

Stressful Life Events and Grave's Disease

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War in the neighboring countries and sanctions which caused economic deterioration made for highly unfavorable living conditions in Yugoslavia. A case-control study was conducted in order to assess possible relationships between stressed life events and Grave's disease. The study included 100 patients newly diagnosed with Grave's disease and 100 controls matched with respect to gender, age (± 2 years), and type of residence (rural or urban). Paykel's interview for Recent Life Events was administered to each subject.

In comparison with controls, the Grave's Disease patients claimed to have had significantly more stressed life events in the 12 months preceding the diagnosis ($p = 0.0001$). The following eight life events were significantly more prevalent among patients than for the controls: 1) change in time spent on work (McNemar = 12.04, RR = 7.00, 95% CI = 2.35–20.80, $p = 0.0001$); 2) unemployment for at least one month (McNemar = 4.00, RR = 8.00, 95% CI = 1.04–61.39, $p = 0.039$); 3) arguments with one's superior at work or coworker (McNemar = 4.5, RR = 3.50, 95% CI = 1.10–11.08, $p = 0.031$); 4) change in the work conditions (McNemar = 4.26, RR = 4.00, 95% CI = 1.07–14.92, $p = 0.035$); 5) increased arguments with spouse (McNemar = 6.75, RR = 11.00, 95% CI = 1.82–66.44, $p = 0.006$); 6) increased arguments with fiancé/fiancée or a steady date (McNemar = 4.00, RR = 8.00, 95% CI = 1.04–61.39, $p = 0.039$); 7) hospitalization of a family member for serious illness (McNemar = 3.76, RR = 3.25, 95% CI = 1.01–10.68, $p = 0.049$), and 8) moderate financial difficulties (McNemar = 8.5, RR = 3.25, 95% CI = 1.47–7.16, $p = 0.003$). Our findings indicate that stressful life events may be associated with Grave's disease, especially in disasters.

Key Words: Grave's disease; Recent Life Events; stressful life events,

An Ambulance of Comforting Excellence (ACE)

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The Ambulance of Comforting Excellence (ACE) is designed to meet high anthropometric and ergonomic standards for both the emergency patient and the attendant. The ACE is not a conversion of a standard motor-car. The ACE is developed and designed as an ambulance. In this design, it is not the patient who is adapted to the (ambulance-) car, but the (ambulance-) car that is adapted to the patient and his attendant. It meets three important needs for the patient before and during transportation: 1) positioning with the feet in the direction of movement; 2) the body laying between the axles of the vehicle; and 3) positioning as near as possi-

ble to the ground floor. The attendant and the equipment are located around the head of the patient. Both gangways are completely free of obstacles. The patient is loaded through a side-door. The proposed ACE will be realized by MEDIVAC v.o.f., The Netherlands in cooperation with several (Dutch) manufacturers.

Key Words: ambulance; ambulance design

An Assistance Program to Laboratories in Tajikistan, Central Asia

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A disastrous civil war has left diagnostic laboratories in Tajikistan in a severely depleted state. Whilst few were damaged physically, lack of funding has led to senior staff leaving, broken down equipment remaining unrepaired, and a severe shortage of glassware, media, and chemicals.

At the same time, Tajikistan faces several severe problems due to communicable disease. Water supplies no longer are chlorinated and filtration plants are not working properly. This led to a serious outbreak of typhoid in the south of the country last year and a worse one in the capital, Dushanbe in the late winter of this year. Malaria (mainly due to *Plasmodium vivax*, but with an increasing number of cases due to *P. falciparum*) is rife in the southern part of the country.

Merlin undertook a survey of diagnostic laboratories in the Khatlon oblast in the south of Tajikistan earlier this year and has supplied media, glassware, chemicals, stains, and microscopes. The agency also has helped to repair some equipment and was able to supply additional media and diagnostic sera to help with the laboratory work generated by the typhoid outbreak in Dushanbe. A consultant medical microbiologist from Merlin recently spent three weeks working the local hospital and public health microbiology's to strengthen the program and to assess needs for training the remaining staff. A collaborative program to improve malaria diagnosis is being planned.

Mortality and Morbidity Among Rwandan Refugees Repatriated from Zaire, November 1996

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Health care, morbidity, and mortality associated with repatriation of Rwandan refugees during November 1996 were assessed through mortality and morbidity surveillance, and observation of functioning of health care facilities in Gyaenyi district, Rwanda and Goma district, Zaire. Between 15 and 21 November 1996, 553,000 refugees returned to Rwanda and 4,530 (8.2/1,000) consultation took place at the border dispensary (watery diarrhea 63%, bloody diarrhea 1%). There were 129 (0.2/1,000) surgical admissions (72% soft tissue trauma) to hospital in the subsequent two weeks. Mean daily consultations from 13 health centers during the same period was 500.