

## DEMOCRATS: MCCONNELL FIX FOR MINERS' HEALTH CARE INADEQUATE

**WASHINGTON:** Senate Democrats on Tuesday blasted a proposal by Senate Majority Leader Mitch McConnell to temporarily protect health care benefits for thousands of retired coal miners.

The benefits are set to expire at the end of the year, and McConnell said he is working with House Speaker Paul Ryan to include money for the miners in a short-term spending bill slated for a vote this week. But Democrats said the GOP solution only lasts for a few months and does not protect pension benefits that also are at risk. McConnell's proposal would pay for miners' health care for the next four months by seizing money from their current health-care plan, Democrats said.

"The Republican leader is turning his back on American coal miners," said Sen. Sherrod Brown, D-Ohio. Brown and other Democrats said they will

push for a bipartisan bill that would protect retirement and health-care benefits for about 120,000 retired coal miners and their families.

### Vote blocking

Republicans have blocked a vote on the bill on the Senate floor. McConnell and other GOP leaders are wary of bailing out unionized workers, with some arguing that all coal miners should get the help. Some Republicans also say the bill could pressure Congress to offer similar help to other cash-strapped pension funds. Their opposition was criticized by Brown and other Democrats. "We had the chance to protect the retirement and health care coal miners have earned and save taxpayers money in the process, but Washington leaders chose to pull a bait and switch instead,"

Brown said. "This is everything that's wrong with Washington."

Sen. Joe Manchin, D-W.Va., said he would block other bills on the Senate floor until miners get their full health care and pension money - about \$3 billion over the next 10 years. Manchin warned colleagues they may have to stay through Christmas unless the issue is resolved.

In a speech on the Senate floor, Manchin said retired miners deserve benefits that are now at risk amid the coal industry's steep decline and bankruptcies of several large mining companies. Without congressional intervention, some of the funds could run out of cash by next year, according to the United Mine Workers of America. "We are the country that we are because of the hard work that they've done," Manchin said, referring to

miners in his state and across Appalachia. "If we don't stand for the people that have made our country as great as it is, we stand for nothing," Manchin said.

McConnell said his plan would protect benefits for miners suffering from what he called the Obama administration's "war on coal," combined with "challenges within the energy market (that) have led to a dramatic increase in bankruptcies and lost coal jobs, exhausting the health benefits of thousands of coal workers and retirees."

While he recognizes the plan "will not solve the challenges of every coal miner or retiree in Kentucky, this provision will help address many of the health care needs of thousands of miners who fell victim to the steep downturn in coal production," McConnell said. — AP



**ATLANTA:** In this Thursday, Nov 10, 2016 photo, CDC workers look through microscopes at as an image of a skin biopsy is displayed on a screen at the Centers for Disease Control and Prevention. —AP

## GOALS MISSED ON OBESITY, FOOD POISONING, DESPITE GOVT PUSH

### A FRANK SELF-ASSESSMENT

**NEW YORK:** Progress in the US against obesity, food poisoning, and infections spread in hospitals has been uneven and disappointing, despite dedicated efforts to fight these health threats by the nation's top public health agency.

The Centers for Disease Control and Prevention issued a frank self-assessment Monday of its campaign to focus on certain health problems, an effort it called "winnable battles." While there have been clear successes in areas like smoking and teen pregnancy, other areas have seen little change or even gotten worse.

Particularly disappointing is the battle against childhood obesity, said Dr. Tom Frieden, the CDC's director. "The data speak for themselves," Frieden said of the obesity statistics. "If you look for the goal we set for ourselves, and look at what happened, we didn't achieve it."

Frieden set a list of priorities he called "winnable battles" shortly after he was named to lead the CDC in 2009. The list included smoking, AIDS, obesity and nutrition, teen pregnancy, auto injuries and health care infections. It later grew to include food poisoning.

On Monday, the agency released what it described as its third and final report card on the campaign. Frieden is expected to leave office

next month, as the Trump administration takes control of federal agencies and appoints its own administrators.

The most clear-cut progress was in cigarette smoking and teen pregnancy. Last year, national goals were met for reducing adult smoking by more than 17 percent, and youth smoking by 12 percent. The goal of cutting the teen birth rate by 20 percent was also met.

