

## Take Care New York's New Health Program; Old Diseases

by Sue Young Wilson

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The New York City health department has announced the most detailed and comprehensive health policy ever developed for the city. Called "Take Care New York," the ambitious, four-year plan sets goals and activities in 10 health areas the department believes will have the most impact on improving the health of New Yorkers. The 10 areas were chosen because they address the leading causes of illness and death in the city considered preventable (such as heart disease, smoking, excessive drinking, and cancer) - what city health commissioner Dr. Thomas R. Frieden called "our most important and winnable health battles." The city claims that successful implementation of the new policy will save thousands of New Yorkers' lives and prevent hundreds of thousands of illnesses each year.

The program makes 10 top recommendations to New Yorkers to improve their health:

1. Have a regular doctor or other health care provider
2. Be tobacco-free
3. Keep your heart healthy
4. Know your HIV status
5. Get help for depression
6. Live free of dependence on alcohol and drugs
7. Get checked for cancer
8. Get the immunizations you need
9. Make your home safe and healthy
10. Have a healthy baby

Some of the targets for 2008 the city says it plans to hit include:

- ~ Reducing the number of adult smokers by 240,000, preventing 80,000 premature deaths;
- ~ Decreasing the number of HIV/AIDS-related deaths by 42 percent, preventing more than 700 deaths every year;
- ~ Increasing by 200,000 the number of New Yorkers 50 and older who are screened for colon cancer, preventing at least 200 colon cancer deaths per year;
- ~ increasing the percentage of women 40 and older who receive regular mammograms from 77 percent to 85 percent;
- ~ A two-thirds decrease in the number of children under six with potentially dangerous blood-lead levels caused by environmental lead hazards; and
- ~ Increasing by 150,000 the number of New Yorkers 65 and older who get an annual flu shot, resulting in 1,000 fewer deaths during flu season each year.

There will obviously be price tags for many of the plans mentioned, such as the city's printing and distributing many more informational brochures and expanding or creating programs such as testing for AIDS, giving away condoms, creating an Internet registry of children's immunization histories, and providing smokers with free nicotine patches to help them quit. The city has not yet given out an estimate of the total cost of the program or details on how it will be funded.

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This huge public health undertaking is the most ambitious that New York, even with its long history of pioneering public health programs, has ever attempted, and a broader and more aggressive program than any other city's in America.

One can view a booklet laying out the basics of the recommendations in at the city health department's web site; or [download it as a PDF file](#). Those interested in the health department's formal, 64-page policy paper, which sets forth the goals, recommendations, benchmarks, rationales for focusing on the areas it does, current leading causes of preventable deaths and illnesses among New Yorkers, and funding and progress-evaluation issues, can also download it as a PDF file from the department's web site.)

### Increases in Syphilis and Tuberculosis

Both syphilis and tuberculosis, infectious diseases against which the city had made great headway in past decades, are on the rise. Although curable with antibiotics, both diseases are quite dangerous if left untreated; and both are contagious, although infection is preventable. New York seemed to be achieving a clear victory over [the sexually-transmitted disease syphilis](#) in the late 1980's and the 1990's, with cases dropping from a high of 5,000 cases in 1988 to just 82 in 1998. A bacterial rather than a viral infection, syphilis can, after all, be cured with a single shot of penicillin if caught in its early stages. However, an alarming resurgence of the disease has taken place in New York in the past few years. Shockingly, there was a nearly threefold increase in cases just between 2000 and 2002. The figures for 2003 show the increase has continued, although at a slightly slower pace: a 22 percent increase between 2002 and 2003. New York City's total rate of the disease in 2002 was 5.4 cases per 100,000 persons, or more than twice the national rate. This disparity may well be because the new epidemic is primarily affecting gay and bisexual men (and white men living in Manhattan). More than 95 percent of reported cases in recent years have been among men; in a 2002 study, 80 percent of them reported male sex partners.

What is most alarming is that having syphilis increases the chances that one will get HIV -- by up to five-fold, according to Dr. Susan Blank, the city's Assistant Commissioner for [Sexually Transmitted Disease Control](#)

. Meanwhile, syphilis also makes a person with HIV much more infectious to their sexual partner(s), presumably because in its early stages syphilis often causes painless open sores, mainly on or in the genitalia or anus, but also known to occur on the lips, inside the mouth, as a rash on the hands, or indeed on any skin exposed during sex. Their painlessness may cause them to go unnoticed by the infected person. Having HIV also makes it more likely that one will get syphilis. According to Blank, when the city conducted interviews of syphilis patients at city STD (sexually transmitted disease) clinics, the men with syphilis who also knew their HIV status reported a more than 50 percent rate of HIV. Indeed, a 2002 study conducted by the health department along with the U.S. Centers for Disease Control and another research group found that having HIV was the number one risk factor for getting syphilis.

To try to break this deadly, spiraling dance between the two diseases, the city has extended

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the hours of its 10 free, confidential STD clinics, which are located in all five boroughs. (Click on the link for clinic locations, hours, and other information). Even aside from the grim HIV-syphilis synergy, it is crucial that those who have syphilis learn that they are infected, because the disease is easy to treat in early stages with antibiotics, but if left untreated can gradually play havoc with various organ systems, including the brain, cause serious health damage, and end in death. Many times syphilis presents few symptoms, at least initially, so a blood test is a good idea.

The city and gay men's health groups are continuing educational outreach efforts to the male gay and bisexual population. The health department is also developing programs to further educate health-care providers about the disease. Syphilis can be spread by vaginal, anal, or oral sex, or by kissing if there are sores in the mouth.

Meanwhile, the city also released preliminary data in March that cases of [tuberculosis](#) in New York had increased five percent from 2002 to 2003. While not large, it is the first increase in a decade mostly marked by reliable decreases in the TB rates. (New York City's TB rate remains three times higher than the national average, however.)

According to city health commissioner Dr. Thomas R. Frieden, the increase is part of the current global TB epidemic. Sixty-seven percent of diagnosed cases were among foreign-born New Yorkers, whom city officials say might well have been infected in other countries. Another 8 percent were among homeless people. Frieden urged New Yorkers to get screenings and treatment at city hospitals and clinics. The city provides free, confidential treatment for TB at [its 11 "chest centers"](#) around the five boroughs.

Left untreated, TB can ravage a patient's lungs and other organs. On a more optimistic note, the cases of tuberculosis resistant to treatment with multiple drugs continued a decade of decrease. There were 21 in 2003 compared to 27 in 2002, contributing to a total decrease of more than 95 percent since 1992. These multi-drug-resistant cases of TB can take three to four times as long to treat as conventional TB. The rest of the world apparently has not been so lucky; [a recent New York Times article](#) cited a World Health Organization survey estimating there may be as many as 300,000 new cases of drug-resistant tuberculosis a year in the world, particularly in underdeveloped countries. The Times article noted that drug-resistant cases are more common in moderately poor countries where patients receive inadequate treatment (a course of treatment for TB in the U.S. is lengthy, with patients required to take various pills for six months or more, often under direct supervision to make sure they don't stop too soon or skip days, which might allow the growth of drug-resistant bacteria).

One can acquire tuberculosis by breathing in bacteria in air that is contaminated by someone with active, untreated tuberculosis in the lungs. Luckily, it is rather hard to catch, requiring "prolonged, direct contact" with an infected person, according to the health department. It cannot be spread by sharing utensils, or casual contact.

Sue Wilson is a journalist who writes frequently on health and science topics for such outlets as the New York Times, WNET, and UNICEF