

# Re-do priorities

For a while it was possible to think that the recurring nightmare of disease was over. But it wasn't.

For the past few generations one disease or another has cut down too many good people who lacked the immunities necessary to fight them. Measles, tuberculosis, diphtheria, alcoholism.

Now a silent, slower but just as deadly virus — hepatitis B.

The disease entered the Alaska countryside about 80 years ago and since then has slowly, steadily worked its way into the medical fabric of many Native people in a manner that has been described as a "smouldering epidemic."

The virus infection has no symptoms so you don't know you are sick. It is passed from person to person but the live virus has been found living on school lunch tables. It leads to many more medical problems such as cirrosis of the liver and a rare form of liver cancer.

All too frequently when this sort of epidemic develops one is helpless to fight it but this time nothing short of a medical miracle happened. The disease was "discovered," a method for field testing possible carriers was developed, and a vaccine developed to prevent infection. All this was done within a decade.

But there is a shadow over this ending and its name is money. Not enough has been allocated to cover a comprehensive testing and vaccination program against the hepatitis B virus.

Just in the past year the vaccine to immunize people from developing the disease was approved. But it is available in limited quantities because it is so expensive — \$100 for adults and \$60 for a child.

Estimates state that it would take \$5 million over the next three years to test and vaccinate the people who need it. And the cost of a preventative maintenance program can't be estimated.

So you see, the medical people have done their job. Now it is the turn of the government.

The U.S. Department of the Interior appropriations budget approved in December included \$500,000 for hepatitis B program.

State medical personnel still are wondering what happened to their request for \$260,000 for a state program. In the meantime they are making do for hepatitis B testing by sharing an employee from other duties.

But the sum total of these two amounts is a mere drop in the bucket compared to the funds needed to fight the disease.

The state legislature and the new governor are writing their legislative and funding priorities for the coming year. In the past, unfortunately, public health has not been prominent in the minds of many of those people who set policy for this state.

We realize that our legislature is facing another decrease in oil royalty revenues and therefore the budget will be smaller.

And we realize that everyone wants to bring a new building or road project home to his district.

But this is the year to consider the actual quality of life. And quality of life means the ability to live without fear of contracting an unseen and preventable disease.

This is the time to really look at the well-being of our state residents and forget the roadways and buildings for a while.

We can do without a new road or a building if its sacrifice will mean saving the life of a little child.

Surely that isn't too much to ask.