



Hook Into Health

"Creating A Healthier Tomorrow"

Published by the Nevada State Health Division Volume 2: Issue 3 Fall 2000

West Nile Virus Surveillance

by Jeff Whitesides, Bureau of Disease Control and Intervention Services

The Nevada State Health Division recently applied for a Centers for Disease Control and Prevention (CDC) grant to provide funding for West Nile Virus (WNV) Surveillance. If funded, the grant would provide approximately \$90,000 to assist Nevada in developing and implementing dead bird and human/equine encephalitis surveillance activities focusing on West Nile Virus. The West Nile fever outbreak in the northeastern U.S. in the summer and fall of 1999 represented the first incursion of this exotic arbovirus into the U.S. As of December 9, 1999, 62 confirmed or probable human cases of WNV infection have been identified, including 7 deaths. The basic transmission cycle of West Nile fever involves mosquitoes feeding on birds infected with the West Nile Virus. Infected mosquitoes then transmit WNV to humans and animals. This outbreak occurred during the peak southerly bird migration, and the effect of this migration on the spread of the virus beyond the outbreak epicenter is unknown. The intent of the grant is to determine the extent of West Nile Virus across the U.S. Sick and dying crows in New York first drew attention to the disease outbreak and were the first victims. West Nile Encephalitis, is a mosquito-borne viral disease that can cause fatal inflammation of the brain. Infected humans can also experience flu-like symptoms such as fever and headaches. There is no vaccine against West Nile Encephalitis. By last September, bites from mosquitoes that carried the virus had killed 7 people in the New York area,

(continued on page 11)

Public Health

A Day In The Life

Good health is important. You feel happy and are healthier because your business has become a "smoke-free" environment. As a result of this new policy, you enrolled in a smoking cessation class sponsored by hospitals and public and private health agencies such as the Lung Association and the Cancer Society

What's Inside

<u>Leukemia</u>	<u>2</u>
<u>Influenza</u>	<u>2</u>
<u>Fruits & Veg.</u>	<u>3</u>
<u>Substance Abuse</u>	<u>4</u>
<u>Oral Health</u>	<u>5</u>
<u>Reports</u>	<u>5</u>
<u>Logo Contest</u>	<u>6</u>
<u>Red Ribbon</u>	<u>7</u>
<u>Turkey 101</u>	<u>7</u>
<u>Disease Summary</u>	<u>8</u>
<u>Express Yourself</u>	<u>9</u>
<u>Etcetera</u>	<u>11</u>

Mission Statement

"Promote and protect the well being of Nevadans and visitors to our state by preventing disease, injury, and disability."



From the Desk of:

Dr. Mary Guinan, State Health Officer

An Investigation of a Cluster of Leukemia Cases in Churchill County

Churchill County is a rural county with a population of approximately 28,000. Health care providers at the local hospital noted an apparent increase in cases of acute lymphocytic leukemia (ALL) in children during the first seven months of 2000. In July, Assemblywoman Marcia De Braga notified the State Health Division and requested assistance in assessing the problem. Data from the Nevada Cancer Registry which records all cancer cases in the state showed that during the five-year period 1994 to 1998 no cases of ALL were reported from Churchill County and one case was reported in 1999. There was no significant difference in the incidence of childhood cancers or leukemia in the state as a whole and Churchill County from 1994-1998. Between March and July 2000, six new cases of ALL were recorded by physicians in Churchill County, an apparent increase well above the expected level. All of the cases occurred in children between 3 and 19 years of age and all were residents of Fallon, a town with a population of approximately 8000. Background information on Fallon showed that the drinking water contained naturally occurring arsenic levels of 100 parts per billion (ppb), almost double the EPA standard of 50 ppb. A review of published literature found no association between arsenic and leukemia. Excess levels of bladder, lung and skin cancer in adults have been associated with long-term consumption of drinking water with high levels of arsenic but childhood cancers have not been associated with arsenic in drinking water. Clusters of cancers including leukemias have been reported from Europe and the United States. The cause(s) of leukemia are unknown and investigations of leukemia clusters to identify an etiologic factor have usually been fruitless. Community concerns of a possible environmental cause of the leukemia usually increase when leukemia clusters are identified.

