

FEDERAL NEWS WEEKLY SUMMARY CONTINUED



reaches the marketplace, Dr. Kasper says that the conjugate vaccine developed by his group provides a blueprint for subsequent vaccines.

"We're definitely headed in the right direction," he says. "This is a prototype of what Group B strep vaccines will look like."

—NATIONAL INSTITUTES OF HEALTH
11/25/96

PROSTATE CANCER GENE LOCATION FOUND ON CHROMOSOME 1

■(BETHESDA, MD) Researchers at the National Center for Human Genome Research (NCHGR), Johns Hopkins University (JHU) and Umea University, Umea, Sweden, have identified the location of the first major gene that predisposes men to prostate cancer. The gene, named HPC-1 (hereditary prostate cancer 1) by the researchers, is situated on the long arm of chromosome 1. The finding, to be published in the Nov. 22 issue of the journal *Science*, is the first proof that genes conferring hereditary predisposition to prostate cancer exist.

Scientists discovered the gene location through an international study involving 91 families in which at least three members suffered from prostate cancer. The region implicated represents about 0.3 percent of the human genome and will now be the subject of intense scrutiny to identify the gene responsible. Once the HPC-1 gene itself is identified, it is expected to shed light on how and why prostate cancer develops and also suggest strategies for preventing and treating it.

Although the disease has been known to run in families, genetic analyses of prostate cancer have been difficult. In the United States, men stand a one-in-five chance of developing prostate cancer; the most common malignancy among men and the cause of more than 40,000 deaths annually. That indicates many different factors, genetic and environmental, may contribute to the disease.

Approximately 1 in every 500 men is believed to possess an altered version of the gene. The researchers estimate that alterations in the HPC-1 gene are responsible for at least a third of familial prostate cancer. Familial prostate cancer accounts for about 1 in 10 cases of the disease, while the numbers for the early onset form of the disease are somewhat higher.

Development of a susceptibility test is still several steps away, requiring at a mini-

mum the identification of the HPC-1 gene itself, according to NCHGR Director Dr. Francis Collins. "In the future," says Collins, "combining genetic susceptibility testing with testing for prostate-specific antigen and other early detection measures will be potentially of value in preventing deaths from this common disorder."

The study focused first on analyzing data and tissue samples from 66 high-risk American families collected by Johns Hopkins researchers. Most of the families were recruited through letters from urologists, and some were identified through media advertisements. At NCHGR, a genome-wide scan of DNA from these families indicated a gene on chromosome 1. The site was confirmed by analyzing DNA from an additional 13 high-risk American families and 12 high-risk families studied by scientists at Umea University.

Hopkins researchers are asking individuals from families in which three or more close relatives have had prostate cancer and who wish to participate in a research study on the genetics of that disease to contact the study team at (410) 614-5434, or write to Dr. Patrick C. Walsh, Hereditary Prostate Cancer Study, Dept. W., Brady Urological Institute, Johns Hopkins University Hospital, Baltimore, MD 21287.

For more information about prostate cancer, call the Cancer Information Service at 1-800-4-CANCER.

—NATIONAL CENTER FOR HUMAN
GENOME RESEARCH
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SMALL INVESTMENTS IN HEALTH CARE YIELD BIG PAYOFFS

■(WASHINGTON) Health and Human Services Deputy Secretary Kevin L. Thurm on Monday named five innovative local health programs "Models That Work" for providing better, lower cost health care for people with few options, and for a positive economic and social impact on communities.

"A disposition to preserve, and an ability to improve, taken together, would be my standard of a statesman."

Edmund Burke
Reflections on the Revolution in
France
1790

The HHS Models That Work campaign—a public/private sector partnership that promotes replication of grassroots programs — identified the five projects in El Paso, Texas; Los Angeles, CA, Philadelphia, PA; Tampa, FL; and Monroe, MI, for showcasing and replicating in other communities. The replication success of 1995 Models in East St. Louis, IL, and Vista, CA, were also featured.

Applying innovative solutions to tough problems, doctors, nurses and community health care workers are providing care in public housing, migrant farmworker camps and poor rural communities. Successes include fewer emergency room visits; higher childhood immunization rates; better informed and educated individuals, families and health care workers; help for homeless youth; and volunteer and paid jobs for community workers.

Some 41 million Americans—most of them in working families — have no health insurance. Additionally, cultural, geographic and language barriers block access to basic health care for many individuals and families. They postpone or forego needed care, miss time at work or school, and end up caught in a vicious cycle of poor health and lost productivity.

More than 250 local programs competed in this year's Models That Work competition. The winners, selected for innovation, effectiveness, community involvement and replicability, are:

Tampa, FL, Hillsborough County Health Care Plan: Has enrolled 27,000 poor and uninsured county residents in its own version of managed care. The plan has seen its members' hospital admissions drop 28 percent, hospital stays decrease 40 percent and per person health care cost plummet 61 percent. Hillsborough County estimates it has saved \$6 million by diverting 8,000 emergency room visits to outpatient primary care.

El Paso, Texas, Project Vida: Provides primary health care, education and social services to poor, uninsured, predominately Hispanic people and families. Recruits patients to become volunteer or salaried community health workers. Project estimates it saves the local health system \$150,000 annually in uncompensated and unnecessary emergency room visits.

Los Angeles, CA, Los Angeles Free Clinic Hollywood Center: Reaches out to

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