Hook Into Health

"Creating A Healthier Tomorrow"

Published by the Nevada State Health Division Volume 3: Issue 3 Winter 2001-02

Happy Holidays From Yvonne Sylva, Health Division Administrator

As we bid farewell to the year 2001 and embark upon 2002, I want to take this opportunity to thank each member of our Nevada State Health Division team for your pursuit of excellence in providing public health services to all Nevadans.

I sincerely appreciate your professionalism, dedication, and long hours. Please remember, if you choose to drink, please do not drive! My best wishes for a prosperous 2002—Happy Holidays!

Nevada's State Health Officer Leaving

By JOELLE BABULA
REVIEW-JOURNAL
(reprinted by permission)
Copyright © Las Vegas Review-Journal

She helped eradicate the smallpox virus worldwide. She investigated the first cases of AIDS at the Centers for Disease Control and Prevention. And she pulled

(Continued on page 18)

Public Health

Employee of the Year

Dr. Randall Todd, Nevada State Health Division Epidemiologist and Heidi Sakelarios, Management Analyst with Nevada State Health Division, were selected as Employees of the Year. Both were recognized at the Health Division's Annual Christmas Luncheon on December 12, 2001. Congratulations for this noteworthy accomplishment!

What's Inside

Looking at Ourselves 2
Gossip—Words Can Heal 3
School Immunization Requirements 4
Disease Summary 5
Mr. Laughridge Injured 6
Reno Office Closes 6
Nurse's Retreat 7
Drinking Water 8
Substance Abuse 8
Biological Terrorism 9
Hail and Farewell 10-11
Relationships 12
CDC Flu Schedule 2001-2 14
Tobacco 14
Baby's First 15
Diets Don't Work 16
Health Observances 19

Mission Statement

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

Looking at Ourselves, Linking with Our Communities
Building a Unified Vision for Public Health in Nevada

by Heidi Sakelarios, Administration

Imagine your life nine years from now, in 2010. Visualize Nevada and its communities in 2010. What is life like? What are people doing? What impact has public health had on the activities and lives of Nevada's residents and visitors in 2010? What relationships exist among public health stakeholders?

These questions were posed to the participants of the future search conference, "Looking at Ourselves, Linking with Our Communities: Building a Unified Vision for Public Health in Nevada," held in Las Vegas on October 16-18, 2001.

Future Search is an innovative, strategic planning conference which has been used worldwide by hundreds of communities and organizations. It accomplishes two goals simultaneously. First, it helps large, diverse groups discover values, purposes, and projects they hold in common. Second, it enables people to create a desired future together and allows people to start working toward that goal immediately.

There are five tasks at future search. The first establishes a common history; the second is a map of world trends affecting the whole group. The third step calls for an assessment by stakeholders of what they are doing now that they are proud of and sorry about, an important step toward mutual understanding. Next, people devise ideal future scenarios, living their dreams as if they have already happened. Then, common themes are identified. The entire group confirms their common future, acknowledges differences, and makes choices about how to use their energy. In the final step, participants sign up to work together on desired plans and actions.

During the October conference, many of the common themes which were identified targeted the development and strengthening of the public health infrastructure within Nevada. Examples include: utilizing data and technology to assess the health status of Nevadans; promoting collaboration; educating community members as well as decision makers about the importance of public health and personal health and wellness; and ensuring access to culturally competent public health and health care services.

Additionally, several health-related issues were identified as public health priorities. Bioterrorism is a growing concern, not only for the state but for the nation. The need for prevention-focused programs which target health risks such as teenage pregnancy, tobacco use, substance abuse, HIV/AIDS, and STD, was also identified as continuing public health priority.

More information on these common ground issues and the recommendations developed by various work groups, as well as information on the public health agenda which emerged during the conference, can be found in the conference report, available from the Health Division or on the Health Division's web site: Health2k.state.nv.us

Day 1: Conference participants develop timelines tracking the evolution of public health and a mind map identifying emerging trends in public health.

(Continued on page 3)

(Continued from page 2)

Day 2: Participants utilized future scenarios to portray their desired future for Nevada, as a state, and for public health in Nevada.

Day 3: Participants develop recommendations and action plans for common ground issues identified during the development of future scenarios.

Gossip - Words Can Heal

by John Mac Lean,
Bureau of Family Health Services,
Primary Care Development Center,
SEARCH Program

There is a new program started by the federal government to reduce gossip in the workplace. Seventy-nine percent of the people interviewed said they have been hurt by gossip in the workplace. This effort is designed to promote ethical speech and build mutual respect, honor and integrity to the workplace. This site can be reached by the internet at www.wordscanheal.org.

There are several prominent people involved in this movement including, President Bush, Senetors, John McCain, Sam Brownback, Tom Daschle, and Joe Lieberman. The movement also includes Tom Cruise, Nicole Kidman, Whoopi Goldberg, Bette Midler, Florence Henderson, Goldie Hawn, and Rabbi Chaim Feld.

The organizers hope to teach children not to bully each other, politicians not to demagogue and coworkers not to gossip.

They are encouraging everyone to take the pledge.

The pledge is:

1. I pledge to think more about the words I use.
2. I will try to see how gossip hurts people, including myself, and work to eliminate it from my life.
3. I will try to replace words that hurt with words that encourage, engage, and enrich.
4. I will not become discouraged when I am unable to choose words perfectly, because making the world a better place is hard work.
5. And I am pledging to do that, one word at a time.

