

remains as for common clinical radiographs. Thus, if a skull was present, a paranasal sinus series and a skull series would be completed. Mastoid air cells and frontal sinuses have extraordinary variability and are excellent sources of X-ray matching. As views of the chest, wrist, ankle, cervical and lumbar spine are common, these were completed when possible. The scout scoliosis films often demonstrated unexpected findings, such as osseous structures from more than one victim. These were separated appropriately.

A group of psychiatrists, psychologists and social workers sent from NMCS D made up the U.S. Naval sprint team sent to provide psychological support. They were critical to help our teams working full time. They met with each individual at least once every three shifts and with the entire team as a group daily. We followed their advice to take short breaks every two hours, change our clothes before going home, refrain from eating in the warehouse and to look out for each other. To date, no team member has reported difficulty working or sleeping, nightmares, or other signs indicative of lasting adverse emotional consequences of the work completed. We X-rayed every single remain brought to the morgue. Even the smallest fragments were examined with an attempt to identify anatomic origin. The anthropologists would further examine the remains and not infrequently would ask for additional views of individual bones known to aid in age estimation. As explained to us, all efforts were to be made at identifying the remains including DNA testing of all remains not otherwise positively matched with a victim.

Several weeks later our job was complete. The Radiology team was made up of members from many different commands around the Pacific Rim. All became quickly focused on expediently and expertly doing everything we could to unite victim's remains with loved ones. This maintained the esprit of the teams quite high throughout. Many attributed the success of arduous work at the morgue site to military readiness training and attention to the preventive measures recommended by the NMCS D sprint team. We were proud to learn that many of our exams had been critical in identification of remains.

Major Berg is a Staff Radiologist assigned to U.S. Naval Hospital, Guam.



## Book Reviews

**All Stings Considered  
First Aid and Medical Treatment of  
Hawaii's Marine Injuries  
Craig Thomas MD and Susan Scott**

**Reviewed by Norman Goldstein MD**

Craig Thomas MD, an emergency room physician, and Susan Scott, a registered nurse and marine science writer, have created a superb book in *All Stings Considered*. Their years of clinical experience and their participation in activities on, under, and around Hawaii's waters make them the authorities on marine injuries in Hawaii.

This compendium, well researched and well written, is easy for

the general reader to understand and will be a handy reference for all water enthusiasts. It is also an excellent medical text for the health professional. No other book specifically addresses the Hawaii aquatic environment. The many articles on specific marine injuries that exist in the medical literature are difficult for the lay reader to obtain and understand.

Every emergency room and poison control center should have a copy of this book at hand. Paddling, sailing, and swimming clubs, along with high school and college athletic coaches, will use it for accident prevention and quick treatment. First responders, emergency physicians and staff, pediatricians, family practitioners, internists, and dermatologists will find it valuable as a speedy reference.

In their first joint publication effort, the authors have compiled a wealth of marine information.

**Editor's Note:** This is a must-have and must read for every health professional in Hawaii.

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**The Honolulu Heart Program,  
An Epidemiology Study of Coronary Heart Disease  
and Stroke**

**Reviewed by Roger L. White MD  
Department of Cardiology  
Straub Clinic & Hospital**

It is my pleasure to review and recommend strongly the newly published book, **The Honolulu Heart Program, An Epidemiological Study of Coronary Heart Disease and Stroke** as edited by *Dr Abraham Kagan*. The Honolulu Heart Program study has gained international recognition over the past 30 years for its thorough and ongoing research and has become probably the second most frequently quoted study to the Framingham study on coronary artery disease from Massachusetts. As a practicing cardiologist in Honolulu, I have had many patients who have been enrolled in this study, as I am sure most clinicians in our community have been touched one way or another by this study. I have heard many of the authors speak at conferences over the years, and it is a pleasure to have the data all in one place in a book form. It is much welcomed.

The book is edited by Dr Abraham Kagan who has coordinated the efforts of 13 contributing editors. It is 204 pages, well organized and very readable. The Honolulu Heart Program has followed the epidemiology of coronary heart disease and stroke in 3,006 Hawaiian men of Japanese background for more than three decades. This is a monumental task of organization and persistence, and has yielded some very valuable data which we can all translate into our day-to-day care of patients in the prevention of heart attack and stroke. The most significant conclusion from this study was to confirm a gradient in coronary heart disease prevalence, incidence in mortality among Japanese males living in Japan, Honolulu and California, with the highest incidence of coronary artery disease being in California, the lowest in Japan, and moderate in Hawaii. The correlation with changes in diet and lifestyle with increased Westernization correlates very well. There is also confirmed a reverse gradient for the prevalence of stroke from the same three

sites, with the highest incidence of stroke being in Japan, and a lower incidence in Hawaii. The importance of these studies and the influence of diet with increasing fat content, increasing myocardial infarction cannot be underestimated.

The chapters in the book are well organized and review lipoprotein study analysis, hypertension, coronary heart disease, stroke, pathology, mortality rates, recent review of data, and looking to the future with regards to aging and dementia. The bibliography for each chapter is complete and helpful. The Honolulu Heart Program has had several firsts in the epidemiology of heart disease. Some of these include the inverse relationship between alcohol and coronary artery disease, for which we can all be grateful in justifying one to two small drinks a day to prevent heart attacks (albeit, unfortunately the rates of hemorrhagic stroke, cancer and mortality increase with increased alcohol). Also, another first in The Honolulu Heart Program was to show the inverse risk factor relationship between HDL cholesterol, in that the higher the HDL level, the lower the risk of coronary atherosclerosis. This is particularly well documented in the chapter on Pathological Correlations by Dr Grant Stemmerman where he reviews the autopsy studies on 288 men involved in the study. The Honolulu Heart Program is also the first to document a correlation between a stressful lifestyle and what we call type A behavior, and increased incidence of coronary artery disease.

I feel that this book should be on the bookshelf of every cardiologist, internist and family practitioner in Hawaii. It is unique to the region that the study as important on an international basis. This study helps lay the foundation for future epidemiologic studies of different ethnic groups, gender, lifestyle, diet and exercise programs in the prevention of coronary heart disease and stroke. As an example, we already know that although coronary heart disease is less common in women, its prevalence increases as women get older, and women are more likely to have a fatal myocardial infarction than men. Also, as our population ages, the effects of aging and dementia will be very important to study to look at epidemiologic factors which may, if prevented, improve the quality of life. Hawaii represents a unique community whereby different ethnic groups and diet can be evaluated. As we move into the next century, we are truly becoming a world community in the informational age, and by doing epidemiologic studies one can better understand a disease process, so that in the future better prevention can be done. The Honolulu Heart Program has been a cornerstone and basis for future studies.

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