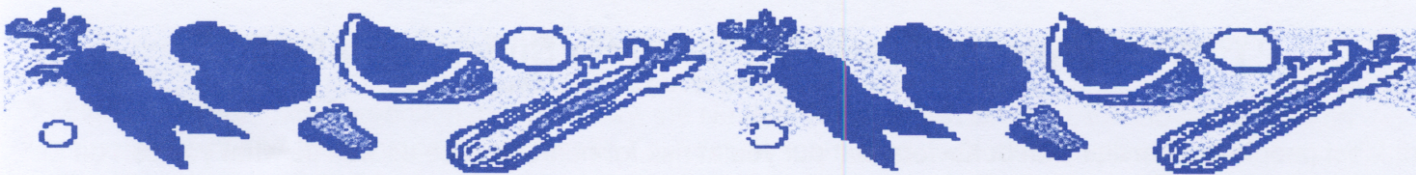
Influenza vaccine manufacturers have told the Federal Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC) to expect delays in flu vaccine shipments and, based on current estimates, that it appears likely that there will be a reduction of available influenza virus vaccine for the 2000-01 season. The Advisory Committee on Immunization Practices (ACIP), in a consensus recommendation, urged health care providers to begin thinking now about delaying adult mass influenza vaccination campaigns to November (typically these occur from mid-October through November) based on supply availability and to consider ways to ensure their high risk patients receive priority for vaccination if a severe vaccine shortfall were to occur. It is important to stress that vaccine will be available to vaccinate those at highest risk of complications from influenza, including those over 65 years of age and those with chronic diseases. There is no need for these patients to be concerned about availability of vaccine during the upcoming season. Two important factors complicate the amount of vaccine available: 1) the yield for this year's influenza vaccine A(H3N2) component appears to be lower than expected which limits the supply that can be developed in time for this flu season and, 2) two of the 4 manufacturers of influenza vaccine for the United States are experiencing some manufacturing problems. Both manufacturers are working closely with the FDA to address these problems. If a substantial shortfall of vaccine were to occur, the ACIP and CDC would provide modified recommendations for the 2000-2001 influenza season that emphasize a stepwise approach of first vaccinating persons at highest risk of death from influenza (and the health care workers who take care of them) and then vaccinating, as the vaccine supply allows, the other groups for whom vaccine is traditionally recommended. As the influenza season approaches, new information is expected to become available, and CDC and FDA will issue information updates. If a shortfall does occur, ACIP and CDC request that persons and organizations administering influenza vaccine join in voluntary efforts to ensure that influenza vaccine is administered first to the persons most likely to develop serious and life threatening complications from influenza.

Adapted from CDC e-mail correspondence, dated June 29, 2000

continued on page 10

Fall for Fruits and Vegetables

by Nola Haynes, RD, Bureau of Family Health Services



Fall for fruits and vegetables! They are fun and make you look oo-la-la! Their bright color, vibrant flavor and variety in texture complement any meal. They are also quick and easy to prepare on the road or right at home. Best of all, fruits and vegetables are nutritious, make easy snacks and desserts, and cost less than the typical snack fare. Take advantage of different fruits and vegetables. The National Cancer Institute (NCI) and the 2000 U.S. Dietary Guidelines for Americans recommends eating five or more servings of fruits and vegetables every day for better health.

Research continues to find strong links between increased fruit and vegetable consumption and the decreased risk of chronic diseases such as cancer, heart disease and stroke. Fruits and vegetable are valuable sources of significant vitamins and minerals, especially vitamins A and C, folate, and potassium. Fruits and vegetables also contain dietary fiber and naturally-occurring components such as phytochemicals (natural plant substances) that work with nutrients and dietary fiber to protect against disease. Most fruits and vegetables are naturally low in fat, calories and sodium, and contain no cholesterol. Fruits and vegetables eaten raw help clean teeth and promote good dental health.

Aim for variety-try many colors and kinds. Choose fresh, frozen, canned, or dried forms. Choose whole or cut-up fruits and vegetables most often rather than juices. Juices contain little or no fiber. Get on the road to 5 A Day for better health by following these ideas.

