

REPORTS OF NOTE

**Delivering Results:
A Progress Report
on Brain Research**

The brain is a complex structure with more than a billion nerve cells that are capable of forming connections with thousands of other cells. How we think, feel, learn, respond, remember, communicate and control our movements is determined by our brain.

The Dana Alliance for Brain Initiatives recently presented its most recent report on Capitol Hill to scientists, reporters and members of Congress. *Delivering Results: A Progress Report on Brain Research* highlights successful brain research from the past five years and projects accomplishments that are likely to occur in the next five.

The Dana Alliance for Brain Initiatives
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**New Findings on Children,
Families, and Economic Self-
Sufficiency: Summary of a
Research Briefing**

New Findings on Children, Families, and Economic Self-Sufficiency highlights recent work regarding the effects of welfare on children and the influence of child care on families' efforts to attain self-sufficiency.

The report asks: How do transitions into and out of welfare affect a child's development? What role does child care play in parents' attempts to attain self-sufficiency? Do child care subsidies help or hinder parents' efforts to work? How does child care affect children's well-being?

Recent studies have reached the unsurprising conclusion that poverty has a negative impact on the lives of children and their families. For example, children in poverty are more likely to exhibit behaviour problems than children who are better off. It is obviously difficult for parents trying to succeed in welfare-to-work programs to find quality child care that is affordable — an important failure of our present system.

The report indicates that many chil-

dren living in poverty receive child care that does not support their optimal development and may be compromising their health and safety.

National Academy Press
2101 Constitution Avenue, NW
Washington, DC 20418

**Effect of Corticosteroids for
Fetal Maturation on Perinatal
Outcomes**

Recently the U.S. National Institute of Child Health and Human Development and the Office of Medical Applications of Research convened a Consensus Development Conference on the *Effect of Corticosteroids for Fetal Maturation on Perinatal Outcomes*. This report is a compilation of the conference's findings; a summary statement is also available.

Many questions were raised, including the following: When should antenatal corticosteroids be used? What are the short-term and long-term benefits of treatment for both the infant and mother? What is the influence of corticosteroid dosage, timing, and circumstances of administration on the outcome? What are the economic consequences? What are the recommendations for use of antenatal corticosteroids? What further research should be conducted to guide clinical care?

The panel concluded that antenatal corticosteroid treatment for fetal maturation reduces mortality, respiratory distress syndrome and intraventricular haemorrhage in preterm infants. These benefits are not limited by gender or race and extend to gestational ages between 24 and 34 weeks. It was undetermined whether therapy increases neonatal or maternal infection, but the risk of death from prematurity is greater than the risk of infection. Antenatal corticosteroid therapy is recommended for women at risk of premature delivery. The treatment will result in a lower incidence rate of neonatal morbidity and mortality and can also lower health care costs.

NIH Consensus Program Information Service
P.O. Box 2577
Kensington, Maryland 20891
Internet <ftp://public.nlm.nih.gov/hstat/nihcdcs>

**International Medical
Graduates in U.S. Hospitals:
A Guide for Program
Directors and Applicants**

International medical graduates (IMGs) face extreme difficulties when they come to the United States for medical residencies. They represent diverse cultures, ethnicities, languages and educational backgrounds. The transition is difficult for both IMGs and for the physicians who direct residency programs. Differences in attitudes, customs, traditions and practices often present real or apparent conflict. The process of integrating IMGs into the United States medical community is challenging for both parties. This is a sensitive area in medical training where concerns about quality collide with the need for IMGs as vital staff in many hospitals.

International Medical Graduates in U.S. Hospitals: A Guide for Program Directors and Applicants describes in detail the undergraduate and postgraduate medical education, accreditation, residency training and health care systems in various countries ranging from Bangladesh to Turkey.

The guide also examines the many challenges that confront the IMGs when they enter the United States, i.e., obtaining immigrant visas, interviewing for admittance to medical programs, learning sensitive bedside manners, developing working relationships within the medical team and learning other basic skills.

The guide serves to better educate both IMGs and U.S. program directors about the various factors involved in making the transition between the IMGs' medical backgrounds and the U.S. medical institutions. The American College of Physicians' International Medical Graduate Committee has developed an orientation program of acculturation and training strategies to better serve IMGs and their programs.

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