Almost 20 million unsafe abortions performed annually in developing world

WESTPORT, CT - Of the 50 million abortions performed each year across the globe, 20 million are unsafe, the World Health Organization (WHO) reported.

And 90% of all unsafe abortions are performed in developing countries, where induced abortion is almost always restricted by law, according to the WHO report, entitled Abortion in the Developing World.

These unsafe abortions result in the deaths of 70,000 women annually, the report says, and "...more women survive the experience only to suffer throughout the rest of their lives from infertility, chronic morbidity and permanent physical impairment."

“For most women in the developing world...contraception would seem to offer a better fertility regulation option,” WHO officials say in a statement accompanying the report. But the report shows that induced abortion is still widely used, even in countries where good family planning services are available.

WHO calls for "...general improvement in the quality of reproductive health services as a way to reduce the recourse to abortion. There is an urgent need to make available a wider range of contraceptive methods to allow users a greater freedom to choose what suits their needs best.”

Men with leukemia advised to freeze sperm prior to chemotherapy

WESTPORT, CT - Sperm cryopreservation prior to chemotherapy allows male leukemia patients of reproductive age to preserve their fertility, researchers conclude.

Dr. Jorge Hallak and colleagues, of The Cleveland Clinic Foundation in Ohio, examined the effect of cryopreservation on the quality of sperm from 25 patients with acute or chronic leukemia and 50 healthy donors. Patient sperm samples were obtained before commencement of chemotherapy.

Leukemia patients had “...poorer prefreeze and postthaw semen quality...” than the controls, Dr. Hallak’s group reports in the May 1st issue of Cancer. The researchers also observed that “...sperm cryopreservation is more detrimental to these sperm than the sperm of healthy donors.”

However, the research team points out that, “...despite this impaired semen quality, these patients have sufficient sperm...” for use with intracytoplasmic sperm injection, which requires just one mobile sperm per ovum.

According to the results of previous studies, the team remarks, there is no increased risk of detectable chromosomal abnormalities in children of patients with chromosomal abnormalities in the malignant cell of origin.

“Sperm cryopreservation should be offered to all men of reproductive age before the initiation of therapy for leukemia,” the authors conclude.

They recommend that, to prevent potential ethical dilemmas, “[t]he patient’s informed consent should specify how the sperm and embryos that result from these sperm are to be used if he dies or becomes mentally incapacitated.”

Ethics panel rejects genetic testing for Alzheimer’s disease in most cases

WESTPORT, CT - A Stanford University biomedical ethics group has concluded that genetic testing for Alzheimer’s disease is not appropriate for most individuals. Its report appears in the May issue of Genetic Testing.

Dr. Barbara Koenig and colleagues, of the interdisciplinary Alzheimer Diseases Working Group of the Stanford Program in Genomics, Ethics, and Society, note that, theoretically, genetic test-
ing for Alzheimer’s disease would allow onset to be predicted in cases without a clear pattern of inheritance, and would confirm a diagnosis of Alzheimer’s disease once symptoms develop.

However, because of the indeterminacy of genetic tests, the ethics panel argues against the practice, except predictive and diagnostic genetic testing for high-penetrance mutations in individuals from high-risk families. In these cases, the panel emphasizes the need for well-trained genetic counselors and physicians to describe what is known about the disease and its progression.

“[Alzheimer’s disease] genetic testing of any sort is not appropriate at this time for children, fetuses, or embryos,” Dr. Koenig and colleagues add.

They note that a key ethical issue raised by genetic testing in general, and Alzheimer’s disease in particular, is the possibility that patients will misunderstand the results and assume that they will definitely develop an incurable disease.

“Using a genetic test to define and quantify uncertainty raises concerns that individuals and families will make significant life decisions based on a misunderstanding of risk estimates,” the bioethics group comments.

It adds that “...advertising and marketing of genetic tests for [Alzheimer’s disease] should be controlled to the same extent as advertising and marketing of prescription drugs.”