- Drink 100% fruit and vegetable juices in place of high-calories drinks, such as soft drinks.
- Add raisins, berries, and other fresh or dried fruits to your cereal.
- Include a mixed green salad or a vegetable soup with your lunch or dinner.
- Snack on the perfect grab-n-go foods: fresh apples, ripe plums and pears, carrots and celery. Have these washed and ready for eating on your refrigerator shelf.

- Store properly to maintain quality. Refrigerate most fresh fruits (not banana) for longer storage, and arrange them so you'll use up the ripest ones first.
- Keep dried fruit and nuts in your desk for quick and easy mid-morning or mid-afternoon snacks-go easy on the nuts, they're high in fat.
- Bring a brown bag lunch that includes at least one fruit and one vegetable serving.
- Be adventurous. Add one new fruit or vegetable to your shopping cart each week.
- Buy wisely. Frozen or canned fruits and vegetables are sometimes best buys, and they are rich in nutrients. If fresh fruit is ripe, buy only enough to use right away.
- Request a baked potato or sweet potato in place of french fries.
- Take advantage of salad bars. Fill your plate with greens, spinach and raw vegetables. Go easy on the pasta and creamy salads and regular salad dressings.

What counts as a serving?

- 1/2 cooked or canned fruit or vegetable
- 1/2 cup chopped or shredded, raw vegetables
- 1 cup leafy, raw vegetables
- 3/4 cup (6 ounces) vegetable and 100% fruit or vegetable juice
- 1 cup large pieces of sliced fruits or whole berries
- 1/2 cup cooked dry beans or peas

What Protects Nevada's Kids From Substance Abuse?

by Julie Abarzua, Bureau of Alcohol and Drug Abuse

Most people are familiar with behaviors that put you at risk for heart disease as well as what you can do to protect yourself. Few are able to recognize risks that may increase the likelihood of a child becoming involved in substance abuse or other problem behaviors. The presence of a risk factor does not mean that the problem will happen. However, the higher the exposure, the higher the likelihood that the problem will occur. The following risk factors are related to the likelihood of substance abuse problems.

RISK FACTORS

- Family history of alcohol, tobacco or other drug addiction
- Drugs readily available at school or in the neighborhood
- People in the community condone drug and/or frequent alcohol use
- Adults in the family do not know where the child is or what the child is doing
- Family rules are not clear or are not enforced consistently
- Adults are not clear with the child about their expectations regarding the use of drugs
- A boy that is/was aggressive and difficult to control at age 5, 6 or 7 (only gender specific risk factor)
- A child that strongly dislikes school
- A child that has failed to achieve in school beginning at an early age
- A child that has close friends who use alcohol or drugs
- A child that begins to use alcohol or other drugs at an early age
- A child that is going through a normal transition (grade school to middle school / middle school to high school)

Fortunately, there are environmental and personal protections that may be present to act as buffers. The following have been shown to reduce the likelihood of substance abuse and other problem behaviors.

PROTECTIVE FACTORS

- Adults clearly oppose drug use and consistently reinforce the child's healthy choices
- A family life that provides love, support and positive communication
- A family that sets clear standards and consequences
- The child receives support from other adults
- A school that has clear standards and consequences
- The child is motivated to do well in school
- The child is resilient and able to deal with setbacks or disappointments
- The child has opportunities for meaningful contributions to family, school and community
- A community that values children
- The child has friends that model responsible behavior
- The child has a sense of purpose and is optimistic about his or her own future

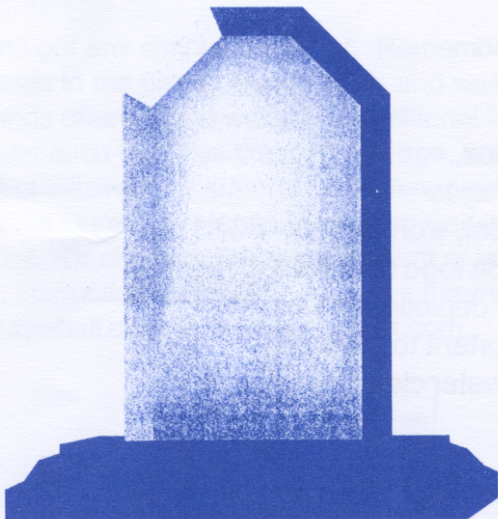
Sending a clear message to kids makes a difference. When a student in Nevada believes that a parent would disapprove of the use of alcohol, tobacco or other drugs, 17.9% report frequent alcohol use. However, when a student believes that a parent would approve or not care about the use of alcohol, tobacco or other drugs, 43.3% report frequent alcohol use.

