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ONLINE DATABASES

Did you know that you can access a variety of databases via the library's web site at <http://library.psc.gov> . These databases include: **AgeLine, Allied and Complementary Medicine, Bibliography of Native North Americans, Books in Print with Reviews, Cumulative Index to Nursing and Allied Health Literature, Econlit, Education Resources Information Center, Medline, PsycINFO, Readers' Guide Abstracts, Sociological Abstracts, Ulrich's Periodicals Directory, and Wilson Business Abstracts.** If you are one of our primary clients (see below) and are asked for a user name and password, please send an e-mail to refdesk@psc.gov and include the following information in the message field: your name, agency, HHS e-mail address, phone number and that you are requesting access to the online databases. You may also call the Reference Desk at 301-443-2673. All other users (as well as our primary clients) may access these databases via workstations in the library. In this case, you will need a user name and password.

- Administration for Children and Families
- Administration on Aging
- Agency for Healthcare Research and Quality
- HHS Regions
- Health Resources and Services Administration
- Indian Health Service
- National Center for Health Statistics
- National Institute of Mental Health
- National Institute on Drug Abuse
- Office of Public Health and Science
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- Program Support Center
- Substance Abuse and Mental Health Services Administration

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BENIGN PROSTATIC HYPERPLASIA

Benign prostatic hyperplasia (BPH) is a non-metastatic enlargement of the prostate gland that begins normally after age 50. AHRQ has recently funded a study that found that physical exercise may reduce the risk of BPH.

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3. Chow RD. **Benign prostatic hyperplasia: patient evaluation and relief of obstructive symptoms.** *Geriatrics* 56 (3):33-8, Mar 2001.
4. Eckhardt MD, et al. **Symptoms and quality of life versus age, prostate volume, and urodynamic parameters in 565 strictly selected men with lower urinary tract symptoms suggestive of benign prostatic hyperplasia.** *Urology* 57 (4):695-700, Apr 2001.
5. Garnett S, et al. **Managing benign prostatic hyperplasia.** *Practitioner* 245 (1627):830-2, 836, 838, Oct 2001.
6. Holtgrewe HL, et al. **Surgical management of benign prostatic hyperplasia in 2001—a pause for thought.** *J Urol* 166 (1):177, July 2001.
7. **Men who have heart disease are at increased risk of BPH, but intense physical exercise may reduce the risk.** *AHRQ Res Activities* 255 9, Nov 2001.
8. Meigs JB, et al. **Risk factors for clinical benign prostatic hyperplasia in a community-based population of healthy aging men.** *J Clin Epidemiol* 54 (9):935-44, Sep 2001.
9. Roehrborn CG, et al. **Guidelines for the diagnosis and treatment of benign prostatic hyperplasia: a comparative, international overview.** *Urology* 58:642-50, Nov 2001.
10. Souverein PC, et al. **Evaluating adverse cardiovascular effects of drug treatment for benign prostatic hyperplasia (BPH): methodological considerations.** *J Clin Epidemiol* 54 (5):518-24, May 2001.

DEPRESSION IN PRIMARY CARE

Depression is one of the most common major health conditions encountered in primary care. Abundant evidence indicates that current management of depression in the primary care setting falls far short of

that recommended by evidence-based guidelines. Several studies have demonstrated that the use of organized treatment programs can significantly improve the quality of treatment and clinical outcomes for depressed primary care patients. NIMH is currently funding research on the management of depression in primary care practice.

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13. Katon W, et al. **A randomized trial of relapse prevention of depression in primary care.** *Arch Gen Psychiatry* 58 (3):241-47, Mar 2001.
14. Mischoulon D, et al. **Management of major depression in the primary care setting.** *Psychother Psychosom* 70 (2):103-7, 2001.
15. Schulberg HC, et al. **Managing late-life depression in primary care practice: a case study of the Health Specialist's role.** *Int J Geriatr Psychiatry* 16 (6):577-84, June 2001.
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19. Unützer J, et al. **Improving primary care for depression in late life: the design of a multicenter randomized trial.** *Med Care* 39 (8):785-99, Aug 2001.
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ISCHEMIC HEART DISEASE

Ischemic heart disease (IHD) is defined as a heart condition caused by poor delivery of blood that carries oxygen to the heart. It is most commonly caused by blockages in the coronary arteries which are the blood vessels providing blood to the heart. The risk of IHD can be reduced by lowering cholesterol levels and blood pressure, exercising, not smoking, and controlling weight. NCHS has data

on IHD in their annual publication *Health, United States, 2001*.

