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Gastric bypass: Is it a diabetes fix?

Within days of various weight-loss surgeries, blood sugar levels become easier to manage -- or are normal.

By Shari Roan

October 26, 2009

The discovery came about by accident more than a decade ago: Weight-loss surgery often led to dramatic improvements in the control of Type 2 diabetes, often before patients had even left the hospital.

Today, evidence of the connection is so solid that some doctors say surgery should be considered as a treatment for diabetes, regardless of a person's weight or desire to lose weight.

"We thought diabetes was an incurable, progressive disease," says Dr. Walter J. Pories, a professor of surgery at East Carolina University and a leading researcher on weight-loss surgery. "It . . . is a major cause of amputations, renal failure and blindness. This operation takes about an hour, and two days in the hospital, and these people go off their diabetes medication. It's unbelievable."

As many as 86% of obese people with Type 2 diabetes find their diabetes is gone or much easier to control within days of having weight-loss surgery, according to a meta-analysis of 19 studies published earlier this year in the American Journal of Medicine (78% of patients with a remission of diabetes and 86.6% with remission or improvement). But experts still aren't sure why obesity surgery helps resolve Type 2 diabetes or how long the effect might last. And they disagree on how big a role surgery should take in treating the illness.

"We are going from seeing the results to understanding why it happens," said Dr. Santiago Horgan, director of the Center for the Treatment of Obesity at UC San Diego.

This much is clear: Patients who have weight-loss surgery begin to lose weight rapidly, which by itself improves Type 2 diabetes, allowing diabetics to more easily control their blood glucose levels. But something else appears to be occurring as well.
There is strong evidence that surgery -- especially gastric bypass surgery, which makes the stomach smaller and allows food to bypass part of the small intestine -- causes chemical changes in the intestine, says Dr. Jonathan Q. Purnell, director of the Bionutrition Unit at Oregon Health & Science University. The small intestine has been thought of simply as the place where digestion occurs.

But researchers now suspect it has other functions related to metabolism. Surgery somehow alters the secretion of hormones in the gut that play a role in appetite and help process sugar normally.

Multiple studies in humans and animals indicate that surgery triggers reductions in ghrelin, the hormone that stimulates hunger, and elevates levels of peptide YY and glucagon-like peptide-1, both of which act as appetite suppressants. Another theory is that surgery might alter the expression of genes that regulate glucose and fatty-acid metabolism.

"There are these known components that improve glucose metabolism," Purnell says. "But there are very likely other things happening as well."

Which procedure?

The effect on diabetes can depend on the type of weight-loss surgery that is performed, says Pories, past president of the American Society for Metabolic and Bariatric Surgery. The highest rates of diabetes remission are seen in people who have gastric bypass -- about 83%.

But diabetes also tends to resolve or improve in 50% to 80% of people who have lap-band surgery, in which a band is placed around the top of the stomach to make it smaller, he says. And there is some evidence that the effect occurs a newer type of weight-loss surgery called gastric sleeve, in which a portion of the stomach is removed so that it takes the shape of a tube or sleeve.

Evidence suggests the effect on diabetes can last for an extended period or even indefinitely, particularly if people don't regain a lot of weight.

"There is durability, but we also know that some people do get the disease back again," Purnell says. "Weight rebound is probably one factor. We also know that diabetes is a progressive disease. It may depend on how long you've been diagnosed with diabetes. If it's early on, I think the durability may be better."

It's not clear yet why people have different responses.

"There is some evidence that African Americans don't respond as well as Caucasians, and men don't respond as well as women," Pories says.

Despite the unknowns, the evidence that a majority of people experience long-term improvement in blood glucose control suggests the surgery could eventually play a greater role in the treatment of obese people with Type 2 diabetes. The majority of American adults with Type 2 diabetes are overweight.