Critics argued that those were relatively easy goals - smoking and teen pregnancy rates were already trending down before Frieden arrived. But Frieden argued that the goals his agency set were ambitious and never assured.

Another goal once considered within easy reach was the reduction of car crash deaths by 31 percent by 2015. Earlier in this decade those deaths were plummeting and the goal seemed well within reach. But crash deaths only fell 21 percent because of a recent uptick, which many attribute to distracted driving.

### The report card also found:

Disappointing results in meeting two food safety goals. Rates of illness from harmful E. coli bacteria dropped, but didn't reach the goal of a 29 percent reduction goal. And illness rates from salmonella increased.

Mixed progress on cutting down infections spread in hospitals and medical clinics. Three kinds of infections declined. They haven't yet hit target levels, but there's some hope they will when more data are available. And rates for certain urinary tract infections didn't fall at all.

Inability to reduce the number of new HIV cases by 25 percent. The number of new cases fell by 18 percent. Failure to reduce obesity rates for toddlers and older children. Instead, the rate grew slightly, to more than 17 percent. Despite the mixed grades in the CDC's report card on itself, some experts applauded CDC efforts, saying the agency had only limited abilities to prevent illness or stop people from doing things that hurt their own health. "I think, to CDC's credit, they picked a broad range of public health challenges and they set the bar high enough that they could not automatically declare success at the end of an administration," said Jeff Levi, a George Washington University professor of health management and policy.

The Atlanta-based CDC has an annual budget of more than \$13 billion and a staff of more than 15,000. Much of its funding is distributed to state and local health departments, and many of them follow the CDC's agenda-setting lead. —AP

## CLEAN COOKSTOVES FAIL TO CURB PNEUMONIA IN KIDS: STUDY

**PARIS:** Disappointed researchers reported yesterday that a two-year trial in rural sub-Saharan Africa showed clean-burning indoor cookstoves did not reduce cases of pneumonia in young children, as hoped.

Investigators and health advocates had expected that closed stoves rather than smoke-producing open fires would dramatically curb health problems linked with household air pollution. The World Health Organization (WHO) estimates that indoor air pollution-notably soot and other fine particles-kills more than four million people every year around the world, mostly in Africa.

Young children are thought to be especially vulnerable. In Malawi, pneumonia is the leading cause of death among under five-year-olds. For the experiment, the families of more than 10,000 very young children in villages across two districts in Malawi were divided into two groups.

One continued using traditional, open-fire wood- or dung-burning stoves for cooking and heating for the duration of the two-year experiment. Families in the other group were given clean-burning cookstoves that also used biomass-organic matter derived from animals or plants. "There had been the assumption that the use of cleaner cookstoves will bring about health benefits and save lives," said lead investigator Kevin Mortimer of the Liverpool School of Tropical Medicine.

But the new stoves had "no effect on the incidence of pneumonia" in the children, the researchers concluded. Published in *The Lancet*, the study did show that children living in the clean stove homes had 42 percent fewer burns than their counterparts in the other group. "The reductions in burn-related injuries is encouraging from a safety perspective," Mortimer said. —AFP

## JAPAN MERCURY-POISONING VICTIMS DEMAND TESTS, 60 YEARS LATER

**TOKYO:** Six decades after "Minamata disease" mercury poisoning was first discovered, victims and their advocates are demanding tests for food toxicity and illnesses be carried out to help identify patients.

Such tests could have greatly reduced the number of victims if done earlier, said Toshihiro Tsuda, a doctor whose civil lawsuit demanding such tests was rejected by the Tokyo District Court yesterday. Tsuda sued the Japanese government to demand it conduct tests for methyl mercury poisoning. He vowed to appeal the court's decision backing the government, which generally has chosen not to conduct such tests.

Minamata disease, one of Japan's worst environmental disasters, refers to mercury poisoning from eating fish and shellfish. Thousands of people were sickened or crippled by neurological disorders from the mercury leaks into Minamata Bay and nearby waters by chemical company Chisso Corp., which continued for more than a decade. Affected babies were born with severe deformities.