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26. St-Pierre AC, et al. **Comparison of various electrophoretic characteristics of LDL particles and their relationship to the risk of ischemic heart disease.** *Circulation* 104 (19):2295-99, Nov 6 2001.
27. Sethi AA, et al. **Angiotensinogen mutations and risk for ischemic heart disease, myocardial infarction, and ischemic cerebrovascular disease.** *Ann Intern Med* 134 (10):941-54, May 15 2001.
28. Voutilainen S, et al. **Low dietary folate intake is associated with an excess incidence of acute coronary events.** *Circulation* 103 (22):2674-80, June 5 2001.
29. Yarnell JWG, et al. **Do total and high density lipoprotein cholesterol and triglycerides act independently in the prediction of ischemic heart disease?** *Arterioscler Thromb Vasc Biol* 21 (8):1340-45, Aug 2001.
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MATERNAL AND CHILD HEALTH SERVICES

The goal of the Bureau of Maternal and Child Health, HRSA, is to provide national leadership by

partnering with states, communities, and families to strengthen the maternal and child health infrastructure so that it can offer comprehensive services to underserved pregnant women, infants, children, adolescents, and their families. To achieve this the Bureau designs programs to promote prevention, eliminate barriers to care, assure high quality care, develop practice guidelines, monitor and evaluate data, and eliminate health disparities.

31. Capitulo KL. **Creating patient-focused, family-centered, maternal-child and pediatric healthcare.** *Am J Maternal/Child Nurs* 12 (6) 298-306, Nov-Dec 2001.
32. Ehrenkrantz D, et al. **Measuring prevalence of childhood disability: addressing family needs while augmenting prevention.** *J Rehabil* 67 (2):48-54, Apr-June 2001.
33. Hurdle DE. **Social support: a critical factor in women's health and health promotion.** *Health Soc Work* 26 (2):72-9, May 2001.
34. Janicke DM, et al. **Children's health care use.** *Med Care* 39 (9):990-1001, Sep 2001.
35. Lydon-Rochelle M, et al. **Midwives and maternal and child health: building resource capacity.** *J Midwifery Women's Health* 46 (2):103-8, Mar-Apr 2001.
36. McCormick MC, et al. **The impact on clients of a community-based infant mortality reduction program: the national Healthy Start Program survey of postpartum women.** *Am J Public Health* 91 (12):1975-77, Dec 2001.
37. Newacheck PW, et al. **The impact of managed care on children's access, satisfaction, use, and quality of care.** *Health Serv Res* 36 (2):315-34, June 2001.
38. Pammer W, et al. **Use of telehealth technology to extend child protection team services.** *Pediatrics* 108 (3):584-90, Sep 2001.
39. Parchman M, et al. **Access to and use of ambulatory health care by a vulnerable Mexican American population on the U.S.-Mexico border.** *J Health Care Poor Underserved* 12 (4):404-14, Nov 2001.
40. Shortell SM, et al. **A time for concerted action.** *Front Health Serv Manage* 18 (1):33-9, Fall 2001.

POSTTRAUMATIC STRESS DISORDER AND SUBSTANCE ABUSE

Posttraumatic Stress Disorder (PTSD) can develop in those who have been exposed to a traumatic event and is a strong risk factor for substance abuse and addiction. The events of September 11 have

left many people with emotional and behavioral problems and consequently at risk for substance abuse. Ethnographers supported by NIDA working in New York City have reported an increased demand for street sales of various drugs. NIDA and SAMHSA are working to provide assistance to those affected by the events of September 11th.

41. Breslau N. **Outcomes of Posttraumatic Stress Disorder.** *J Clin Psychiatry* 62 (Suppl 17): 55-9, 2001.
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43. Dierker LC, et al. **Familial psychiatric illness and Posttraumatic Stress Disorder: findings from a family study of substance abuse and anxiety disorders.** *J Clin Psychiatry* 62 (9):715-20, Sep 2001.
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45. Leshner A. **Coping with stress in the wake of September 11.** *Nida Notes* 16 (4):3, Oct 2001.
46. Ouimette PC, et al. **Two-year mental health service use and course of remission in patients with substance use and Posttraumatic Stress Disorders.** *J Stud Alcohol* 61 (2):247-53, Mar 2000.
47. **Some areas see increased demand for treatment since 9/11.** *Alcohol Drug Abuse Week* 13 (46):4-5, 10 Dec 2001.
48. Teusch R. **Substance abuse as a symptom of childhood sexual abuse.** *Psychiatr Serv* 52 (11):1530-32, Nov 2001.
49. Weil A. **Calm your fears naturally.** *Prevention* 54 (1):98-99, Jan 2002.
50. Widom CS, et al. **Alcohol abuse as a risk factor for and consequence of child abuse.** *Alcohol Res & Health* 25 (1):52-7, 2001.

