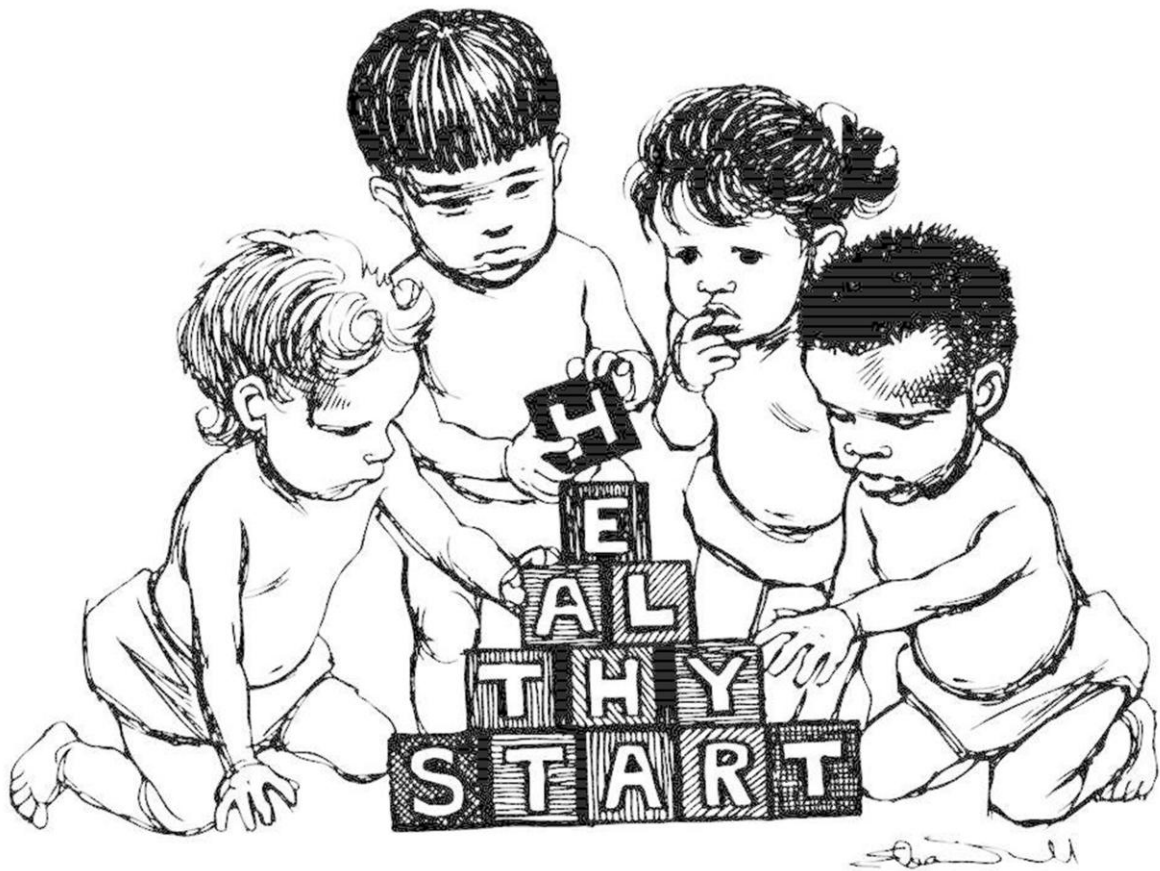


Just for Us



*Healthy Start - 20 Years and Beyond
Improving the Health of Families*

**Northwest Indiana
Healthy Start**

Issue 20

Spring/Summer 2011

Research in Brief

No “SimplyThick” for Premies

The Food and Drug Administration (FDA) has stated that the thickening product called “SimplyThick” should not be given to infants born before 37 weeks because it may cause a life-threatening condition. This is based on the reports the FDA has received about infants (who are consuming this product) contracting necrotizing enterocolitic (NEC) in which tissue in the intestines becomes inflamed and dies.