There are no magic solutions except a lifelong commitment to those protective factors that have been shown to reduce the risk of substance abuse. Remember, good prevention decreases the likelihood of substance abuse in every one of Nevada's children.

Oral Health Initiative and Child and Adolescent Health Program Receives Awards

by *Chris Forsch, Contractor, Bureau of Family Health Service*

The Nevada Broadcaster's Association recently honored the Bureau of Family Health Services Oral Health Initiative, the Child and Adolescent Health Program and the Bureau of Disease Control and Intervention Services Immunization Program. All three programs received Special Appreciation Awards at the Nevada Broadcaster's Association Fifth Annual Hall of Fame Dinner Dance, held at the Desert Inn Country Club in Las Vegas on June 17th. The Oral Health Initiative was recognized for the oral health messages that were aired on radio stations throughout the state during National Children's Dental Health Month in February. Child and Adolescent Health was honored for the Abstinence Campaign. Abstinence messages have been airing on the radio and on television in Nevada for the last three years. They will continue to run for an additional two years. The Immunization Program was recognized for their continued support of the Non-Commercial Sustaining Announcements (NCSA) program. Melissa Foley, contractor with the Abstinence Program, accepted the award for Child and Adolescent Health. Sally Ellis from the Economic Opportunity Board of Clark County (EOB), accepted the award on behalf of the Oral Health Initiative. Deborah McBride accepted the award for the Immunization Program.



Bureau of Health Planning and Statistics Releases Two Reports

The Bureau of Health Planning and Statistics has published two new reports. The Nevada Report on Cancer 1995-1999 brings the reporting of cases to the Nevada Cancer Registry up to date. The report is an update to the original report covering the years 1991-1997, which was published in February 1999. This publication examines reported cases for all types of cancer combined and for five of the leading types of cancer including breast cancer, cervical cancer, lung cancer, colorectal cancer, and prostate cancer. Personal Health Choices is now in its twelfth edition. Choices is a joint publication of the Bureau of Health Planning and Statistics and the University of Nevada - Las Vegas Center for Health Information Analysis. This document presents hospital patient discharge data for 25 of the most common medical/surgical diagnoses by DRG (diagnosis-related group) as reported by Nevada's general acute care hospitals. For information on either report, call the Bureau of Health Planning and Statistics at (775) 684-4218.

NEVADA STATE HEALTH DIVISION NEWSLETTER READER INFORMATION

Would you like to remain on the mailing list for our newsletter? Yes _____ No _____

Do we have your correct address?
Yes _____ No _____

New Address:

Old address:

Would you like to receive our newsletter via e-mail instead of regular mail?
Yes _____ No _____

E-mail address:

Please tear off this sheet and send to Nicole Shore, Health Division, 505 E. King St. Room 201, Carson City, NV 89701-4797

Las Vegas 5th Grader Wins Logo Contest

by Val King, NDEP, Contractor for the Bureau of Health Protection Services

During National Drinking Water Week, representatives from the Groundwater Protection Task Force awarded various prizes to Edlin Rodriguez, a 5th grade student, for winning a logo contest launched by the Task Force. In a statewide contest, all 5th grade students in Nevada were asked to create a logo to represent the slogan, "Groundwater, Protect It Today, You May Drink It Tomorrow." Teachers had been provided with a video and other educational materials to help them teach the principal of protecting our groundwater from contamination, which can directly affect our drinking water. Over 20 schools participated, and Edlin Rodriguez of Walter V. Long Elementary School in Las Vegas won with a logo that clearly demonstrated her understanding of the groundwater issue. Edlin was presented with a plaque with her logo on it. She was also given a t-shirt which displayed the winning logo and the Task Force's slogan. Edlin's entry also won a groundwater model for her school, which simulates subsurface conditions. Colored tap water can be introduced into the model to demonstrate groundwater movement and how it can be polluted.