Traditional medical guidelines, which insurers follow, state that weight-loss surgery should be restricted to patients with a body mass index of 35 or greater who have related health problems. But
some diabetes and nutrition experts think those recommendations don't go far enough. Several studies are underway, or will soon begin, to examine the benefits of surgery in people with Type 2 diabetes and a BMI of less than 35.

"We may have a cure for diabetes," Santiago says. "So we need to ask how medical therapies and surgery can help each other in the treatment of diabetes."

Studies from several other countries show that surgery also results in remission of diabetes for people who are not morbidly obese. There is even discussion, particularly in other countries, of performing weight-loss surgery for people with Type 2 diabetes who are not overweight.

Not without risks

In the United States, weight-loss surgery is still largely viewed as a cosmetic procedure and obesity as a lifestyle issue, not a chronic disease. Moreover, weight-loss surgery carries risks. The death rate is about one per 200 operations and severe complications can occur, including blood clots, infections related to surgery, and the need for corrective surgery due to leaks at the staple lines.

Other complications include vitamin and mineral deficiencies, dehydration, gallstones, kidney stones, hernia and low blood sugar.

However, a risk-benefit analysis published in April in the Journal of the American Medical Assn. by Purnell and a colleague suggests that if the number of gastric bypass operations performed on diabetic patients increased to 1 million per year, as many as 14,310 diabetes-related deaths might be prevented over five years.

Surgery also leads to other health benefits besides weight loss and better control of diabetes. Patients often see improvements in blood pressure, cholesterol, gastroesophageal reflux disease and sleep apnea.

"Doctors say, 'If I can lower glucose by medications, why send patients to surgery?' " Purnell says. "Surgery, however, allows people to have meaningful and sustained weight loss and their diabetes is better. There are risks involved with surgery, obviously, but it makes sense, to me, to do surgery."

The discovery of the gut hormones that play a role in appetite and insulin regulation may also lead to new medications for Type 2 diabetes, Pories says.

"You can't operate on 31 million Americans," he says. "But if we understood this mechanism and what are the molecules secreted by the intestines that cause diabetes, then we can cure it with a pill. I would not be surprised if, in the next five years, we have new medications."

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New money: Stimulus funding welcome at ECU

Tuesday, October 27, 2009

The American Recovery and Reinvestment Act may not have delivered the economic jump-start that was promised when it won Congressional approval in January, but the stimulus bill has delivered demonstrable benefit to communities across the nation. That includes Greenville, where East Carolina University is among the destinations for the government's funding.

The University of North Carolina system ranks among the state’s most important resources, and sending money to its 16 campuses represents an investment in North Carolina's future. East Carolina can be grateful for the money received so far and should continue to pursue this avenue for additional funding.

Speaking to a congressional panel last week, Christina Romer, the chair of President Barack Obama's Council of Economic Advisers, touted the impact of the stimulus package passed at the outset of Obama's term. Though she said the $787 billion spending bill has not facilitated a typical economic recovery, Romer testified it will save or create an estimated 600,000 to 1.5 million jobs and has infused money to nearly all sectors of the American economy.

While those claims seem dubious, North Carolina can point to a tangible investment in higher education as one clear benefit of the package. Recent figures suggest that more than $445 million has been pledged or delivered to the state's public universities and community colleges so far, and many institutions are hopeful that requests for additional funds will be received favorably.

The UNC system will receive the lion's share of that funding — about $394 million — money that is sorely needed due to belt-tightening in a tricky state budget year. The largest recipients are UNC Chapel Hill and N.C. State, which have received $79 million and $23 million respectively. UNC Wilmington and UNC Charlotte also rank high on the list.

East Carolina has not been as fortunate as those schools, despite the size of its student population, but has been awarded nearly $4 million for a variety of needs, including health care programs and ongoing research. The school has applied for $78 million and still has requests pending for additional priorities.

Considering its ambitious goals, the money would help assure that East Carolina can continue to meet the needs of this community and region. The university's commitment to service is unwavering, and each dollar pledged toward that end is another positive step for eastern North Carolina.

