The Dutch Water Whisperer
In December 2012, Shaun Donovan, the secretary of Housing and Urban Development, was on vacation in Berlin when he decided to detour to the Netherlands. He wanted to get a firsthand sense of the famed Dutch approach to water management. Hurricane Sandy struck six weeks before, and in the aftermath, President Obama asked him to lead a task force, whose objective was not just to rebuild but also to radically rethink the region’s infrastructure in light of climate change.

In the Netherlands, a man named Henk Ovink offered to be Donovan’s guide. Ovink was the director of the office of Spatial Planning and Water Management, meaning, essentially, that it was his job to keep the famously waterlogged country dry. As he learned about various Dutch innovations, Donovan was struck by the fact that Ovink looked at water as much

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A Heroin Trail of Grief
Karen Hale averts her eyes when she drives past the Super 8 motel in this picturesque riverfront town where her 21-year-old daughter, Alysa Ivy, died of an overdose last May. She has contemplated asking the medical examiner, now a friend, to accompany her there so she could lie on the bed in Room 223 where her child’s body was found.

But Ms. Hale, 52, is not ready, just as she is not ready to dismantle Ms. Ivy’s bedroom, where an uncapped red lipstick sits on the dresser and a teddy bear on the duvet. The jumble of belongings both comforts and unsettles her — colorful bras, bangle bracelets and childhood artwork; court summonses; a 12-step bible; and a Hawaiian lei, bloodstained, that her daughter used as a tourniquet for shooting heroin into her veins.

“No, my son asked me not to make a shrine for her,” Ms. Hale said. “But I don’t know what to do with her room. I guess on some level I’m still waiting for her to come home. I’d be so much more empathetic

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Small-Town Cancer Puzzle
One night in May 2008, in a modest ranch house in central Nevada, Ryan Brune woke with a headache. He had complained about the pain earlier that week, but his doctor said it was migraines. This time, he couldn’t sleep, and so his mother, April, drove him to the hospital in Fallon, a farming town of 8,200 where the family had lived for most of Ryan’s 10 years. He was an otherwise healthy boy, with fleshy cheeks and sandy blond hair, but a CT scan revealed a chestnut-sized mass

Fallon, continued on page 2

No-Frills Street Medicine
Near a row of card tables set up near the trees in Santa Barbara’s Pershing Park, a couple dozen volunteers—doctors, mental-health workers, clinicians and med students—are decamped.

Dr. Jason Prystowsky, 39, the medical director of Doctors Without Walls, approaches them in a worn, black leather jacket, motorcycle helmet in hand. This is a no-frills, no-prescription-pad, no-exam-

Homeless, continued on page 3

HIV’s Grip on Deep South
One night after midnight in 2012, Deon Haywood was sitting at home, in New Orleans, watching TV and having a drink, when she got a phone call. The owner of her office building was on the line.

“There’s been a fire,” he said.

Haywood ran out to her car and drove to North Jefferson Davis Parkway, to the stout gray building that housed Women with a Vision, a community nonprofit she runs, which does HIV-prevention work and other forms of advocacy geared toward women of color. In Louisiana, the death rate from AIDS is nearly twice the national average. Women with a Vision, founded in 1991, survived Hurricane Katrina, and kept pursuing what public-health workers term

HIV, continued on page 3

Untangling a Birth Defect
As a newborn in 1988, Brooke Stone was diagnosed with a congenital heart defect known as dextro-transposition of the great arteries, and underwent a complex surgery to correct her blood flow.

Stone’s doctors knew that this surgery would probably not be her last. Of the 40,000 children in the United States born with congenital heart disease each year, 50 percent will require at least one

Heart, continued on page 3
Who We Are

Hollywood, Health & Society, a program of the USC Annenberg Norman Lear Center, is a free resource for entertainment writers working on storylines about health, health-care coverage and climate change. Funders have included the CDC, the Bill & Melinda Gates Foundation, the Grantham Foundation, the Barr Foundation, The California Endowment, the Energy Foundation, ClimateWorks and the Skoll Global Threats Fund.

Fallon, continued

in his brain. By morning, he was flown to Palo Alto, and the tumor was removed. Ryan had glioblastoma multiforme, a brain cancer that rarely afflicts children. His likelihood of survival was 1 percent.

When Ryan returned to Fallon to spend his last months at home, his hospice doctor mentioned that a friend, Alan Levin, “might know something” about his illness. Levin, who phoned April in September, struck her as “a very smart man.” He was both an immunologist and a lawyer, and in the 1980s, he had served as an expert witness in a lawsuit that accused two chemical companies of polluting drinking water and causing dozens of cases of childhood leukemia in Woburn, Massachusetts. (The suit inspired the book and film, A Civil Action.)

Levin thought Fallon bore an unsettling resemblance to Woburn. From 1997 to 2002, Fallon had also suffered a high incidence of acute lymphoblastic leukemia among children; 16 cases were diagnosed, an alarming number for a small town. Health officials declared it the most significant childhood cancer cluster on national record and launched an investigation unprecedented in cost and scope. They never found the cause.

Levin suspected corporate negligence: He had evidence that a pipeline transporting jet fuel to the Fallon Naval Air Station had leaked underneath where Ryan attended preschool. Levin believed both the leukemia cluster and Ryan’s condition could be traced to fuel exposure.