In the United States, 20% of moms have kids with different dads

A study done at the University of Michigan Institute for Social Research found that 20% of all American moms have kids who have different birth fathers. When researchers compare them with only moms with two or more kids, that figure is even higher: 28% have kids with at least two different men. The study’s author, Cassandra Dorius, said that this is similar to the number of American adults with a college degree. The data examined consisted of numbers from nearly 4,000 women who had been interviewed more than 20 times over a 27-year period. Ms. Dorius said that the consequences of these results are significant in that women with children from multiple fathers are more likely to be under-employed, to have lower incomes, and to be less educated. Katherine Stamps Mitchell (an assistant professor of human ecology and sociology at Louisiana State University in Baton Rouge) said that increasingly, more women are choosing to become moms before they are committing to marriage. Ms. Stamps Mitchell also stated that possibly women would be less likely to choose early and single motherhood if they thought they would have more options in the future.

Cell Phones Cause Brain Cancer?

The International Agency for Research on Cancer (IARC) made an announcement in May 2011 that cell phones may possibly cause brain cancer. What is important is that prominent organizations such as the World Health Organization (WHO) and the American Cancer Society (ACS) rely on the IARC for evaluation of cancer risks. Dr. Jonathan Samet, chair of preventive medicine at the UDS Keck School of Medicine said, “We reached this conclusion based on a review of human evidence showing increased risk of glioma, a malignant type of brain cancer, in association with wireless phone use.” The IARC also indicated that children are at particular risk, not only because their skulls are thinner but also because their lifetime exposure to cell phones likely will be greater than the exposure of current adults (Source: www.webmd.com). However, the IARC also said that it is important to put these findings into perspective. Kurt Straif, MD, PhD, MPH, head of the IARC Monographs program that the agency currently lists 240 agents as “possibly carcinogenic.” Also, while the IARC does

not make any specific recommendations per se, Dr. Straif said that some of the highest exposure comes from using mobile phones for voice calls. He indicated that if you text, or use hands-free devices, the exposure can be lowered by at least 10-fold.

LATEST DRUG NEWS FROM THE FOOD AND DRUG ADMINISTRATION (FDA)

1. **A drug called Victrelis (bocepravir) has been approved to treat Hepatitis C.**
2. *Approval has been given by the FDA for a drug called Horizant to treat moderate-to-severe restless legs syndrome.*
3. **Johnson & Johnson's McNeil division has recalled another lot of Tylenol, and added 10 lots to its previous January 14 wholesale-level recall of various Tylenol, Benadryl, Sudafed, Sinutab, and Roloids products.**
4. *Pfizer subsidiary Greenstone LLC has recalled its generic citalopram antidepressant (Celexa) and its generic prostate drug finasteride (Propecia, Proscar) due to a label switch. Taking the wrong drug could harm some users.*
5. **The FDA has approved Bristol-Myers' Yervoy for the treatment of late-stage, metastatic melanoma, a deadly skin cancer. The drug extends survival but does not cure the disease.**
6. *Merck's Zostavax shingles vaccine was approved by the FDA for people at age 50 and up. The vaccine was already approved for people age 60+.*
7. **The FDA has approved Benlysta, the first new lupus drug since 1955. Benlysta reduces lupus activity; it's hoped the drug will help patients reduce their need for steroids.**
8. *According to a new warning issued by the FDA, taking the epilepsy drug topiramate (Topamax) during pregnancy raises the risk of oral cleft birth defects such as cleft lip and cleft palate.*
9. **The FDA has approved a new treatment for people with worsening symptoms of severe chronic obstructive pulmonary disease (COPD), a lung disorder that makes breathing difficult.**
10. *A new drug called Vilbryd (to treat adults with major depressive disorder) has been approved by the FDA.*

For other approvals, or more information on the above-listed approvals, go to

www.webmd.com/drugs/News.aspx .