Advocates of the victims have been trying since 1956 for the right to demand such tests, which can only be mandated by the government. Tsuda contends there would have been far fewer Minamata victims if tests had been done right away. Even today, such tests could help identify people suffering from high mercury levels, he says.

Japanese law requires routine and meticulous testing for food poisoning. But such testing is only conducted when the government deems it necessary. That often has been the case in smaller food poisoning incidents. The requirement that the government order such tests is a "legal loophole," said Tsuda. "If this is allowed, it means the government can do whatever it wants - or rather not have to do anything at all," he told reporters after the ruling.



**TOKYO:** Plaintiff Toshihiro Tsuda, a doctor and Okayama University professor, attends the press conference yesterday. — AP

## MANY SMARTPHONE HEALTH APPS DON'T FLAG DANGER, SAYS REVIEW

**NEW YORK:** Don't count on smartphone health apps in an emergency: A review shows many don't warn when you're in danger. The study published Monday in the journal *Health Affairs* found problems even with apps considered to be among the highest-quality offerings on the market.

There's been a proliferation of health apps for mobile phones. According to the IMS Institute for Healthcare Informatics, there are more than 165,000 health apps out there. "The state of health apps is even worse than we thought," said Dr. James Madara, chief executive of the American Medical Association, who was not involved in the study.

This wasn't a survey of step-counting fitness apps. The research team reviewed 137 apps designed for patients with serious ongoing health problems, including asthma, cancer, diabetes, heart disease, and depression.

The health apps, for example, help those with diabetes track and record every blood sugar reading and insulin injection. One invites users to photograph their moles, and offers analysis on whether they are changing in a way that signals skin cancer.

The study suggests that, though some apps are good, there are problems. Perhaps most concerning was what happened when doctor reviewers

entered information that should have drawn warnings from the app - like selecting "yes" when the app asked if the user was feeling suicidal, or entering extremely abnormal levels for blood sugar levels.

Only 28 of 121 apps responded appropriately to such red-flag information, researchers said. Health apps "should have some common-sense standards," said lead author Dr. Karandeep Singh, a University of Michigan internist. "The vast majority of apps do not have any kind of response."

### Medical privacy

Another issue is the safeguarding of medical privacy. While patients commonly enter health information into apps, a lot of the information is shared through insecure methods like text message or emailing, the researchers said.

The reviewed apps came from Apple iTunes and Google Play app stores - most of them free. Each app was reviewed by a doctor and a tech expert. The researchers named most of the apps but didn't publish their reviews. Instead, they shared them with the app companies. Singh said they were interested in "identifying gaps that need to be filled" instead of naming winners and losers. Overall, the industry needs to do more work to improve safety and privacy, he said. —AP

## SCIENTISTS DEVELOP ROBOTIC HAND FOR PEOPLE WITH QUADRIPLEGIA

**BERLIN:** Scientists have developed a mind-controlled robotic hand that allows people with certain types of spinal injuries to perform everyday tasks such as using a fork or drinking from a cup. The low-cost device was tested in Spain on six people with quadriplegia affecting their ability to grasp or manipulate objects.

By wearing a cap that measures electric brain activity and eye movement the users were able to send signals to a tablet computer that controlled the glove-like device attached to their hand.

Participants in the small-scale study were able to perform daily activities better with the robotic hand than without, according to results published Tuesday in the journal *Science Robotics*.

The principle of using brain-controlled robotic aids to assist people with quadriplegia isn't new. But many existing systems require implants, which can cause health problems, or use wet gel to transmit signals from the scalp to the electrodes. The gel needs to be washed out of the user's hair afterward, making it impractical in daily life. "The participants, who had previously expressed difficulty in performing everyday tasks without assistance, rated the system as reliable and practical, and did not indicate any discomfort during or after use," the researchers said.

### How to use the system

It took participants just 10 minutes to learn how to use the system before they were able to

carry out tasks such as picking up potato chips or signing a document. According to Surjo R. Soekadar, a neuroscientist at the University Hospital Tuebingen in Germany and lead author

of the study, participants represented typical people with high spinal cord injuries, meaning they were able to move their shoulders but not their fingers. — AP



**BADALONA, Spain:** In this undated grab taken from video, a patient uses a robotic hand to drink from a cup. —AP