et al found the majority of participants took 4–6 prescription medications and reported an average of two chronic illnesses. Most expressed a desire to have a trusting relationship with a respectful, professional, and knowledgeable community pharmacist, as well as an interest in engaging in informed decision-making, including detailed medication discussions. However, not one participant reported a trusting relationship with a pharmacist and few reported feeling comfortable initiating medication discussions. Participants also perceived lack of interest or knowledge by the pharmacist, time constraints, and an inability to identify the pharmacist as barriers. This study highlights the underutilized role of the

pharmacist as a highly engaged health team member for insured older African Americans with chronic disease. Future research is needed to examine the patient-pharmacist relationship and its contribution to health disparities.

A Comparison of the Health Status and Behavioral Risk Factors Among English-Speaking Hispanics and Non-Hispanic Blacks and Whites in Missouri

Yun et al

Using combined data from the 2002 and 2003 Missouri Behavioral Risk Factor Surveillance System and the 2003 Missouri County-Level Study, Yun et al estimated the prevalence of chronic diseases and 20 health indicators for Hispanics in Missouri. They compared their prevalence estimates with other racial/ethnic groups. Overall, Hispanics (21.7%) and non-Hispanic Blacks (19.8%) were more likely to be uninsured than non-Hispanic Whites, 12.2%. Hispanics were significantly less likely to report poor or fair health, and less likely to report activity limitation (12.9%, 95% CI: 8.0%–17.9%) than non-Hispanic Whites (20.2%, 95% CI: 19.1%–21.2%). Controlling for sociodemographic characteristics, Hispanics were more likely to have diabetes and those aged ≥ 50 years were less likely to have no sigmoidoscopy or colonoscopy in the past five years (OR=0.5, 95% CI: 0.2–1.0) compared to non-Hispanic Whites. Other health indicators for English-speaking Hispanics were similar to, or better than, non-Hispanic Blacks and Whites. However, health status findings between English-speaking and non-English speaking Hispanics may differ significantly and needs to be explored further.

Understanding Latino Adolescent Risk Behaviors: Parental and Peer Influences

Livaudais et al

Livaudais and colleagues assessed baseline factors associated with alcohol use, smoking, and sexual activity over a two-year period among 480 middle school Latino adolescents. They found drinking alcohol and smoking was associated with increased acculturation, engagement in risky behaviors, valuing independence, and having friends who had ever smoked at baseline. While parents' negative reactions to risky and unhealthy behaviors were protective against drinking and smoking, having parents with a high school

education or higher were associated with drinking alcohol. In regard to having sex, younger age, receiving good grades and valuing religion were protective. This study identified important parent and peer influences on adolescent risk behaviors and potential interventions to prevent or minimize such behaviors for adolescents.

Health Literacy and Perceived Health Status in Latinos and African Americans

Guerra and Shea

Guerra and Shea assessed the association between functional health literacy and physical and mental health status using the Charlson Comorbidity Index and a series of validated survey instruments in a sample of 1301 Medicaid and/or Medicare Latino and African American adults. After adjusting for sociodemographic confounders and Charlson Index score, they found functional health literacy was not significantly associated with physical or mental health status. Future research should also examine whether the association between health literacy and perceived health is different between majority and minority cultural groups.

Anemia in the Turks and Caicos Islands: Exploring the Dietary Link

Maitland

Iron deficiency anemia is a longstanding public health concern in the Turks and Caicos Islands (TCI). Using a survey covering 144 randomly selected households from TCI electoral lists, Maitland found lower iron intake on Grand Turk (<5%) and Providenciales (0%) compared to Middle Caicos (20%), the least developed island. These findings suggest diet may play a role in the anemia found in TCI, especially in less developed areas.