Healthy Start at the 20 Year Mark

Well, it's a little hard to believe but the Healthy Start project was started in 1991. After a bit of research, here is some information about this all-important project:

In 1991, the Health Resources and Services Administration (HRSA) started the Healthy Start Initiative with funding to 15 urban and rural sites with an Infant Mortality Rate (IMR) of 1.5 – 2.5 times the national average. The original areas that qualified for funding were:

Baltimore	Birmingham
Boston	Chicago
Cleveland	Detroit
District of Columbia	New Orleans
New York City	Northern Plains
Northwest Indiana	Oakland
Pee Dee region of South Carolina	Pittsburgh
Philadelphia	

Healthy Start was launched as, and still is, a community-based initiative in which local programs designed and implemented interventions targeting women, infants, their families, and the communities where they live. These interventions included outreach and case management for pregnant women and infants; broad-based public information campaigns; support services, individual and classroom-based health education; co-location of prenatal care services; and enhanced clinical services for women and infants.

The Healthy Start program was launched to reduce the IMR in these areas by 50% and to improve maternal and infant health in communities with high infant death rates. Total funding for the original 15 Healthy Start project areas through the five-year demonstration period was \$345.5 million. Congress subsequently appropriated \$96 million to continue the existing programs for a 6th year.

Because the sites were given a set of broad goals, a mandate for community involvement, and some guiding principles, Healthy Start programs had flexibility in designing and implementing their programs. As a result, each of the 15 projects set up their program to reflect the circumstances and resources available in their own community. However, total implementation of the Healthy Start program took longer than expected.

The Healthy Start project originally started out as a “Demonstration Project.” In 1994, 7 sites were added as special projects. In the second, or “replication” phase, from 1998 through 2000, 97 projects were added. In 2001, 9 new grantees were added. Twelve existing projects were categorized as “approved, but not funded” in that same year (remember that??). Funding was given to these sites in 2002.

One of the main justifications for Healthy Start, and one that a lot of people (both professionals and laymen) seem to understand is that it is generally more cost-efficient to try ahead of time to keep women from delivering low birth weight babies. According to www.healthstartassoc.org ,

The medical and social services that are required by low birth weight and very low birth weight infants are significant and the costs are high to society and the American taxpayer. Those babies that survive the first year incur medical bills averaging \$93,800. **First year** expenses for the smallest survivors will average \$273,900.

Just by enabling mothers to add a few ounces to a baby's weight before birth can make a big difference. An increase of about ½ a pound in birth weight saves an average of \$12,000 - \$16, 000 in first year medical expenses.

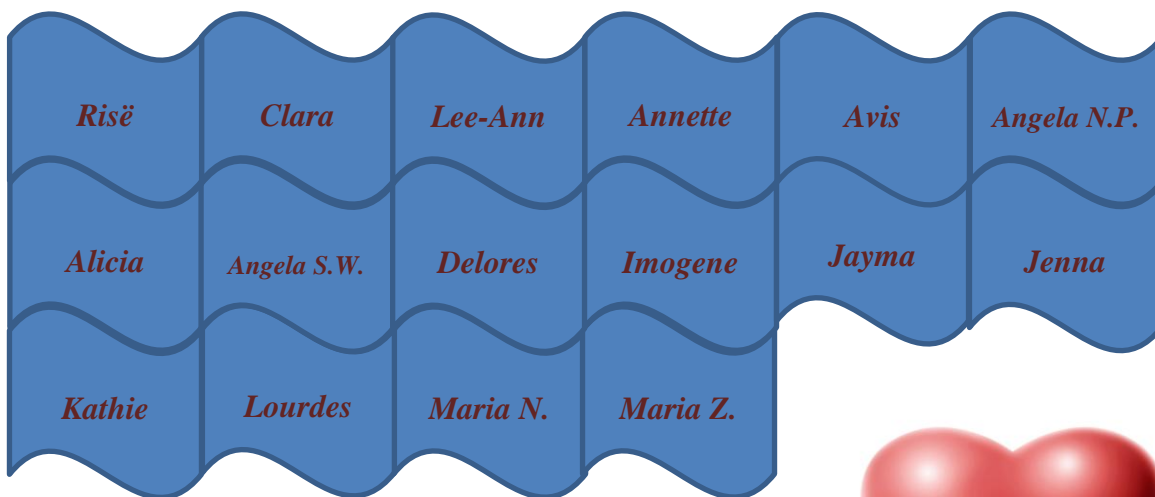
Racial disparities, as recognized when the project was created (e.g., the fact that African American and other minorities have increased rates of infant mortality and low birth weight babies) continues to pose a major public health issue for the U.S.