The Groundwater Protection Task Force is a group of local, state, and federal officials, headed by the Nevada Division of Environmental Protection, who deal directly with groundwater protection issues. The Task Force focuses on open communication, which encourages common goals and minimizes duplication of efforts.

Groundwater issues have become increasingly prominent in Nevada, and this project provided a positive step towards public awareness and education. The funding for this project was provided through the Health Division's Drinking Water State Revolving Fund (DWSRF) Program administered by the Bureau of Health Protection Services. The DWSRF Program receives its funds from the U.S. Environmental Protection Agency (EPA) and a 20% match of State funds. The main purpose of the DWSRF is to make available low-interest loans to community water systems in Nevada that need to upgrade their water systems to meet EPA requirements for safe drinking water. Other areas of assistance, including technical and managerial help provided by DWSRF contractors, are also available to water systems.



Edlin Rodriguez, a Las Vegas 5th grader, won a statewide logo contest with her depiction of why it's important to keep our groundwater clean.

TURKEY 101

(SPREADING HOLIDAY CHEER, NOT FOOD-BORNE ILLNESS)

by Richard Elloyan, Bureau of Health Protection Services

As the holiday season inevitably approaches, the Bureau of Health Protection Services would like to take a moment to pass along some food-handling basics, which will help insure this season stays a safe one. The two most common causes of food-borne illness are: time/temperature abuse and improper hand washing. These are easy pitfalls to avoid by following these simple tips:

1. If you don't already have a meat thermometer, it's time to break down and buy one. Meat thermometers are like VCR's and computers—once you have one you don't know how you got along without it. Turkey should be done when the innermost part of the breast or thigh reaches 180 degrees. If you are cooking a stuffed bird, the interior of the stuffing should be 165 degrees. Do not put all your faith in those handy red "pop-up" thermometers built into the turkeys as they test the turkey in only one single spot.

2. Here are three additional items that will limit the spread of harmful pathogens at those family gatherings. **WASH YOUR HANDS! WASH YOUR HANDS! WASH YOUR HANDS!** Wash your hands immediately after any raw food products of animal origin are handled. Encourage (no, demand) all those eager kitchen helpers do the same. Be sure to sanitize all food preparation surfaces that may have come in contact with raw foods before doing any additional food preparation.

It doesn't get any simpler than that. Remember to cook foods to the proper temperature and wash your hands often. If you would like additional information on such items as thawing, storage, and reheating of leftovers, or general sanitation, please contact the Bureau of Health Protection Services at 687-4750. Or check out the vast amount of information, instructions, and recipes on the Internet at www.butterball.com and www.norbest.com.



Red Ribbon Week

by Sharon Stewart Outreach Coordinator
BEST Coalition

Now a national weekly celebration, Red Ribbon Week allows educators, parents, community groups, student and others to focus on the work being done to stop the spread of drugs and to draw attention to the growing millions who have pledged to live drug-free. During October 1999 the BEST Partnership for a Drug-Free Nevada in partnership with the Nevada National Guard Counter Drug Task Force launched a campaign to reach eighteen rural elementary and middle schools in Judicial Districts 5, 7 & 8. Materials were put together consisting of drug, alcohol and tobacco abuse literature. The National Guard delivered these materials. In conjunction we sent red ribbons to each school with a large red ribbon poster. Each student who signed the pledge to live drug-free was signed the poster and was given a red ribbon to wear. Each teacher provided BEST with the total number of students that participated and BEST sent each student a "Thank You for participating in 1999 Red Ribbon Week" certificate. The focus this year for the BEST Partnership for a Drug-Free Nevada to get as many of Clark County's 132 elementary schools involved. Ms. Sharon Stewart, the BEST Clearinghouse & Outreach Coordinator, will coordinate Red Ribbon Week. In collaboration with the National Guard and the School District, students will receive red ribbons after taking an oath to live drug-free and will have the chance to sign the large pledge card. The Red Ribbon Campaign week is October 23-31, 2000.