The federal stimulus has its vocal detractors, and with good reason. Expect those voices to rise should job growth and economic progress fail to materialize. But an investment in higher education always reaps rewards, and North Carolina should see the benefit of this investment in the years to come.

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ECU STUDENT TIFFANY VOCHEROOTD gets out of her tent at the ticket office at Minges Coliseum on Monday as she waits in line for tickets for the Pirates' nationally televised football game against Virginia Tech next Thursday night in Greenville.
MIAMI — College and university athletic departments might have to drop some sports unless reforms such as controlling the cost of coaching contracts are implemented, according to a survey released Monday.

The survey of presidents of schools at major college football’s highest level also suggests even the administrators aren’t sure how to rein in costs. That’s not saying no one will try: A group representing the athletic directors at those schools will present seven presumably cost-cutting proposals to the NCAA in the coming weeks.

“What’s going on out there, it’s almost scary,” former Notre Dame football standout Chris Zorich said.

The Knight Commission on Intercollegiate Athletics released the survey at its 20th anniversary meeting. The commission has successfully lobbied for stronger academic standards, improved graduation rates and more institutional control of college athletics.

Commission members say finding ways to solve financial woes will be its most daunting challenge.

“It’d be nice if there was a road map. There isn’t,” said Dr. Gerald Turner, the president of Southern Methodist University and the commission’s co-chairman. “There are a number of ideas, but I really harken it to where we were in 1989, 1990 when we were trying to think about how to do academic reform.”

Several financial-reform ideas are coming from the Division I-A Athletic Directors Association, an entity independent of the Knight Commission but with involvement at Monday’s meeting.

Dutch Baughman, the association’s executive director, told the commission the majority of ADs at the 120 FBS schools support what he called “low-hanging fruit,” measures he believes could be implemented quickly. Most notably, they include:

■ Eliminating off-campus housing before home contests, a common practice for many football programs who check into hotels before a game to minimize distractions.

■ Creating a sport-by-sport squad limit for team travel, something that’s already in place for football.

■ Reducing the permissible number of regular-season contests.

■ Eliminating nontraditional seasons of competition and all foreign travel, outside of any already contracted.

“It’s what we’re responsible for doing, and we’re very serious about that,” Baughman said.

Baughman also stressed the association is not forgetting “institutional prerogative,” essentially saying guidelines that would help some schools might not work for all 120 FBS schools.

Miami coach Randy Shannon said earlier this year that he trimmed $150,000 from his travel budget by switching to buses instead of flights for two games, but that staying in hotels before home games was essential to ensure that his team would be rested and focused.

Nebraska coach Bo Pelini quickly came out Monday against the proposal to ditch hotel stays before home games.

“I think that’s a bad idea,” Pelini said. “You’re just opening yourself up to problems, things happening. There are so many things that happen the night before the game. ... It’s nice to have them in one place. Keep them out of the distractions. Kids will be kids.”

Former NCAA president Cedric Dempsey also offered a list of recommendations, including suggesting that the time has come for a new revenue-sharing model, particularly regarding Bowl Championship Series money. The Knight survey showed 62 percent of FBS school presidents support that notion.

“I would speculate that if we cannot change our model, that we will see more and more programs not just drop football but possibly change their whole intercollegiate athletic programs,” Dempsey said.

Among the Knight Commission findings, which came from brief interviews with 95 presidents at FBS schools and then were further culled by 22 deeper interviews with some of those administrators earlier this year:

■ More than 6 of 7 presidents believe total compensation for football and basketball coaches at other FBS schools is excessive, but only about half those presidents say the pay for those coaches at their own school is too much.

■ Presidents believe they have “limited power” to change athletics financing on their own campuses.

■ Enormous television rights contracts have further eroded the authority administrators have at their schools.

■ 64 percent would like to study ways to reduce the number of games for non-revenue sports.
UNC to test new flu drug

A small number of patients at UNC Hospitals will be asked to test a new flu drug that has shown promise in treating severe cases but is still under investigation.