SELECTED NEW ACQUISITIONS

To permit review of all books and reports in this list, they will not be circulated until three weeks from the date of this Bulletin. All materials are available for review on the NEW BOOKS display shelf near the Service Desk of the Library. You may reserve any book simply by completing the yellow strip form available on the display shelf.

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D844 THE FORENSIC
 PHARMACOLOGY OF
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 Drummer, Olaf H. London,
 ENG, Arnold, 2001, 462 p.
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 Henderson, James W.
 [Cincinnati, OH], South-
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 NY, Kluwer Academic/
 Plenum Publishers, 2001,
 187 p.
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E6491 EPIDEMIOLOGY AND
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 2nd ed. New York, NY,
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M83 HOLDING HEALTH CARE
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 E. Haavi. New York, NY,
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416 p.
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Lewis, Audie G. San
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S. Washington, DC,
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University of Minnesota Press,
2001, 193 p.

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(For overnight or weekend use only)

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QA
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INTERNET WORDS: AN A
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Lexington, MA, Resources for
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Department of Health and
Human Services, National
Institutes of Health, 2000, 2
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SPANISH DICTIONARY:
SPANISH-ENGLISH,
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ESPANÑOL-INGLÉS,
INGLÉS-ESPANÑOL. 2nd ed.
Lea, Christine. New York,
NY, Berkley Books, 1999,
477 p.

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YOUTH SUBSTANCE USE:
STATE ESTIMATES FROM
THE 1999 NATIONAL
HOUSEHOLD SURVEY ON
DRUG ABUSE. Wright,
Douglas. Rockville, MD, U.S.
Department of Health and
Human Services, Substance
Abuse and Mental Health
Services Administration, 2001,
226 p.

GUIDE TO LIBRARY RESOURCES

NATIONAL TRADE AND PROFESSIONAL ASSOCIATIONS. Columbia Books, Inc., Washington DC, 2000. Ref-Assn HD 2425 N213

This directory lists over 7,600 trade associations, professional societies, labor unions, and similar national groups. In addition to the main body of this directory, there are subject, geographic, budget, executive, and acronym indexes. Entries in the main section contain:

- Name of association
- Address and telephone number
- Fax number
- Number of members
- Budget
- Number of staff members
- Historical information
- Publications
- Meetings and conferences

DATAPEDIA OF THE UNITED STATES 1790-2005. Bernan Press, Lanham, MD, 2001. Ref-Gen HA 202 K9656

This source presents the most significant historical statistics of the United States in 23 selected areas from 1776-2000. In some areas, where projections are possible, the data are extended to 2010. For the period up to 1970, the *Datapedia* is based on *Historical Statistics of the United States from Colonial Times*. However, this is not just a supplement to *Historical Statistics* but is a selection of the most important statistics of the time period presented in a reader-friendly format. This source contains sections which include:

Population	Migration
Vital health and statistics	Labor
Construction and housing	Manufacturing
Transportation	Minerals
Government	Financial markets and institutions

PREVIOUS CURRENT TOPICS

Previous current topics can be obtained upon request

Topic	Bulletin No.	Date
Specialized Library Collections	505	December 2001
New Security Procedures Bioterrorism and CDC Cataracts National Household Survey on Drug Abuse Physicians Dissatisfaction with Profession Treatment for Seasonal Affective Disorder	504	November 2001
Parklawn Health Library System's Journal List Binge Drinking Among College Students Geriatric Depression Health Care Surveys Design and Accuracy Hormone Replacement Therapy Telehealth	503	October 2001

LIBRARY CLIENTELE

The Parklawn Health Library System serves the following components of the Department of Health and Human Services (HHS):

- Administration for Children and Families
- Administration on Aging
- Agency for Healthcare Research and Quality
- HHS Regional Offices
- Health Resources and Services Administration
- Indian Health Service
- National Center for Health Statistics
- National Institute of Mental Health
- National Institute on Drug Abuse
- Office of the Secretary
- Office of Public Health and Science
- Program Support Center
- Substance Abuse and Mental Health Services Administration

LIBRARY MISSION

The Parklawn Health Library, the NCHS Staff Research Library, and the Information Resources Center plan, develop, and administer a national research collection and innovative information programs in direct support of the Department of Health and Human Services.

LIBRARY COLLECTION

The Scope of the collection includes the delivery of health care, health administration, health policy, health services research, health promotion and disease prevention, computer sciences, management sciences, medical sociology, health statistics, international health, epidemiology, public health, mental health, psychiatry and neurology, and substance abuse.

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