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Major Longevity Gains Termed Unlikely

By William Booth Washington Post Staff Writer

University of Chicago researchers conclude in a new study that even curing leading killers such as cancer, heart disease and diabetes would add no more than a handful of years to the average American's life.

The study takes direct aim at the notion that medical science can continue to significantly extend life expectancy, and suggests that the United States should dramatically shift its priorities from prolonging life to improving the quality of life.

The theoretical upper limit of average life expectancy, according to the researchers, is about 85 years. In the United States, average life expectancy now is 79 years for women and 74 for men.

Even if all cancers were miraculously cured tomorrow; the average American's lifespan would increase by only three years, according to the new analysis of death rates, which appears in today's issue of the journal Science.

"Once you go beyond the age of 85, people die from multiple-organ failure. They stop breathing. Basically, they die of old age. And there's no cure for that," said S. Jay Olshansky of University of Chicago and Argonne National Laboratory, the study's principal author. "Barring a reversal of human aging on a molecular level, the rapid increases in life expectancy are over."

"We've accomplished the first step. We're living longer. Now we should concentrate on diseases that give aging a bad name," said Jacob Brody, dean of the School of Public Health at the University of Illinois in Chicago.

"Congress likes to spend money to live longer, but we're already living longer. Congress, and almost everybody else, is in love with longevity—mindlessly in love," he said. "My God, we're already living long enough. Let's make life worth living for the aged."

"Personally, I think we'd improve the quality of life much more for the aged if we found a cure for Alzheimer's and arthritis, rather than cancer," added Olshansky.

Olshansky and his colleagues, Christine Cassel of Chicago and Bruce A. Carnes of Argonne, warn that further gains in longevity will lead to a dramatic rise in the aged population. While Americans might live longer, the researchers question whether they will live better. Frailty, and disabling but not life-threatening illnesses of old age, could condemn a growing population to aching joints, blindness, deafness, incontinence and dementia.

Olshansky and his colleagues calculated that even if major diseases were eliminated, average life expectancy would increase little. If all cancer and all heart disease were eliminated, the average life expectancy vouid grow by about three years. Even eliminating all deaths from cancer, diabetes and circulatory disorders would only increase average life expectancy 15 years; but most people would probably not realize that gain because their bodies would succumb to normal aging.

Indeed, death rates for children and young adults in the United States are so low that eliminating all causes of death before the age of 50 would only increase overall average life expectancy by 3.5 years.

Thanks largely to reductions in infant and maternal mortality, Americans have experienced a dramatic increase in average life expectancy since the middle of the last century—from 40 years to near 80 years today. But each gain in life expectancy is increasingly difficult.

Many biologists have considered 85 years to be the upper limit for average life expectancy, because normal aging processes tend to wear out cells and organs at about that age. The study's authors caution that this theoretical limit refers only to average life expectancy. There will always be vigorous individuals who live far past their 85th birthday, just as there will always be people who die young.

The limits on lifespan proposed by Olshansky and colleagues were challenged yesterday by rival researchers who offer a rosier vision of the future.

See POST, Next Page

U.S. Health Care Costs Soar, But Not as Much in New York

By PHILIP J. HILTS Special to The New York Times

WASHINGTON, Oct. 31 - New York | rose to 2 million in 1988, or 11.5 percent; State has health care costs among the highest in the country, but the rate at which those costs are increasing is the slowest of all 50 states, according to new estimates of health care costs

issued today. The report is the first state-by-state breakdown of health care costs since the Federal Government stopped issuing such figures in 1982. In addition to citing current and past costs, it reports the number of uninsured in each state and estimates how much health care will cost at the end of the decade.

"We are paying more and getting less," said Ron Pollack, executive director of Families U.S.A. Foundation, a nonprofit health care policy group in Washington, which put out the report. "Americans have a life span two years shorter than our neighbors in Canada. We have higher death rates from heart disease. Our infant mortality is higher than that of Singapore. At least one out, of every four Americans will go without health insurance for a month or more over the next three years."

Costs Nearing a Trillion

The cost of health care in the United States shot up to \$606 billion from \$230 billion in the last decade, and if trends remain the same, will reach almost \$1.5 trillion by the end of the decade, the report said.

New York spent an estimated \$50 billion on health care in the fiscal year 1990, up from about \$22 billion in 1980, a rise of 128 percent. While that increase is very high compared with inflation, it is the lowest of the 50 states. It comes to \$2,818 a person in the state in 1990.

The number of people in New York without any kind of health insurance of the population, from 1.6 million in 1980.

Connecticut had the lowest percentage of uninsured people of any state in 1988 — 186,000, or 5.8 percent, of the population. The number dropped by four percent from 1980 to 1988. The state's 147 percent increase in spending on health care - from \$3.5 billion in 1980 to \$8.8 billion in 1990, was 32d highest in the nation. Spending in the fiscal year 1990 was estimated at \$2,699 a person.

New Jersey's spending rose to \$17.4 billion from \$6.8 billion in the past decade, for a 154 percent increase, the 27th highest in the nation. The number of uninsured also declined 7 percent in New Jersey in the last decade, to an estimated 638,000 for 1990, or 8.3 percent of the population. Spending was estimated at \$2,224 a person for 1990.