Reader the story, more on childhood cancers and clusters, and the CDC’s investigative study. ■

Dutch, continued

in cultural as in engineering terms, which was a function of the centuries-old need of the Dutch to act together for protection.

For his part, Ovink said it dawned on him during Donovan’s visit that the post-Sandy turmoil in the U.S. was an opportunity. Dutch water-management experts have done such a good job of protecting their country that they rarely get to practice with water crises — whereas America was facing something monumental that as a culture it didn’t yet grasp.

When Donovan arrived back in the U.S., he opened an email from Ovink that said, in effect, “I hope this isn’t too forward, but could I come work with you?”

Ovink is a compact man with a shaved head and a bird-of-prey gaze who moves as if he were struggling to keep his wiry energy in check. His father, grandfather and great-grandfather were all architects. He began to study art and math, then bowed to the inevitable and turned his attention to architecture. He entered government as director of housing and planning for the province of South Holland. Colleagues describe him as driven, smart, fast-talking, single-minded.

He was clearly eager for the challenge of persuading a giant country that it needs to live with water and not simply resist it. But he was skeptical about anyone’s ability to effect meaningful change in the U.S.

Beyond that, Ovink feared that politics might undermine any chance to encourage new thinking about water management. “When I mentioned climate change to one official,” he said, “she almost hit me.”

But the need for new thinking couldn’t be greater, Ovink said. Climate scientists predict that by the end of the century, sea levels will rise by between one and a half and four feet. New York City could see storm surges up to 24 feet. Miami Beach could be under water. “Water has not been a policy issue in the U.S.,” Ovink said. “That’s because you’re mostly all above sea level. But what if the sea level changes?”

Read the story, and explore a major report on how climate change is already affecting the U.S. ■
Heroin, continued

now. I used to take it personal, like she was doing this to me and I was a victim.”

In the wake of the prescription painkiller epidemic, heroin, much of it Mexican, has wormed its way into unsuspecting communities as a cheaper and often more easily obtained alternative. Ms. Ivy’s was believed to be the seventh fatal heroin overdose in eight months in this town of 13,000 on the St. Croix River near Minneapolis.

Two months after her death, and before yet another young Hudson woman died of a heroin overdose in October, nearly 500 townspeople crowded into the First Presbyterian Church for a forum called “Heroin in Hudson: A Community in Crisis.”

“It’s a tight-knit community, and these kids all knew each other,” Patty Schachtner, the St. Croix County medical examiner, said of those who overdosed. “They were not what you might expect. They were not the faces of heroin addiction we see on television.”

Nationally, those faces are getting younger and whiter. The most recent federal data show 19,154 opioid drug deaths in 2010, with 3,094 involving heroin and the rest painkillers. Eighty-eight percent of those who died from heroin were white, half were younger than 34, and almost a fifth were ages 15 to 24.

Read the story, and more on prescription drug abuse, heroin overdose and treatments.

Heart, continued

major surgery, according to the Children’s Heart Foundation. Of those, almost all will require regular follow-up care, with many needing one or more additional surgeries because of later-life complications.

The challenge today is to ensure that post-surgical patients survive long enough to benefit from advances in care that are evolving as patients age. Surviving means receiving ongoing monitoring and care — which only about half of adolescent and adult patients currently receive — allowing doctors to intervene before patients suffer irreversible cardiac damage.

Some lifesaving advances take decades to achieve. The second procedure that saved Stone’s life evolved over more than half a century, the result of work by five surgeons from five different countries — Sweden, Canada, Brazil, Australia and the United States.

“We waited 24 years for this surgery,” says Stone’s dad. “Twenty-four years.”

Read the story, and more on congenital heart disease.

Homeless, continued

nation-table, come-as-you-are, leave-healthier type of practice.

The goal of Doctors Without Walls, he says, is to “provide free medical care to those with the highest need in Santa Barbara.”

Prystowsky, who grew up in Danville, Calif. comes from a family well stocked with doctors. His dad was a dermatologist. One grandfather was a pediatrician and the other a urologist.

“Growing up in a family of doctors, I knew my medical calling,” he says.

When Prystowsky, who did his undergraduate work at UC Santa Barbara, finished medical school at Northwestern University’s Feinberg School of Medicine, he focused on public health as a fellow at Emory University and chief emergency medicine resident at Grady Memorial Hospital in Atlanta. Then, he took his practice to places that needed it most.

“I worked all over the world and also on Native American reservations in the U.S.,” he says. “My career for 10 years was working with underserved populations displaced by war and poverty. I worked with Doctors Without Borders in Sudan for one year. I spent a year in the Middle East in Palestinian territory. I did Indian Health Services for the Navajo reservation near Chinle, Ariz. and Rosebud, S.D.”

Prystowsky came to Santa Barbara for a woman four years ago and ended up working full-time as an emergency room doc at Cottage Hospital in Goleta, Santa Ynez and Santa Barbara.

“Doctors Without Walls is my nighttime gig, he says, his brown eyes appearing both weary and brimming with enthusiasm.

Read the story, and more on the Affordable Care Act’s role in helping the homeless.

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