Kids Identifying and Defeating Stroke (KIDS): Design of a School-Based Intervention to Improve Stroke Awareness

Gonzales et al

In this prospective, randomized study, Gonzales and colleagues describe an educational intervention to improve stroke awareness in Mexican American middle school students and their parents. Their success in implementing a school-based stroke education initiative is discussed. Follow-up testing will demonstrate whether

the intervention contributes to improved stroke knowledge and symptom-response behaviors.

Pattern of Thyroid Disorders in the Southwestern Region of Nigeria

Ogbera et al

Thyroid disorders were thought to be rare in Africans during the early 1960s. Ogbera and colleagues collected 78 cases of thyroid disorders during a 15-month period at the medical-outpatient department of the Lagos State University Teaching Hospital, a government-run tertiary referral center in southwest Nigeria. The prevalence rate was 1.6% with a female:male ratio of 5:1. Hypothyroidism comprised 7% of the cases, Grave's disease/hyperthyroidism 84%, and 9% were euthyroid with non-toxic goiters. Their analysis suggests thyroid disorders are not uncommon in Nigeria and support the need for greater public awareness of thyroid disorders.

Using Community-Based Participatory Research to Develop a Culturally Sensitive Smoking Cessation Intervention with Public Housing Neighborhoods

Andrews et al

Smoking remains an important public health problem. Andrews and colleagues used a community-based participatory research (CBPR) approach to develop and better understand the dimensions of a culturally sensitive smoking cessation intervention in a public housing setting. Six-month continuous smoking abstinence outcomes were 27.5% vs 5.77% for the intervention and comparison groups, respectively. Thus the CBPR approach facilitated processes in which culturally sensitive dimensions can be effectively identified and integrated into successful health promotion interventions for marginalized populations.

The Relationships Among Acculturation, Body Mass Index, Depression, and Interleukin 1-Receptor Antagonist in Hispanic Pregnant Women

Ruiz et al

Ruiz and colleagues determined relationships between acculturation, body mass index (BMI), and depressive symptoms with the interleukin-1 mediated inflammatory response marker IL-1RA in more than 200 low-income pregnant Hispanic women at 22–24 weeks gestation.

Increasing years of residency in the United States was associated with higher BMI, increased depressive symptoms and elevated IL-1RA levels. This study suggests that in low-income Mexican Americans, acculturation affects BMI and inflammation. This has important implications for the increasing risk of chronic diseases (eg, diabetes, cardiovascular disease) in both the women at-risk and their children.

Designing and Implementing a Cultural Competence OSCE: Lessons Learned from Interviews with Medical Students

Green et al

Green et al designed an objective structured clinical examination (OSCE) station emphasizing cross-cultural communication skills and conducted semi-structured interviews with 22 second-year medical students to better understand and improve this tool. Emergent domains included: learning goals, logistical issues, faculty feedback, and standardized patients. Students reported many challenges, but overall perceived the OSCE to be a positive experience. Student feedback reinforced the need to ensure learning goals are clear, concise, and effectively communicated.

Design of a Family Study Among High-Risk Caribbean Hispanics: The Northern Manhattan Family Study

Sacco et al

Stroke continues to have a disproportionate impact on mortality for ethnic minorities in the United States. The aim of the Northern Manhattan Family Study (NO-MAFS) is designed to investigate the gene environment interaction of stroke risk factors among Caribbean Hispanics. Sacco et al describe the NOMAFS and report participant enrollment and study characteristics. NO-MAFS will provide an excellent data resource for the exploration of the genetic determinants of stroke.

Original Reports: Cancer

Regional Disparities in Treatment and Survival of Early Stage Non-Small Cell Lung Cancer

Crowell et al

Using data from the Surveillance, Epidemiology, and End Results (SEER) Program registry, Crowell et al compared

mortality from Stages 1A – 2B non-small cell lung cancer (NSCLC) in New Mexico to nine SEER registries functioning between 1988–1997. They found cases in New Mexico had a 22% higher adjusted mortality risk, which was driven by a shift toward greater proportions of elderly and Stage 1B cases. While rural Stage 1B cases also exhibited greater risk than urban cases, no independent ethnic differences were observed, suggesting a regional disparity in treatment and mortality risk for early stage NSCLC.

