Study Finds Americans Much Less Healthy Than the English

BY MARY ANN MOON Contributing Writer

A
mericans are much less healthy than their British counterparts, at all levels of socioeconomic status, reported James Banks, Ph.D., of University College, London, and his associates.

In both countries, people with the highest levels of education and income are the healthiest, while those of low education and income are the unhealthiest. But the overall differences in health status between the two countries is so profound that the wealthiest Americans have comparable rates of diabetes and heart disease to people at the lowest levels of education and income in England.

Dr. Banks and his associates compared rates of seven major diagnoses among populations of comparable socioeconomic positions in nationally representative samples from the United States and England. To minimize the effects of racial and age differences between the populations, they restricted their study to only non-Hispanic white men and women aged 55-64 years.

The analysis included health-related data on 2,097 Americans and 5,526 British subjects. All were interviewed in 2002 and underwent physical examinations that included laboratory tests to verify their self-report of conditions such as diabetes.

Overall, Americans were more likely to have diabetes, hypertension, heart disease, a history of myocardial infarction or stroke, lung disease, and cancer than British subjects. Diabetes prevalence was twice as high in the United States (13%) as it was in England (6%), the rate of hypertension was nearly 9% higher, and the rate of heart disease was almost 6% higher, the investigators said (JAMA 2006;295:3095-104).

Regarding markers of future cardiovascular risk, 40% of Americans had high levels of C-reactive protein and 24% had high levels of fibrinogen, compared with 30% and 10%, respectively, among the British participants. Similarly, only 28% of Americans had heart health levels of HDL cholesterol, compared with 44% of the European comparison group.

The study was not designed to explain the reasons underlying the large discrepancy in health status between England and the United States, and the investigators did not apply potential policy or intervention models. However, they were able to rule out possible causes. The discrepancy did not suggest any level of impairment.

The results indicated that use of alcohol-containing hand wash can influence the EtG test, and the primary means appears to be inhalation, Dr. Liepman said. Recovering alcoholics, including those who are subject to urine monitoring, should avoid the use of alcohol-based hand sanitizer,” he said.

Dr. Liepman was motivated to perform the experiment because two nurses in his practice, both of whom were recovering opiate addicts and both of whom were pregnant, had tested positive for ethyl glucuronide and violated their recovery employment contracts. He said both were suspended for 1 month, just at the time they needed to be accumulating vacation hours so they could take time off for the birth of their babies.

Both denied drinking, neither tested positive for any other drugs, and both were doing well drug free.

One nurse measured 270 ng/mL on the EtG test, while the other measured 215 ng/mL, levels that might be considered fairly low for a substance abuser who has fallen off the wagon, since two drinks can produce a level of 23,000 ng/mL, Dr. Liepman said.

Both nurses reported washing their hands with sanitizer on the job upward of 30 times a day, a frequency that might explain why, among health care workers, so many of those who have been tripped up by the test have been nurses.

In the laboratory, Dr. Skipper has found that two nonalcoholic beers can cause a level of 93 ng/mL and gargling with Listerine can trigger a level of 100 ng/mL.

Alcohol Test May Be Condemning the Abstinent

BY TIMOTHY F. KIRIN Sacramento Bureau

San Diego — Nancy Clark, a registered nurse, had been drug-free and sober for 3 years when she tested positive for alcohol on the new ethyl glucuronide test, the same one used for many chemically dependent physicians who are entered into monitoring programs and are on probation.

She kept her job the first time, but then she tested positive again—and lost it.

So Ms. Clark bought a plane ticket. She flew almost 3,000 miles from Pennsylvania to San Diego to meet with the one person she thought might be able to help her and others in her situation: Dr. Greg Skipper.

"When I tested positive, I looked on the Internet, and everything I saw said this test was perfect," said Ms. Clark of Fleetwood, Penn. Ms. Skipper was the meeting where she met with Dr. Skipper—the annual conference of the American Society of Addiction Medicine.

"I thought, How am I ever going to be able to protest this?" she said.

Recent evidence, however, suggests that while the test may be highly accurate and sensitive, it may also be fallible, said Dr. Skipper, who helped develop ethyl glucuronide (EtG) as a drug test to monitor adherence to only non-Hispanic white men and women aged 55-64 years.

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