Even as the clinical trial is about to launch, the anti-viral drug, Peramivir, was given emergency clearance last week by the U.S. Food and Drug Administration for hospitalized patients who cannot take approved flu-fighters such as Tamiflu and Relenza.

Patients at UNC Hospitals will be able to get the drug if they need it, even if they do not choose to participate in the clinical trial.

Only about six patients will be enrolled in the trial at UNC, said Dr. Christopher Hurt, an infectious disease doctor and the site's principal investigator.

"It's a really funny spot we're in at the moment," Hurt said, noting that the FDA's emergency declaration expands the arsenal to fight severe illness, even as researchers work to prove that the intervention is safe and effective.

The drug -- developed by a company called BioCryst Pharmaceuticals, which has its management team based in Durham -- is close to government approval in Japan and has been through two rounds of clinical trials in the United States.

Peramivir works on the same principle as Tamiflu and Relenza, blocking an enzyme in flu viruses that enables them to flourish and spread, said Robert Bennett, executive director of business development and investor relations for BioCryst.

But it's delivered in an intravenous drip, so it is being developed solely for hospital settings. Tamiflu, by contrast, comes as a pill, and Relenza is a nasal spray. Both are available to patients through pharmacies as prescription drugs.

Hurt said the advantage of Peramivir is in severe situations, when patients are so sick they can't swallow pills or are on a respirator and cannot inhale a drug. In addition, he said, an intravenous route may prove quicker to enter the blood stream.

"If you're in an intensive care unit setting, no one would put you on an oral antibiotic," Hurt said. "You would want an intravenous antibiotic. That's where this IV form has its niche."

Bennett said the company has received at least $180 million in federal grants to develop the drug. The FDA put it on a fast track in 2006, as health leaders feared that a deadly strain of avian flu would become the next flu pandemic.

He said the two initial trials of the drug have shown it to be safe and effective, and those results formed the basis of the FDA's emergency use declaration Friday.
The current trial involving UNC Hospitals will test the drug as an add-on to the current anti-viral therapies. Those results will be compared to the outcomes of patients who get the current treatments and a sugar pill.

Hurt said more than 300 patients will be enrolled in the phase 3 trial internationally. Results are expected by 2011, and the company could then petition the FDA to approve the drug.

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Lost laptop has doctors' data

Social Security numbers for nearly every doctor in North Carolina were stolen this summer, but many just recently found out about the security breach.

Doctors received letters from Blue Cross Blue Shield of North Carolina this month telling them that an employee for the national business affiliate in Chicago transferred their names, tax identification numbers, and numbers used for billing to a personal laptop that was later stolen. In about 20,000 cases, North Carolina doctors used Social Security numbers as tax identification numbers.

Nationwide, about 18 percent to 22 percent of doctors use Social Security numbers as tax IDs, said Kelly Miller, spokeswoman for the Blue Cross Blue Shield Association. As of Monday, no one had reported illegal use of personal information, she said. The association is the national group to which the state Blue Cross Blue Shield companies belong.

The security breach affected all doctors that do business with Blue Cross Blue Shield of North Carolina, the state's largest health insurer. North Carolina has 21,641 licensed doctors, according to the N.C. Medical Board.

The laptop, stolen from a car in Chicago, had information on 850,000 doctors nationwide. Information on the laptop was not encrypted. The employee reported it stolen in late August.

The national Blue Cross Blue Shield group is offering doctors whose Social Security numbers were stolen, including the 20,000 in North Carolina, free credit monitoring.

No patient information was on the laptop, said Lew Borman, spokesman for Blue Cross Blue Shield of North Carolina. It would be impossible to fraudulently bill for medical services using the stolen information, he said.

"We're making moves to inform folks of what their opportunity is for credit monitoring," he said. "Obviously, it's a great concern."