For more information, go to the following sources:

www.healthstartassoc.org

<http://emedicine.medscape.com/article/979717-overview>

NWI Healthy Start – Amazing, Caring Women



Spotlight on...

AIDS



Acknowledging that it has been 30 years since the first report of what came to be known as AIDS

Source: www.niaid.nih.gov/HIVAIDS ; www.cdc.gov

It seems difficult to believe that it has been 30 years since we first started hearing about Acquired Immune Deficiency Syndrome (AIDS). While acknowledging the presence of AIDS, one must remember that AIDS is ultimately caused by the human immunodeficiency virus (HIV). HIV progressively destroys the body's ability to fight infections and certain cancers. People diagnosed with AIDS may get life-threatening diseases called opportunistic infections. These infections are caused by microbes such as viruses or bacteria that usually do not make healthy people sick.

While many advances have been made scientifically, and the population has become more aware of means of prevention, the number of people living with HIV has continued to rise. This phenomenon has been attributed to the fact that highly effective drugs are allowing people infected with HIV (not full-blown AIDS) to live longer, healthier lives.

In the latest MMWR (06/03/11), CDC researchers say

- Every year about 50,000 U.S. residents are infected with HIV. Half of the newly infected are men who have sex with men. Nearly half are African-American.
- 1.17 million people in the U.S. are living with the virus and about 20% do not know they are infected.

In Indiana:

- By the end of December 2009, a total of 9,646 persons were living with HIV/AIDS (PLWHA) in the state of Indiana, up from 9,282 persons by the end of 2008.
- The disease continues to be male dominated, with the number of diagnosed males almost 4 times higher than that of females.
- The majority of PLWHA are in their middle ages, ranging from 40-49.
- However, the majority of people are diagnosed for the first time at the ages of 20-24.
- HIV/AIDS continues to affect Black males disproportionately more than their White counterparts.
- The overwhelming majority were diagnosed due to Men Having Sex with Men (MSM).
- The majority of PLWHA live in Central Indiana and the Indianapolis Metropolitan area.
 - The 2nd highest number of those diagnosed with HIV/AIDS in the state live in Lake County
- Marion County and Lake County had the most new diagnosis in the reported time period.
- The number of reported cases of children of HIV positive mothers in Indiana was 728, up from 698 in 2008.
- In 2009, 2 new cases of pediatric diagnosis were reported.
- Of all the children that were born to diagnosed mothers, 80.1% were exposed, while 19.9% tested positive for HIV or were diagnosed with AIDS.**
- The number of people that died of HIV/AIDS-related complications in Indiana peaked around 1995 and started to drop sharply due to the widespread availability of antiretroviral medications.
- In 2008, a new Vital Records system was developed and the number of deaths dropped in 2008 and 2009.
 - The majority of diagnosed people that died were Black males
 - The highest number of deaths occurred among persons aged 40-49
 - The majority of deaths were connected to MSM
 - Geographically, the highest number of deaths occurred in Central Indiana.
- In 2009, a total of 31,826 HIV/AIDS tests were administered in Indiana by the state, federally funded sites, compared to 30,503 in 2008.
 - Of the 31,826 tests, 190 (0.5%) had a positive result (down from 2007 and 2008 numbers)

- More tests were administered to males than females.
 - 25 tests were administered to Transgender persons in 2009
- The positive results for males were almost 3 times the number of female test results.
- Blacks had a similar positivity rate per 1,000 tests as compared to Whites.
- The largest number of positives came from the 20-29 age groups with 30-39 year old as runner-up.

