

Bordeaux wine stars in Malta

MALTESE WINE LOVERS were recently honoured with a visit to Malta by three of the most respected and influential wine people in Bordeaux, France.

Jean Guillaume Prats from the second growth Chateau Cos D'Estournel in Saint-Estephe, Gildas d'Ollone from the second growth Chateau Pichon Longueville Comtesse de Lalande in Pauillac, and Hubert de Bouard from the first growth Chateau Angelus in Saint-Emilion, held a tutored tasting, followed by a five-course dinner at the Radisson Bay Point Resort in St Julian's last Wednesday week.

During what has been described as the most professional and educational wine tasting ever held in Malta, the speakers gave an in-depth presentation of their various properties highlighting the history and different *terroirs* within their respective appellations.

Mr de Bouard, who is one of the world's most respected oenologists, stressed the importance of techniques rather than technology in the wines of Bordeaux.

During the course of the evening 15 different wines were tasted. Mr Prats mesmerised the 90-strong audience with three vintages of Cos d'Estournel (2001, 1995 and 1986) as well as the second wine, Pagodes de Cos 2001 and Chateau Marbuzet 2001, also in St-Estephe.



MICHAEL TABONE (second from right) with, from left: Dr Roberto Balbo, Gildas d'Ollone, Jean Guillaume Prats, and Hubert de Bouard

Mr d'Ollone fascinated everyone with three vintages of Pichon Comtesse (2001, 1998 and 1996) as well as the second wine Reserve de la Comtesse 2001 and Chateau Bernadotte 2001 while Mr de Bouard delighted all present with his Angelus 2001, 1995 and 1992 as well as the second

wine, Carillon de L Angelus 1999 and his family's new star property in Lalande de Pomerol, La Fleur de Bouard 2001.

The varying stages of maturity, and different nuances between all wines, confirmed why Bordeaux is still the Mecca of fine wine lovers.

At the end of the evening three double magnums were raffled in aid of charity and Lm460 were raised.

The evening was honoured with the presence of the French Ambassador, Patrick Chrismant, and was organised by Michael Tabone.

Moderate drinking and healthcare costs

A RECENT American study of health-care workers suggests that moderate alcohol consumption may reduce the risk of prescribed medications. The study was published in the latest issue of the academic journal *Addiction* by researchers Garnett McMillan and Sandra Lapham from the Behavioural Health Research Centre of the South-West, Albuquerque, NM, USA.

Given that alcohol may have both negative and positive effects on health status, we need to know more precisely how these effects of alcohol relate to the type and quantity (and hence, costs) of health service utilisation.

Research has shown that individuals with a history of heavy drinking have higher health-care costs than those who drink less, and that current (lighter) drinkers have the lowest costs – even lower than non-drinkers. But any implied causal relationship between alcohol consumption and health status (and health-care use) must be guarded and qualified.

To guard against such confounding effects,

health researchers at Albuquerque, USA, recruited 685 female health-care workers who provided detailed medical histories, diet and behavioural (life-style) information. All women completed a health risk appraisal (HRA) as part of the company's Employee Wellness Plan.

Researchers McMillan and Lapham then categorised women as moderate drinkers (two or more times a week and/or three or more drinks per occasion) or abstainers/light drinkers.

This latter group comprised those who never drank, or drank 'less than one day a week and only one or two drinks per occasion'. Of the moderate drinkers, only seven per cent drank four or more days per week and three or more drinks per occasion.

The novel aspect of the Albuquerque study was that the researchers sorted out one-to-one pairs of moderate drinkers and abstainers/light drinkers – who were closely matched in terms of HRA, age employment history, total health care costs (last two years), and very recent pre-

scription drug use.

Overall costs did not differ between moderate drinkers and abstainers/light drinkers; nor did out-patient costs (during the six-month observation period). Abstainers/light drinkers had about 17 per cent more prescription orders relative to moderate drinkers.

This difference between groups was not due to the possibly 'typically' higher use of prescription drugs by abstainers/light drinkers, since the two groups were already initially matched in terms of prescription drug use prior to the observation period.

Interestingly, an independent study in the same population of health-care workers revealed high levels of stress. The observed differences in the use of prescribed medication may reflect a difference in the way certain employees cope with stress.

It may be that moderate drinkers declined to use prescription drugs to avoid having to abstain from alcohol – something which might seem less of a 'sacrifice' for abstainers/light drinkers.

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