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FEELING MINNESOTA (R)	1:40 3:55 6:35 9:15
*FIRST WIVES CLUB (PG)	1:50 4:20 7:00 9:40
*EXTREME MEASURES (R)	1:35 4:15 7:20 10:10
*TWO DAYS IN THE VALLEY (R)	1:55 4:25 7:05 9:45
FLY AWAY HOME (PG)	1:25 3:50 6:45 9:30
SPITFIRE GRILL (PG-13)	2:00 4:50 7:45 10:30
*LAST MAN STANDING (R)	2:20 5:05 7:50 10:20
MAXIMUM RISK (R)	2:25 5:10 7:55 10:25
BULLETPROOF (R)	2:30 4:45 7:10 9:20
TIN CUP (R)	1:30 4:35 7:40 10:35
A TIME TO KILL (R)	1:15 4:30 7:30 10:45
INDEPENDENCE DAY (PG-13)	1:10 4:10 7:30 10:40
JACK (PG-13)	1:05 3:40 6:40 9:10
THE ISLAND OF DR. MOREAU (PG-13)	1:00 3:15 6:30 9:00

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Smoking may cause blindness

CHICAGO (AP) — New research gives smokers one more reason to quit: Pack-a-day-or-more puffers double their likelihood of developing the most common cause of blindness among the elderly.

Age-related macular degeneration, a usually untreatable affliction, impairs the vision of an estimated 1.7 million Americans and causes more new cases of blindness than any other ailment among people age 65 or older, according to the government.

Smoking already is blamed for promoting cataracts, another major cause of vision loss. Cataracts threaten the vision of far more people than macular degeneration but cause much less blindness because most cataract sufferers keep their sight with treatment.

the Massachusetts Eye and Ear Infirmary and Harvard Medical School.

Years after quitting, former smokers still faced up to double the risk of getting the condition, the new research found.

"Since the risks decrease very slowly — if at all — over time, it's even perhaps of greater importance not to start in the first place," said Dr. William G. Christen of Harvard-affiliated Brigham and Women's Hospital.

In advanced macular degeneration, which affects one of every 14 people age 75 or older, the center of the visual field deteriorates, causing a roughly circular area of blindness that grows larger gradually.

The deterioration is caused by damage to the macula, the center of the retina, a light-sensitive membrane on the inside back of the eyeball. The damage occurs when an insulating layer between

the retina and blood vessels that nourish it breaks down, resulting in fluid leaks and scarring.

Smoking may speed the process by increasing the number of damaging chemical compounds or reducing the number of protective nutrients delivered by the bloodstream to the eye, researchers speculate. Another theory is that smoking reduces blood and oxygen to the eye.

Seddon led researchers who looked for macular degeneration among 31,843 initially healthy women during a 12-year period beginning in 1980 in the ongoing Nurses' Health Study.

In 215 cases that developed, the disease caused vision loss; almost one-third of those cases were attributable to smoking, researchers said.

Smokers of a pack of cigarettes or more a day were 2.4 times as likely to develop macu-

lar degeneration as women had never smoked. Risk was calculated after controlling for differences in other traits that may be important, such as age and estrogen use.

Christen led a team that looked for macular degeneration among 21,157 initially healthy men during an average 16-year period beginning in 1982 in the ongoing Physicians' Health Study.

Among the men, macular degeneration developed in 163 cases causing vision loss. Christen's team didn't calculate how many cases were attributable to smoking, but he said it would be comparable to the proportion among women.

Pack-or-more-a-day smokers were 2.5 times as likely to get the ailment as those who never smoked, researchers said. They also controlled for differences in other traits that affect risk.

"It is another reason to either not smoke, quit smoking or reduce your amount of smoking."

Dr. Johanna M. Seddon
Massachusetts Eye and Ear Infirmary

James N Childs, M.D. '79 and Maria V. Childs, M.D.

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Yellow fever rises in Africa, South America

ABIDJAN, Ivory Coast (AP) — Yellow fever is making an alarming comeback in sub-Saharan Africa, prompting medical officials to appeal for \$190 million to control the disease that causes high fevers, vomiting and death.

A study in today's Journal of the American Medical Association found 18,735 yellow fever cases worldwide — including 4,522 deaths — from 1987 to 1991. It said this was the highest incidence of the disease since 1948.

The study was conducted by Dr. Susan E. Robertson and colleagues from the World Health Organization in Geneva.

While reported cases of the virus dropped in 1992 and 1993, they have shot up again in West Africa, most notably Cameroon, Ghana, Liberia, Nigeria and Sierra Leone.

Yellow fever has not been reported in North America since 1905, when an outbreak in Louisiana killed some 1,000 people, according to the report. But the yellow fever mosquito has recently made its way to the southeastern United States.

Yellow fever, which is spread by mosquitoes, is one of the most difficult viruses to diagnose and therefore goes underreported.

WHO estimates there are 200,000 yellow fever cases each year, with nearly all in sub-Saharan Africa.