Costs varied widely around the country. Massachusetts had the highest, at \$3,031 per capita, and South Carolina the lowest, at \$1,689 a person. The lowest costs are generally in the South.

The highest rates of increase came in Arizona, Alaska, Florida, New Mexico and Maine. Mr. Pollack noted that three of these are Sunbelt states with a higher-than-average number of eideriv

Citizen Action, an advocacy group with 2.5 million members in the United States, assisted in compiling the report. It can be obtained by writing to Families U.S.A. Foundation, 1334 G Street N.W., Washington, D.C., 20005.

WIC: It Saves Lives and Money

Congress knows the worth of WIC, the remarkable Federal food plan for poor pregnant nursing women and their children. It has just increased spending for the program to \$2.3 billion, up \$135 million from last year. But only 19 states and the District of Columbia contribute their own funds to the program, whose initials stand for Women-Infants-Children. The other states are making a mistake. What they're saving by not giving to WIC, they're more than losing in Medicaid outlays.

In 1986, the results of a five-year WIC study commissioned by Congress made it clear that the program produces substantial health benefits. Pregnant women can't receive the diet supplements provided by WIC without accepting medical checkups. That alone helps reduce fetal and infant death.

Now the Department of Agriculture has released a study that translates those findings into

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money. The study, conducted by Mathemetica Policy Research, found that when poor women received WIC food packages during pregnancy, Medicaid spending was up to \$598 less for the mother and child just in the first 60 days after birth.

The reason's simple. A Medicaid recipient enrolled in the WIC program has a much lower chance of having a low-birthweight or premature baby likely to need expensive attention in a neonatal intensive care unit. Every dollar spent on the prenatal WIC program, the study found, saves from \$1.77 to \$3.13 in Medicaid costs.

Federal funds cover about half the eligible women and children. State funds from the generous 19, New York among them, cover thousands more. If the 31 other states can now find room in their budgets for WIC, the result would be healthier babies — and a healthy cut in medical bills.

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General Accounting Office, place a low priority on filing their tax returns, and the system of filing taxes withheld from employee wages is so complicated even the IRS gets confused.

The issue arose last February when the House Ways and Means oversight subcommittee looking into the issue of why the IRS's inventory of accounts receivable had climbed to almost \$100 million. Analysis of the records indicated that 676 federal agencies owed \$185 million in back taxes, with 63 agencies owing \$178 million of the total.

But under further probing, most of the debt evaporated. Some \$141 million turned out to have been incorrectly assessed or already paid and incorrectly credited. For example:

The U.S. Information Agency owed \$1.4 million because somebody in the Treasury Department mistakenly voided a check for that amount. How that happened remains a mystery to GAO. "Nobody we talked to" knows why the check was voided, said Paul L. Posner, GAO associate director for tax issues. However, it turned out that the agency had earlier overpaid its taxes by \$1 million, and wrote a new check for the rest.

The Army Communication Command sent in a first-quarter payment late. The IRS mistakenly credited it to the next quarter, resulting in a seeming overpayment, which the agency refunded. However, the IRS then recorded a deficiency for the first quarter. Meanwhile, The refund theck was sent to a different office, which didn't know what to do with it, o that the deficiency was not

leared up for nearly a year. The GAO was recorded as owing oney, which, it turned out, had

en posted to the wrong account at The IRS itself was listed as ow-

g \$449, noted Rep. Raymond J. cGrath (R-N.Y.). "It doesn't make ed IRS Commissioner Fred T. ldberg Jr.

some agencies did, in fact, owe ney, including the Environmen-Protection Agency (\$283,000) State Department the

5,000). And the GAO found that e than two-thirds of the agenit investigated filed returns This didn't make the subcomee members happy, either.

When the Department of Justice nically files late tax returns, the Department of the Treasr EPA can't figure out how to 's tax returns-if federal govent agencies can't collectand to the IRS, how on earth do xpect the rest of the American my to do so " asked Rep. L. Dorgan (D-N.D.).

IRS does not assess interest alties against agencies, which bidden by law from using apted funds for purpos ieir programs, but Goldberg that when they file late, it ates the IRS's task and everyone's time and taxpayney. Payment of withholding a chronic tax problem. Earyear, the GAO found that -third of private businesses tion were penalized at least the previous year for some in this area.

The plight of the Montreal Protocols illustrates how one dedicated lobby group with powerful friends can frustrate the weight of the U.S. government and a major industry, especially if those friends include Judiciary Committee Chairman Joseph R. Biden (D-Del.), aviation subcommittee Chairman Wendell H. Ford (D-Ky.) and Sen. Ernest F. Hollings (D-S.C.), a former trial

The issues involved go to the heart of an American's right to sue, and there are serious arguments for both sides.