The authors note that whether genetic test results might place individuals at risk of denial of health insurance coverage is currently unresolved. They recommend further study but suggest that “[t]he use of genetic test results for a susceptibility gene, such as APOE, in underwriting decisions should be strongly discouraged.”

Time, not wine, accounts for France’s low heart disease mortality

WESTPORT, CT. - Two British researchers suggest that it is only a matter of time before heart disease mortality in France catches up with that in Britain, where it is about four times higher.

Drs. Malcolm Law and Nicholas Ward from St. Bartholomew’s and The Royal London School of Medicine and Dentistry, in London, England, argue that “...a time lag between the increase in serum cholesterol concentration and the full effect of the resulting increase in...risk of death from ischemic heart disease” accounts for the difference.

“[Animal fat consumption and serum cholesterol concentration have been similar in France and Britain for a relatively short time—about 15 years,” according to their report in the May 29th issue of the British Medical Journal. “Serum cholesterol concentration in 1970 was...lower in France than in Britain...and this explains most of its lower mortality from heart disease,” they write.

The authors discount other proposed explanations of the so-called French paradox. The high consumption of red wine in France, they argue, “explains [less than 5%] of the difference.” The tendency of French doctors to attribute heart disease deaths to other causes “...could account for about 20% of the difference,” according to the report.

On the other hand, they provide considerable statistical evidence to support their “time lag” theory. “Mortality from ischemic heart disease,” the authors write, “was strongly associated with past animal fat consumption...and past [serum cholesterol] values, but not with recent values.”

Several related commentaries question Law and Ward’s hypothesis. Drs. Meir Stampfer and Eric Rimm from Harvard University in Boston, Massachusetts write, “Obviously, other factors must play a role...We think it more likely that the difference in coronary mortality rests on behavioral (especially dietary) differences that have not received adequate attention.”

Dr. D. J. P. Barker from the University of Southampton, in England, writes that “...recent trends in coronary heart disease are only weakly related to trends in serum cholesterol,” and supports recent research that suggests that “...coronary heart disease originates in utero, through adaptations that the fetus makes to undernutrition.”

Finally, Drs. Johan P. Mackenback and Anton E. Kunst from Erasmus University in Rotterdam, the Netherlands, contend that “...heterogeneity of populations should be taken into account.” They suggest that the socioeconomic gradient is higher in Britain than France, and this may be related to the difference between the two countries in heart disease mortality.

Drs. Law and Ward write in response, “We believe that the time lag explanation is the major reason and that the alternative explanations offered in the commentaries are quantitatively unimportant.”

More Americans celebrating 100

NEW YORK, NY— As more and more Americans celebrate their hundredth birthday, US Census Bureau analysts suspect that the population of centenarians — as these triple digit individuals are known — will continue to grow in the next century.

Centenarians nearly doubled their numbers during the 1990s, from about 37,000 to 70,000, according to a Census Bureau report released Wednesday. And Census analysts expect this doubling-every decade trend in the 100+ population to continue, bringing the population to 834,000 by mid-next century.

Currently, 78% of centenarians are white, a percentage that is expected to decrease to 55% by 2050, while the percentage of Hispanic centenarians grows from 5.6% to about 20%, and the percentage of Asian and Pacific Islander centenarians grows from about 3% to 11%. Blacks are expected to remain at 13% of the centenarian population. Four out of five centenarians are currently women, and analysts predict this male-female gap will remain until the mid-21st century.

According to a press statement issued by the National Institute on Aging, which funded the study, the US had 120 centenarians per 10,000 people aged 85 and older. This may be the highest proportion in the world, however the researchers note that this comparison can only be made among countries with good quality data. But the finding “is in line with research that life expectancy after 80 is higher in the US than in a number of other developed countries.”

“The growing numbers of extremely old people give us the opportunity to examine their lives in more detail,” said Dr. Richard M. Suzman, associate director of Behavioral and Social Research at the National Institute on Aging.

“By doing so, we will be able to discover the genetic, medical, social, and behavioral factors contributing to longevity and robustness in very advanced age,” he added in a statement.