The Youth Risk Behavior Survey (YRBS) surveys the health-risk behaviors of young people every 2 years. The last one done indicated that almost half of adolescents in Indiana have had sexual intercourse, while a third is currently sexually active.

- An encouraging 89.6% of Indiana adolescents have been taught about HIV and AIDS infection in school, but...
 - Only 58% used a condom during the last sexual intercourse.

For more information about HIV/AIDS in Indiana, please feel free to go to the following website link:

<http://www.in.gov/isdh/17397.htm>

** Please note that these numbers are cumulative and include all children, including those that were born before medication to prevent the spread of the HIV virus from mother to child was available.

June 5th, 2011 marked 30 years since the Centers for Disease Control and Prevention (CDC) and Morbidity and Mortality Weekly Report (MMWR) reported the first cases of AIDS in the United States.

JUNE 27th IS NATIONAL HIV TESTING DAY

A listing of available locations is located at the end of this publication.

Severe Weather Preparedness:

Tornadoes

TORNADO SAFETY

IN HOMES OR SMALL BUILDINGS:

Go to the basement (if available) or to an interior room on the lowest floor, such as a closet or bathroom. Wrap yourself in overcoats or blankets to protect yourself from flying debris.

IN SCHOOLS, HOSPITALS, FACTORIES, OR SHOPPING CENTERS:

Go to interior rooms and halls on the lowest floors. Stay away from glass enclosed places or areas with wide-span roofs such as auditoriums and warehouses. Follow the instructions of the facility safety officials.

IN HIGH-RISE BUILDINGS:

Go to interior small rooms or halls. Stay away from exterior walls
Or glassy areas.

IN CARS OR MOBILE HOMES:

ABANDON THEM IMMEDIATELY!! Most tornado deaths occur in cars and mobile homes. If you are in either of those locations, leave them and go to a substantial structure or designated tornado shelter.



IF NO SUITABLE STRUCTURE IS NEARBY:

Lie flat in the nearest ditch or depression and use your hands to cover your head.

Information retrieved from: www.in.gov (06/07/11)

www.spc.noaa.gov (06/08/11)

Severe Weather Preparedness:



Lightning Safety!

Lightning Safety Week June 19-25, 2011

www.lightningsafety.noaa.gov

All thunderstorms produce lightning and are dangerous. Lightning kills more people each year than tornadoes.

Lightning can strike as far as 10 miles away from any rainfall. Many deaths from lightning occur ahead of the storm because people wait to the last minute before seeking shelter. **You are in danger from lightning if you can hear thunder.** If you can hear thunder, lightning is close enough that it could strike your location at any moment. Get inside! **“When thunder roars go indoors!”**

Lightning injuries can lead to permanent disabilities or death. On average, 10% of strike victims die; 70% suffer serious long term effects.

Blue Skies and Lightning. Lightning can travel sideways for up to 10 miles. Even when the sky looks blue and clear, be cautious. If you hear thunder, take cover. At least 10% of lightning occurs without visible clouds overhead in the sky.

Inside a building with wiring or plumbing is safest. Inside a hard topped vehicle is safer than outside but avoid contact with metal or outside parts of the vehicle.

If you can't get to a shelter, stay away from trees or open areas where you may be the tallest object.

Avoid metal !! Avoid leaning against vehicles. Get off bicycles and motorcycles. Don't hold on to metal items such as golf clubs, fishing rods, tennis rackets or tools.

Get out of the water; it's a great conductor of electricity. Don't stand in puddles of water, even if wearing rubber boots.