The Montreal Protocols were developed in 1975 at a meeting of the International Civil Aviation Organization (ICAO) in Montreal. The treaty would revise the Warsaw Convention of 1929-the small print on the

1966 to provide \$75,000 to U.S. citizens. mas updated in But throughout its history, the Warsaw Convention has allowed passengers to sue airlines for additional damages if they could prove the airline was guilty of "willful mis-

The Montreal Protocols would increase automatic payments to about \$130,000, a change that is generally accepted. But the trial lawyers are adamantly opposed to another basic change, a new supplemental compensation plan financed by a \$3 fee on each international passenger that would pay for additional damages-including for pain and suffering-in an arbitration procedure outside the courts.

"This is a mandatory insurance scheme that adds to the price of the ticket," said Alan Parker, a spokesman for the trial law-

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the voic was 50 to 42, far short of the 67 needed to ratify the treaty-one unidentified senator was set to vote for the treaty and was surrounded by staff members working to bolster his resolve. Then came the phone call from his home district.

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"One trial lawyer called him, and after that phone call, we lost him," said the lob-J. byist. tic ou

Asked about his and Boggs's role, Korologos said, "What do you want me to say except guilty? We double up on them pretty

This year, the airlines were the victim of a delaying game, sources said. Senate Forpot eign Relations Committee Chairman Clairoc borne Pell (D-R.I.) and most of his staff are arly sympathetic to the treaty, and promised to орр hold a hearing early in the session. But the righ hearing was repeatedly delayed. Α

The problem apparently was that the staff has trea

Mothers' Nutrition Program Is Effective, U.S. Study Finds Later Medicaid Outlays Sharply Reduced

By Spencer Rich Washington Post Staff Writer

The government's special nutrition program for low-income women, infants and children (WIC) sharply reduces later Medicaid health outlays for the mother and child and also results in improved birthweights, according to an Agriculture Department study.

The long-awaited study has special significance because of a protracted dispute over a study four years ago that came to the same basic conclusion-that WIC enhances the health of the mother and child. Despite its findings, and for reasons never made clear, the Agriculture Department altered the

The study "is solid proof that WIC works in providing essential food and nutrition."

-Sen. Patrick J. Leahy, Agriculture Committee chairman

summary statement of the 1986 findings to play down the beneficial health effects.

The new study, in contrast, was hailed by the current agriculture secretary, Clayton Yeutter, as showing that "Medicaid-eligible pregnant women who participate in the WIC program have healthier babies who require less Medicaid assistance after birth than those of low-income pregnant women who don't participate."

Catherine Bertini, assistant secretary for food and consumer services, called the findings "exciting." Robert Greenstein, director of the department's Food and Nutrition Service in the Carter administration and now head of the nonprofit Center on Budget and Policy Priorities, said, "This reinforces the earlier study."

Senate Agriculture Committee Chairman Patrick J. Leahy (D-Vt.) said that the new study "is solid proof that WIC works in providing



essential food and nutrition to hungry mothers and children."

THE WASHINGTON POST

The study was released as Congress moved toward a final decision, possibly this week, on funding for fiscal 1991-expected to be set at \$2.35 billion, about \$200 million over fiscal 1990. The funds are estimated to allow about 52 percent of eligible low-income pregnant women and children to participate. In 1990 about 4.5 million women and children received special food supplements when found to have nutritional deficiencies that could affect the health of the mother and child.

The study, conducted by Mathematica Policy Research Inc., found that in five states, when mothers received program foods before birth, the government's Medicaid spending averaged between \$277 and \$598 less for health care of the mother and child in the first 60 days after birth than in cases where the mothers did not receive special prenatal foods.

Looking at program costeffectiveness, the study found that "for every dollar spent on the prenatal WIC program, the associated savings in Medicaid costs during the first 60 days after birth ranged from \$1.77 to \$3.13."

George S. Crock **P.O. Box 1419** Nags Head North Carolina 27959

Dear President Bush and Members of Congress,

The notion that when "the rich get rich, the ridiculous. The mentality that suggests that the ma great democracy leaves anything other than oppor well as the rich is incorrect. If the rich get poor, then

Most democratic and some republican members suggest that we change places with the Soviet Unic then decline into economic disaster. It appears tha all. While Gorbachev begins to lead the world into to economic recovery, we seem to be planning oblivion. Ladies and gentlemen of the Congres courage to win for your nation for fear of losing yo your senses soon before we become the largest por lic in the world—to only be known then as The Uni of America.

My plan will work.

I. Add high luxury tax-5. Automobil 1. Cigarettes 3. Gas 6. Jewelry 2. Alcohol 4. Yachts

We will save (lives and health) additional mone help to reduce the national deficit, by lowering 1 costs as more become non-smokers and non-drinke

Use of gas will be reduced and the tax added wi price of fuel plummets with less consumption, alsc mental concerns.

II. Reduce capital gains tax substan

Virtually all segments of the population will be reduction of the capital gains tax.

It will pump billions into our faltering economybut also for the middle income and the poor. We sion, not a recession as suggested by Greenspan quarter we will know, he says, as he further def nation's economy.

There are thousands of simple ways to save th doing your job! Rich bashing is like killing the nation's golden eggs-COME TO YOUR SENSES!

Land and Sincerely,

A poor rich man, who is grateful to be an Americar