"Many are in major urban areas in Africa and that's the real danger, that's where you have explosive potential for epidemics which could really be devastating," said Michael Luhan, a WHO spokesman.

There is no cure or specific treatment for yellow fever. Doctors can only relieve dehydration and other effects of the disease.

The U.N. health agency has launched an appeal for \$190 million for yellow fever vaccines that would be incorporated into routine inoculation programs.

"It's a very deadly disease and that's precisely why WHO is so concerned about it," Luhan said. "Even though the numbers right now are not as dramatic as others, the potential for morbidity is far greater."

In South America, Peru had the largest yellow fever outbreak in the region since 1950, with 440 cases and 167 deaths last year, according to the study. It blames the increase on the "Aedes aegypti" mosquito, which has made its way to cities.

Yellow fever causes high fever, severe vomiting and dehydration

Yellow fever on the rise

Yellow fever is a viral disease occurring in many countries in Africa and South America. The current worldwide total of 18,735 yellow fever cases and 4,522 deaths reported from 1987 to 1991 represents the greatest yellow fever activity since 1948.

Symptoms

The symptoms of the first stage of the disease appear 3 - 6 days after exposure, and include:

- fever
- nausea
- vomiting
- flushed face
- constipation
- stomach discomfort
- headache
- muscle pains (especially in the neck, back and legs)
- restlessness
- irritability

Where it occurs



in the early stages. If the virus reaches the toxic phase, at least half of the victims fall into a coma and die within two weeks.

The yellow fever vaccine offers a 95 percent protection rate. But in

the poorest corners of Africa where civil war, blazing heat, high humidity combine with unsanitary conditions, villages have moved from national inoculation programs because viral inoculation

'Visible Human' allows surgeons to practice operation

WASHINGTON (AP) — The night before a complex operation, a surgeon sits at a computer and "practices" the surgery time after time using high-fidelity pictures of the patient's actual diseased organ.

At a medical school, a student studies detailed images of muscles, bones and tissue in a computer-driven simulation of a real cadaver. The student can dissect the body dozens of times and never leave a mark on the specimen.

Patients being screened for colon cancer are put through a CT scan instead of undergoing an uncomfortable invasive procedure. Images from the scan are processed through a computer, giving the doctor an inch-by-inch view of the colon without ever touching the patient.

All of these are examples of how medical science is now using the "computerized cadavers" created by the National Library of Medicine from the bodies of an executed murderer from Texas and of a Maryland woman who died of a heart attack.

The program, called the "Visible Human" project, enables medical workers sitting at ordinary computer screens to pull up detailed, high resolution images of any part of the human body. Using computer simulation, doctors and students can strip away the skin and electronically look at any body part.

The images can be turned, giving a 3D-like appearance. Cavities, such as the stomach, the colon or even the heart, can be taken apart, layer by layer, examined in precise de-

tail and turned at any angle.

For students, it is a way to learn basic anatomy. For surgeons, it is a way to practice difficult operations before they take up the scalpel and do it for real.

Dr. Steven Phillips, a heart surgeon at the University of Iowa, said the computerized cadavers are "an exciting new medical tool that is limited only by human imagination in how it will be used."

Phillips said he is using the system to develop new surgical procedures that once he could perfect only through experiments with animals. Now, he said, the experiments are being performed bloodlessly.

"It will become like a flight simulator for surgery," he said. "It will eliminate many surgical room mistakes and complications."

At the Mayo Clinic, doctors have adapted the "Visible Human" data to X-ray and CT scan data from actual patients. Images from the patients are incorporated into the basic data base so that the appearance of the individual's diseased organ is reproduced on the computer screen.

"They are learning the surgical landscape before they even perform the surgery," said the clinic's Richard A. Robb.

He said the experimental technique has been used successfully on 12 patients undergoing prostate cancer surgery, a procedure that is difficult and fraught with risks because of potential damage to nerves and blood vessels.

By studying computer-enhanced simulations, Robb said, the surgeons could learn where the cancer was in the prostate and best to approach it surgically.

"It helps because the surgeons are confronted with the anatomy they will encounter in surgery," he said. In other words: No surprises.

The data of the "Visible Human" project is now available for computer download by researchers and other licensees. Dr. Michael Ackerman of the NML said more than 200 licenses have been issued in 26 countries.

The NML, which is part of the National Institutes of Health, issued a contract in 1993 to the University of Colorado to develop computerized cadavers.

It took Colorado researchers two years to find the ideal adult male cadaver and longer to find the ideal female.

The male, it turned out, was a 39-year-old Texas killer who was executed by lethal injection in August 1993 after instructing that his body was to be donated to medical science.

The female was a 59-year-old Maryland woman who also gave her body to science.

First the bodies were X-rayed and imaged with magnetic resonance equipment. They were frozen hard and carved into thousands of thin slices.

All of the images were then stored in a computer and a special program put them together to form high fidelity pictures of the body and its parts.

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