Nevada Selected Communicable Diseases

	April-Jun 1999	April-Jun 2000	% change	YTD 1999	YTD 2000	% change
AIDS	50	93	86%	130	158	22%
AMEBIASIS	0	1	100%	6	1	-83%
ASEPTIC MENINGITIS	11	24	118%	24	38	58%
INFANT BOTULISM	0	1	100%	0	1	100%
CAMPYLOBACTERIOSIS	40	65	63%	67	92	37%
CHLAMYDIA	784	942	20%	1526	1900	25%
CHOLERA	0	1	100%	0	1	100%
COCCIDIOIDOMYCOSIS	10	9	-10%	19	14	-26%
CRYPTOSPORIDIOSIS	3	1	-67%	3	2	-33%
DIPHTHERIA	0	0	0%	0	0	0%
E.COLI 015	2	0	-100%	4	1	-75%
ENCEPHALITIS (PRIMARY)	2	0	-100%	4	0	-100%
GIARDIASIS	38	47	24%	84	83	-1%
GONORRHEA	301	333	11%	617	695	13%
HANTAVIRUS (HPS)	0	0	0%	0	0	0%
H.FLU INVASIVE	2	0	-100%	2	1	-50%
HEPATITIS A	27	18	-33%	67	34	-49%
HEPATITIS B	12	17	42%	33	22	-33%
HEPATITIS C	1	3	200%	5	4	-20%
HEPATITIS (UNSPECIFIED)	0	1	100%	0	2	200%
HIV INFECTION	53	103	94%	140	191	36%
LEGIONELLOSIS	1	0	-100%	6	0	-100%
LEPROSY	0	0	0%	2	0	-100%
LYME DISEASE	2	1	-50%	2	1	-50%
MALARIA	1	3	200%	1	4	300%
MEASLES	0	7	700%	0	7	700%
MENINGOCOCCAL DISEASE	3	2	-33%	5	3	-40%
MUMPS	2	0	-100%	3	2	-33%
PERTUSSIS	0	1	100%	2	4	100%
PLAGUE	0	0	0%	0	0	0%
POLIO	0	0	0%	0	0	0%
PSITTACOSIS	0	0	0%	0	0	0%
RABIES, ANIMAL	0	1	100%	0	1	100%
ROTAVIRUS	100	180	80%	690	481	-30%
RSV	364	126	-65%	1707	1316	-23%
RUBELLA	1	0	-100%	1	1	0%
SALMONELLOSIS	44	72	64%	84	111	32%
SHIGELLOSIS	14	21	50%	21	61	190%
SYPHILIS, P&S	4	1	-75%	4	3	-25%
SYPHILIS, TOTAL	34	9	-74%	64	27	-58%
TETANUS	0	0	0%	0	0	0%
TOXIC SHOCK SYNDROME	0	0	0%	0	0	0%
TUBERCULOSIS	38	16	-58%	54	55	2%
TULAREMIA	0	0	0%	0	0	0%
TYPHOID FEVER	0	0	0%	0	0	0%
YERSINIOSIS	2	1	-50%	4	3	-25%

Express Yourself

by, Melissa Foley, Contractor, Bureau of Family Health Services

What did Nevada's youth do to express their views on Teen Pregnancy?