Miller said the national affiliate told the state offices about the security breach as soon as they found out about it in August. Some state doctors did not hear about it, though, until mid-October, when the state office sent them letters.

Borman said the office needed time to cross-reference addresses to make sure it didn't send duplicate letters.

The office asked professional associations, including the N.C. Medical Society, the N.C. Hospital Association, and an association for office managers to spread the word about the security breach before the formal letters went out, he said.

Word still hadn't reached everyone. Carolyn Scruggs, executive director of the Mecklenburg County Medical Society, said Monday she had not heard of the security breach.
The N.C. Medical Society posted the Blue Cross notice as it was asked, spokesman Mike Edwards said, but it has not offered doctors advice on how to respond to the problem.

When he heard about the stolen data, the president of the Massachusetts Medical Society, Dr. Mario Motta, suggested doctors who use their Social Security numbers for tax identification change their tax IDs.

It's easy to change the number, Motta said. The problem is that once a doctor switches, it takes more time for insurers to pay claims, he said.

"They should make every effort to make this as seamless as possible," he said. "This isn't a request just for convenience. This is a request because they had a breach."

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Friend: Easley campaign paid for home repairs

Gov. Mike Easley directed his campaign to pay for $11,000 in roof and bathroom repairs and other fix-ups at his personal residence in Raleigh, and he kept it secret from the public, according to testimony and records at a state elections board hearing Monday.

Easley's campaign also did not pay for scores of political flights he took from 1999 through 2004, according to a star witness who flew him around: longtime friend and supporter, McQueen Campbell.

Campbell, a pilot, said under oath that he provided free campaign flights for Easley that were valued at $87,895. Campbell said he also provided personal flights on his planes, such as a fishing vacation to Florida in 2005, that were valued at more than $14,000.

The testimony offered a new and startling round of disclosures about Easley, a Democrat who left office in January. The information fit a pattern that has emerged since last year: A former attorney general and two-term governor who accepted perks in possible violation of laws and ethics rules.

"It's about the stinkiest stuff I've heard," said Jane Pinsky, who leads a broad coalition of groups that has sought ethics and lobbying reforms in Raleigh. "It's all so distasteful."

The revelations have included the free flights, free dues at an exclusive golf club, a $137,000 discount on a coastal lot purchase and the disclosure that Easley was involved four years ago in creating a job for his wife at N.C. State University.

Not all of those were discussed Monday. Another perk was -- a vehicle owned by a Fayetteville dealer that Easley's son drove for six years.

The dealer involved, Robert F. Bleecker, testified that he arranged to provide the car for Easley's son in 2002 or 2003 and that Easley said he would settle up later. About six years went by before Easley brought it up again, according to Bleecker.

Bleecker said that Easley has now paid in full, with part of the money coming from Easley's campaign, which has previously said the car was used for the campaign from 2003 until the middle of 2005.

When board member Bill Peaslee asked about what was a "normal lease," Bleecker interrupted him.

"This is not a normal deal, sir," Bleecker said.

Easley's lawyer, Thomas Hicks of Wilmington, said he would not immediately respond to all the allegations, but he said that Easley had not purposely violated the law. Easley did not attend the hearing Monday.

Easley is expected to testify as soon as Wednesday. Other donors and campaign officials, including some who flew Easley, are among possible witnesses who could testify today.
Campbell's testimony

Campbell testified first. His allegations rocked the meeting room at the Clarion Hotel, just down Hillsborough Street from Democratic Party headquarters.

Under questioning by Hicks, he acknowledged he never submitted an invoice for any flights. Campbell said he didn't think that was required. He thought the campaign, which knew about all the flights, was taking care of reporting.

Campbell also said that Easley at one point asked him to compile a list of the flights he'd provided but was unsure exactly why. He said he doesn't remember giving it to the campaign. "I may have shown it to him at some point along the way," Campbell said.