Move away from a group of people. Stay several yards away from other people. Don't share a bleacher bench or huddle in a group.

12 million cloud-to-ground lightning strikes occur in the United States each



Lightning can heat its path five times hotter than the surface of the sun

HEAT WAVE!

Here are some things you should do when a heat wave strikes:

- Increase your intake of non-alcoholic, non-carbonated, caffeine-free beverages such as water and juice.
- Wear clothing that is light in color and loose fitting.
- Avoid the outdoors during extreme heat. Stay out of the sun!
- Stay in an air-conditioned environment if possible. Shopping malls offer relief if your home is not air-conditioned.
- Check on the elderly. They are especially susceptible to heat-related illness.
- Eliminate strenuous activity such as running, biking and lawn care work when it heats up.
- Eat fewer foods that increase metabolic activity/heat. Proteins are an example. Increased metabolic heat increases water loss.

HEAT-RELATED ILLNESSES AND THEIR SYMPTOMS

SUNBURN: Redness and pain in the skin. In severe cases, there is also swelling, blisters, fever, and headaches.

HEAT CRAMPS: Heavy sweating and painful spasms usually in the leg or abdomen muscles.

HEAT EXHAUSTION: The person becomes weak and is sweating heavily. The skin is cold, pale and clammy. The pulse becomes thread. Fainting and vomiting accompanies heat exhaustion.

HEATSTROKE/SUNSTROKE: High body temperature (106 degrees or higher) along with hot dry skin and a rapid and strong pulse. Unconsciousness is possible.

THE HEAT INDEX

This is the opposite of “wind chill”. The Heat Index combines the effects of heat and humidity. Warm temperatures feel even warmer when it is humid.

HEAT INDEX VALUES AND THEIR EFFECTS (HEAT INDEX CHART)

80 to 90 degrees – Fatigue possible with prolonged exposure and/or physical activity.

90-105 degrees – Sunstroke, heat cramps, and heat exhaustion possible with prolonged exposure and/or physical activity.

105-130 degrees – Sunstroke, heat cramps or heat exhaustion likely, and heatstroke possible with prolonged exposure and/or physical activity.

130 degrees and higher – Heatstroke/sunstroke highly likely with continued exposure.

SEVERE WEATHER TERMS AND DEFINITIONS

Warning – A particular weather hazard is either imminent or has been reported. A warning indicates the need to **take immediate action** to protect life and property. The type of hazard is reflected in the type of warning (e.g., tornado warning, blizzard warning).

Watch – A particular hazard is possible, or when conditions support its occurrence. A watch is a recommendation for **planning, preparation** and increased **preparedness** (i.e., to be alert for changing weather, listen for further information, and think about what to do if the danger materializes).

Tornado – A violently rotating column of air in contact with the ground and extending from the base of a thunderstorm.

Severe Thunderstorm – A thunderstorm that produces tornadoes, hail one inch or more in diameter, or winds of 50 knots (58 mph) or more.

Straight-line Winds – Generally, any wind that is not associated with rotation, used mainly to differentiate them from tornadic winds.

Flood – The condition that occurs when water overflows the natural or artificial confines of a stream or other body of water, or accumulates by drainage over low-lying areas.

Flash Flood – A flood that rises and falls quite rapidly, usually as the result of intense rainfall over a relatively small area. Usually a flash flood occurs within 6 hours of a rain event.

Slight Risk (of severe thunderstorms) – Severe thunderstorms are expected to affect between 2 and 5 percent of the area. A slight risk generally implies that severe weather events are expected to be isolated.

Moderate Risk (of severe thunderstorms) – Severe thunderstorms are expected to affect between 5 and 10 percent of the area. A moderate risk indicates the possibility of a significant severe weather episode. A Watch will likely be issued.