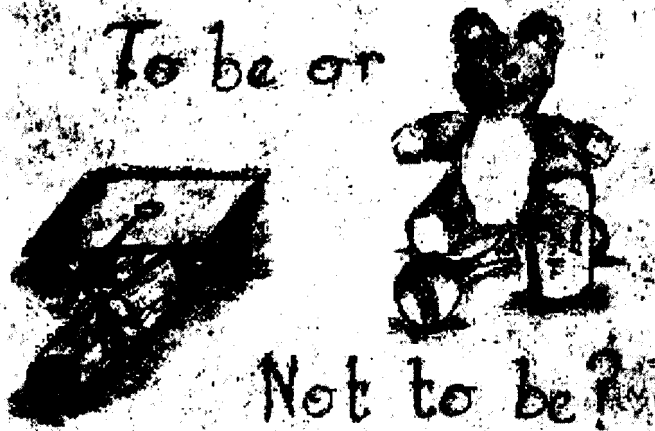
During Teen Pregnancy Prevention month in May, the Nevada State Health Division, the Governor's Youth Advisory Council and the Nevada Public Health Foundation sponsored an "Artistic Expression" contest. Youth across Nevada were asked to express themselves and bring awareness to Teen Pregnancy Prevention month by creating materials such as: posters, public service announcements, drawings and poems to be displayed in organizations throughout Nevada and used for future teen pregnancy materials.

Entries were separated into two categories, 9th-12th grade and 6th-8th grade, and 1st and 2nd place winners were selected from each category. The GYAC selected the entries based on the artist's creativity and meaningfulness of the message.

Category Grades: 9-12

1st Place

Megan Ferguson
Las Vegas High School
10th grader



2nd Place

Olga Zakharenkov
Reed High School
12th grader

Jump

I'm looking down onto the stream
Of people on the road
I tried to pray, but only scream
Broke through my frozen throat.
They say all memories arise
When you're about to die:
I see the light; I see his eyes;
And then-my mother's eyes.
She was fifteen.
She was. . .
There's nothing more to add-
She died when I was born.
And I have never seen my dad.
And now I know why he had gone
Away from her.
And I don't want my child
To be an orphan as I was.
I am fifteen.
I know I'll die if I decide to give birth.
I am fifteen.
What can I do?
I know: I'll break this bitter chain.
I'll jump-
Away from fear, away from pain.
We'll leave our little world-
My baby, though unborn, and me.
I feel he doesn't want to live.
Not with me, not today.
We jump...

(West Nile Virus, continued from cover)

hospitalized 55 others, and infected as many as 1,900 residents of northern Queens, the epicenter of the human outbreak. The West Nile Virus belongs to the family of flaviviruses, and takes its name from Uganda's West Nile Province, where it was first isolated in 1937. Since then it has caused epidemics in Israel, France, South Africa, Algeria, Romania, and, just last year, in Russia, where some 50 people in Volgograd died. Dr. David Thain, Nevada State Veterinarian and individuals from the USDA, Nevada Animal Damage Control, and the Washoe County District Health Department assisted the State Health Division in the development of the WNV surveillance plan for the grant application. Under the plan, laboratory samples would be collected

and analyzed from sentinel chicken flocks, ravens, wild horses and mosquitoes. Data from this surveillance will be analyzed including GIS mapping. The objective of the proposal is to develop statewide arbovirus surveillance for the West Nile Virus. The surveillance system will include active bird surveillance, active mosquito surveillance, enhanced passive veterinary surveillance and enhanced passive human surveillance. The Health Division will work with the Nevada Department of Agriculture, Animal Industry Division to coordinate this surveillance with the other partners. The State Health Division will be responsible for developing a data warehouse for all data and data analyses for the project.

For more information on West Nile Virus, see the CDC website at <http://www.cdc.gov>.

(Leukemia, continued from page 2)

The Health Division formed an investigation team which includes Dr. Randall Todd, State Epidemiologist, Dr. Wei Yang, State Biostatistician and myself and other members of our staff. Dr. James Hockenberry, the Churchill County Health Officer, is serving as the local information coordinator for the community. All the Fallon area physicians caring for the cases have been exceedingly cooperative and supportive of the investigation and will serve as information sources to their patients concerning the ongoing investigation. With the help of these physicians and the medical staff of the hospital, we have confirmed the diagnoses of the six new cases of ALL. We have talked with the community about environmental concerns and have taken the first steps to identify common factors in the cases.

Fortunately, no new cases were identified in August or the first two weeks of September. Over the next few months, we will be interviewing the families of case patients, reviewing medical records, examining environmental data and analyzing results to determine next steps. We have established a communication network with the families through the great efforts of the public health coordinator at the hospital and will share the results of the investigation

when completed. This increase in ALL is of great concern to us all. We have assured the community we will do our best to identify possible causes of the cluster of leukemias and contain these.