Elections board Chairman Larry Leake said each campaign must report what it takes in and spends and where the money goes. It's an essential part of modern elections law that requires transparency about campaigns. Individuals who give to campaigns, for example, are not required to file reports.

In addition, campaigns must adhere to laws that limit a donor to providing a contribution of no more than $4,000 in each election period.

Campbell's flights exceeded the limits in 1999, 2000 and 2004, according to records made public Monday.

The house repairs

By the end of 2004, after Easley had easily won a second term, the governor went to Campbell with a request, Campbell said.

Easley, who had kept his home on East Lake Drive in Raleigh after moving into the Executive Mansion, needed repairs on the house. The governor asked Campbell to take care of them, Campbell testified.

He said he oversaw about $4,000 in fixes that documents indicate included repairing the roof, trimming trees, washing sidewalks and cleaning dog feces from a bedroom and closet.

Bills for untaken flights

Campbell said he paid for the repairs but expected Easley to reimburse him. When the governor didn't, Campbell said he telephoned Easley.

"I called Gov. Easley and told him how much the repairs were," Campbell said. "And he asked if there were unbilled flights."

Leake asked: "What was your response to that question?"

"I remember understanding what he was saying ... for me to bill the campaign for unbilled flights to cover those amounts," Campbell testified.

Leake asked: "So the Easley campaign and its contributors actually paid for the repairs to Gov. Easley's home?"

"That's correct," Campbell responded. He billed the campaign $4,777.50; a company he owned was paid
in February 2005.

A few months later, Campbell was contacted again about water damage at the home. He took care of the repairs, which cost him about $6,000. The campaign later paid a Campbell company $6,300 in August 2005, records show.

A call from Easley

That transaction raised questions with a campaign staffer named Rebecca McGhee, who worked for Dave Horne, Easley's finance director.

She wrote in a memo and testified Monday that she asked about the $6,300 check because there was no back-up to support that flights had taken place. She then got a call from Easley himself.

"The Governor said that he knows what the invoice says," McGhee wrote. "He instructed me that we should go ahead and pay the invoice."

The publicly listed purpose of both flights was travel, but Campbell testified that no flights correlated to those payments.

Records produced at the hearing also showed that Easley filed an insurance claim about the water damage. And the records show Easley accepted $5,451 in reimbursement from the claim.

Leake asked Campbell: "That's for the repair work you did? Did you receive any of those monies?"

"No, sir," Campbell said. "I did not."

Leake, a lawyer from Mars Hill, said he views the payments as possible tax problems but did not elaborate. Separate state and federal investigations are continuing, and officials involved have declined to comment.

After testifying Monday, Campbell left quickly with his lawyer, deflecting questions.

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Centennial goes silver

When former Gov. Jim Hunt pushed in 1984 to allot the first 385 acres for what would be called N.C. State University's Centennial Campus, he had in his mind a public-private concept that he now describes as "unprecedented." Judging by the number of universities that in the years since have attempted to follow the Centennial model, it appears the governor was pretty much right.

And so it's fitting that the new, futuristic library on the campus will be named for Hunt, a progressive governor in so many ways.

The 25th anniversary of Centennial Campus offers much accomplishment on which to reflect: several thousand people, from students to business executives to faculty, now work on the site. There is a golf course. There are, between the main campus and a biomedical campus aligned with it, over 1,300 acres involved. There will be more facilities and people to come.

Private companies obviously enjoy the convenience of relationships with research faculty, and researchers benefit from modern facilities and the investment by private concerns in the pursuit of discoveries. Students participate, and learn. The university has room to grow outside of its Hillsborough Street headquarters.

N.C. State, with its emphasis on the sciences and engineering, was indeed a good spot to break new ground with public-private partnerships, and the result, with a quarter-century of experience now in hand, has been an overwhelmingly positive one.

Along the way, despite ongoing expansion, some have mused that the Centennial Campus is rather like a well-hidden treasure. Better known 'round the world than in its own hometown? Oh, maybe for a while. But only for a while.