Hepatitis B Testing for Liver Cancer Control Among Korean Americans

Bastani et al

In Los Angeles County, the highest rate of liver cancer incidence and mortality resides in the Korean community. Since more than 80% of liver cancer is related to chronic hepatitis B viral infection, testing of adult immigrants from endemic areas is recommended. Bastani et al collected pilot data around understanding hepatitis B serologic testing and vaccination rates and associated knowledge and beliefs, in a community sample of 141 Korean adults in Los Angeles. They found a hepatitis B serologic testing rate of 56%, with one quarter of those tested as either chronic carriers or immune as a result of a previous infection. Of those at-risk to future infections, only 38% reported having been vaccinated, reinforcing the perceived need for further intervention research to increased hepatitis B awareness and testing among Korean American adults with subsequent vaccination and followup as indicated.

Factors Influencing Prostate Cancer Screening Decisions Among African American Men

Sanchez et al

Prostate cancer screening remains a critical issue among African American men. Through the use of focus group sessions with African American men between the ages of 40–70, Sanchez et al sought to better understand cultural factors that may influence screening decisions. Nine themes emerged including: 1) men's knowledge of prostate cancer and clinical services; 2) prostate cancer as a threat to manhood; 3) screening as a threat to manhood; 4) self-awareness of health and well-being; 5) value of screening; 6) convenience of PSA screening; 7) misunderstanding of screening controversy; 8) distrust of

the medical community; and 9) shared decision making. This study suggests these themes can be important factors in creating awareness and screening strategies for prostate cancer among African American men.

Original Reports: Mental Health

Memory Performance and Mild Cognitive Impairment in Black and White Community Elders

McDougall et al

McDougall and colleagues examined the association between several factors (age, depression, education, sex, memory complaints, race) and memory performance to determine predictors of mild cognitive impairment. Of the 172 study participants, 89 were African American and 83 were Caucasian American. In the overall group, 86% had poor memory and 25% of the Caucasians and 44% of the African Americans had moderately or severely impaired memory. Age and race were the most statistically significant predictors of memory performance and is an unresolved issue needing further research.

Racial/Ethnic Differences in Hypertension and Depression among US Adult Women

Read and Gorman

Read and Gorman assessed the degree to which depression accounts for observed racial/ethnic differences in hypertension among more than 50,000 US adult women in the 2001–2003 National Health Interview Survey. Using a regression model to control for key covariates, they found the relationship between depression and hypertension differed across racial/ethnic groups, with depression having a much stronger association with hypertension among Black and Hispanic women than for Whites. These findings support the need to screen for and treat depression as an important comorbid condition in women with hypertension.

REVIEWS

Review: Weight-Loss Interventions with Hispanic Populations

Lindberg and Stevens

In this review, Lindberg and Stevens compile information from published studies that have addressed the effective-

ness of weight-loss interventions for Hispanic individuals in the United States, identify key components of effective interventions for this population, and provide a set of recommendations for the development of effective treatment programs. Of the studies found in the literature,

only three controlled intervention studies specifically targeted Hispanic populations for weight loss. There is an urgent need to develop effective interventions and to improve the methods in the design, implementation, and reporting of such interventions for this population.

CORRECTIONS

Ethn Dis. 2007; 17(Suppl 1): S27–S32

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Ethn Dis. 2007; 17(1): 59–64

Correction to Table 2. The 95% Confidence Interval for SBP baseline on the treadmill (column 4) is corrected to read (–.59 to –.09).

The new citation for this article should read: Reed J. Blood pressure responses of sedentary African American women during cycle and treadmill exercise. [published correction appears in *Ethn Dis.* 2007; 17(2):205] *Ethn Dis.* 2007; 17(1): 59–64.