History tells us that it is unlikely we will find a cause. The most positive aspect of this process is the coming together of this community, uniting in a common concern in a cooperative spirit that I find unprecedented. This will assure the best collection of appropriate information to determine the possible presence of environmental risk factors for ALL. The Health Division gratefully acknowledges the wonderful community spirit of cooperation of Fallon and Churchill County. In future issues, we will report on results of the investigation.

ETCETERA

Mark Your Calendar! Upcoming Nevada Meetings, Seminars and Conferences

OCTOBER

12th Children of Children Display, Grant Sawyer Building, Las Vegas, Nevada
Displayed October 12 through November 17, 2000

31st *Happy Halloween*



NOVEMBER

1st-3rd Public and Rural Health Conference - Minden, Nevada
"Joining Hands for a Healthier Tomorrow"
Raise awareness of legislative issues & public policy, both state & federal
Provide opportunities for continuing education, skills building & networking
Address rural and public health concerns including Health People 2010
For information, please call: Teryl Eisinger, (775) 738-3828



23rd *Thanksgiving Day*

DECEMBER

25th *Merry Christmas*

National Health Observances

OCTOBER

National Breast Cancer Awareness Month	Child Health Month
Domestic Violence Awareness Month	Healthy Lung Month
Family Health Month	Dental Hygiene Month
National Lupus Awareness Month	National Liver Awareness Month
National Campaign for Healthier Babies/Sudden Infant Death Syndrome Awareness Month	

NOVEMBER

Child Safety and Protection Month	Great American Smokeout (20th)
National Diabetes Month	National Epilepsy Month
National Alzheimer's Awareness Month	
Diabetic Eye Disease Awareness Month	

DECEMBER

World AIDS Day (1st)
National Drunk & Drugged Driving Prevention Month
Safe Toys and Gift Month

Governor

Kenny C. Guinn

State Board of Health

Bernard Feldman, M.D., M.P.H., Chairman
Brian Allman, D.D.S.
William Quinn IV
Joey Villafior, M.D.
Brent Glaser, D.V.M
Robert Jones

Department of Human Resources

Charlotte Crawford, Director

Health Division

Yvonne Sylva, Administrator
Mary E. Guinan, M.D., Ph.D., State Health Officer

Frequently Called Health Division Numbers

Nevada State Switch Board - North	(775) 684-1000
- South	(702) 687-5000
Health Division Administration	(775) 684-4200
Health Planning & Statistics	(775) 684-4218
Office of Vital Records	(775) 684-4242
Health Protection Services	(775) 687-6353
Drinking Water State Revolving Fund	(775) 687-4750
Environmental Health	(775) 687-4750
Milk Sanitation	(775) 687-3787
Public Health Engineering	(775) 687-4754
Radiological Health	(775) 687-5394
Water (SDWA)	(775) 687-6615
Licensure & Certification	(775) 687-4475
Emergency Medical Services	(775) 687-4475
Family Health Services	(775) 684-4285
Women, Infants, and Children (WIC)	1-800-8NEVWIC
Baby Your Baby	1-800-4BYBNOW
SCC, Reno	(775) 688-1341
SCC, Las Vegas	(702) 486-7670
Community Health Nursing	(775) 687-6944
Community Health Promotion	(775) 684-8014
Disease Control & Intervention Services	(775) 684-5900
Women's Health Connection	1-888-463-8942
AIDS Hotline	1-800-842-AIDS
Immunization Program for VFC Providers	(775) 684-5913
Sexually Transmitted Diseases (STDs)	(775) 687-4800
Diabetes Control Project	(775) 684-5949
TB	(775) 684-5938
Tobacco	(775) 684-5914
Bureau of Alcohol and Drug Abuse	(775) 684-4190



Department of Human Resources
Nevada Health Division
505 East King Street, Room 201
Carson City, Nevada 89701
[HTTP://www.state.nv.us](http://www.state.nv.us)

Return Service Requested

PRSRT STD
U.S. Postage
PAID
Permit #15
Carson City, NV