High Risk (of severe thunderstorms) – Severe weather is expected to affect more than 10 percent of the area. **A high risk is rare**, and implies an unusually dangerous situation and usually the possibility of a major severe weather outbreak.

Supercell – A thunderstorm with a persistent rotating updraft. Supercells are rare, but are responsible for a remarkably high percentage of severe weather events – especially tornadoes, extremely large hail and damaging straight-line winds.

Squall Line – A solid or nearly solid line or band of active thunderstorms, often yielding heavy rain and strong wind.

Downburst – A strong downdraft resulting in an outward burst of damaging winds on or near the ground. Downburst winds can produce damage similar to a strong tornado. Although usually associated with thunderstorms, downbursts can occur with showers too weak to produce thunder.

Funnel Cloud – A condensation funnel extending from the base of a towering cumulus or cumulonimbus cloud, associated with a rotating column of air that is *not* in contact with the ground (and hence different from a tornado). A condensation funnel is a tornado, not a funnel cloud, if either a) it is in contact with the ground or b) a debris cloud of dust whirl is visible beneath it.

Cold-air Funnel – A funnel cloud that can develop from a small shower or thunderstorm when the air aloft is unusually cold (hence the name). On rare occasions, small, relatively weak tornadoes can occur. These weak tornadoes last only a few minutes and are generally much less violent than other types of tornadoes.

HIV TESTING LOCATIONS IN NORTHWEST

East Chicago:

- **East Chicago Health Department, 100 W. Chicago Ave. (219) 391-8467**
 - Free
 - Conventional HIV Blood Testing
- **Planned Parenthood, 3723 Main St., Suite 3 (219) 397-4071 or (800) 230-7526**
 - Fees are income-based
 - Rapid HIV Oral Testing

Gary:

- **Gary City Health and Human Services Department, 1145 W. 5th Ave. (219) 882-5565**
 - Free
 - Conventional HIV Blood Testing
 - Rapid HIV Blood Testing
- **Planned Parenthood, 1124 Broadway (219) 883-0411 or (800) 230-7526**
 - Fees are income-based
 - Rapid HIV Oral Testing

Hammond:

- **Planned Parenthood, 7131 Indianapolis Blvd. (219) 845-0848 or (800) 230-7526**
 - Rapid HIV Oral Testing

Lake Station:

- **Aliveness Project of Northwest Indiana Inc.**
5490 Broadway, Ste L 3, Merrillville (219) 985-6170 or (800) 293-7312
 - Free
 - Conventional HIV Blood Testing

- **Brothers Uplifting Brothers Inc.**
6111 Harrison St., Ste 220, Merrillville (219) 985-2008
 - Free
 - Rapid HIV Oral Testing
- **Planned Parenthood, 8645 Connecticut St., Merrillville (219) 769-3500 or (800) 230-7526**
 - Income-based
 - Rapid HIV Oral Testing
- **Planned Parenthood, 2803 Boilermaker Ct., Ste 1F, Valparaiso (219) 462-5976 or (800) 230-7526**
 - Income-based
 - Rapid HIV Oral Testing
- **Lake County Health Dept., 2293 N. Main St., Crown Point (219) 755-3655**
 - Free
 - Conventional HIV Blood Testing

Chicago:

- **Advocate Trinity Hospital Emergency Department**
2320 E. 93rd St., Chicago, IL 60617 (773) 978-2424
 - Free
 - Rapid HIV Oral Testing
- **Le Penseur Youth and Family Services Incorporated**
8550 S. Manistee Ave., Chicago, IL 60617 (773) 375-8637
 - Free
 - Rapid HIV Oral Testing
- **South Shore Hospital Wellness Center**
2525 E. 83rd St., Chicago, IL 60617 (773) 221-4831
 - Free
 - Conventional HIV Blood Testing
 - Conventional HIV Oral Testing

Please feel free to make individual handouts of any of the pages within this Health Education newsletter! There is definitely some information that your participants may find interesting...



Building Blocks to Better Babies

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