So take the pledge, get the anti-gossip message out, promote ethical speech, and curb the natural urge to gossip.

New School Immunization Requirements Hepatitis A and B and Varicella Vaccination Now Required for Nevada School-Age Children

by Bob Salcido, Bureau of Community Health, Immunization Program

On September 7, 2001 the State Board of Health adopted changes to Nevada Administrative Code 392.105 and 394.190 that will require children enrolling into public and private schools to be vaccinated against hepatitis A, hepatitis B, and varicella (chickenpox). Unless excused because of religious belief or medical condition **new students** enrolling in a public or private school **for the first time in Nevada** will be required to be vaccinated against hepatitis A, hepatitis B, and varicella in addition to the previously required immunizations (diphtheria, tetanus, pertussis, polio, measles, mumps, and rubella). Through these new requirements, the State Immunization Program hopes to reduce the serious and sometimes life-threatening illnesses caused by these vaccine- preventable diseases.

These new school vaccine requirements will become effective July 1, 2002 for hepatitis A and B vaccinations and July 1, 2003 for varicella. Children who have already had chickenpox will be exempt from this requirement. Parental recall is sufficient to document chickenpox. These new vaccine requirements will not apply to children who have already been enrolled in school.

The Centers for Disease Control and Prevention (CDC), Advisory Committee and Immunization Practices (ACIP), has recommended routine childhood vaccination against hepatitis B since November 1991. Routine infant and childhood vaccination against hepatitis B was implemented in Nevada in 1992. The ACIP has recommended the routine vaccination against varicella for infants and adolescents since July 1996. These new vaccination requirements have become the standards of medical practice and no infant should go through childhood without the protection of these vaccines. Currently the Nevada State Immunization Program provides hepatitis B and varicella vaccines to all children.

Recommendations for routine hepatitis A vaccination of children was made by the ACIP in October 1999 to 11 Western states including Nevada with the highest hepatitis A morbidity (more than 21 cases per 100,000 population, 1987-1997) in the country.

This year the Nevada State Immunization Program is supplying hepatitis A vaccines routinely to children ages two-to-six years and who are eligible for the federal Vaccines for Children (VFC) Program. To be VFC eligible, a child must meet at least one of the following criteria:

1) Medicaid enrolled
2) Native American or Alaskan Native
3) Uninsured (no health insurance of any kind)
4) Underinsured (insurance benefits do not cover immunizations*)

The State Immunization Program plans to inform all parents of these new school vaccination requirements through an extensive media campaign sponsored by the immunization coalitions of the State, the Clark and Washoe County Health Districts and several private medical organizations.

We hope that these new vaccination requirements will not be a burden on any school, parent, or vaccine provider. The Nevada State Immunization Program will work closely with any school, parent, or provider to ensure that every child is appropriately immunized and meets these new vaccine requirements.

* Underinsured children are eligible to receive VFC vaccine **only** at a Federally Qualified Health Center (FQHC) or Rural Health Clinic (RHC). Both Health districts and all Community Health Nursing offices are extensions of their local FQHC/RHC through a cooperative Memorandum of Understanding and can administer vaccines to underinsured children.

Communicable Disease Summary

Nevada

2nd and 3rd Quarter

	Apr-Jun 2001	Jul-Sep 2001	YTD 2000	YTD 2001	% Change
AIDS	46	44	217	141	-35%
AMEBIASIS	0	4	4	8	100%
ASEPTIC MENINGITIS	17	47	72	75	4%
INFANT BOTULISM	0	0	2	1	-50%
CAMPYLOBACTERIOSIS	52	43	166	153	-8%
CHLAMYDIA	1212	1303	2926	3733	28%
CHOLERA	0	0	0	0	0%
COCCIDIOIDOMYCOSIS	6	6	22	19	-14%
CRYPT0SPORIDIOSIS	2	2	4	5	25%
DIPHTHERIA	0	0	0	0	0%
E.COLI 015	3	10	11	14	27%
ENCEPHALITIS (PRIMARY)	0	0	0	1	100%
GIARDIASIS	39	43	141	136	-4%
GONORRHEA	424	520	1112	1379	24%
HANTAVIRUS (HPS)	0	0	0	0	0%
H.FLU INVASIVE	2	1	3	10	233%
HEPATITIS A	9	11	51	57	12%
HEPATITIS B	10	13	38	37	-3%
HEPATITIS C	0	4	12	4	-67%
HEPATITIS (UNSPECIFIED)	0	0	2	3	50%
HIV INFECTION	73	69	275	219	-20%
LEGIONELLOSIS	1	1	0	3	300%
LEPROSY	0	0	1	1	0%
LYME DISEASE	1	1	3	3	0%
MALARIA	0	4	4	6	50%
MEASLES	0	0	7	1	-86%
MENINGOCOCCAL DISEASE	1	0	2	6	200%
MUMPS	1	0	2	4	100%
PERTUSSIS	7	3	7	14	100%
PLAGUE	0	0	0	0	0%
POLIO	0	0	0	0	0%
PSITTACOSIS	0	0	0	0	0%
RABIES, ANIMAL	1	0	8	1	-88%
RELAPSING FEVER	0	2	3	2	-33%
ROTAVIRUS	108	80	555	716	29%
RSV	224	81	1425	2012	41%
RUBELLA	0	0	0	0	0%
SALMONELLOSIS	39	57	205	141	-31%
SHIGELLOSIS	15	23	81	66	-19%
SYPHILIS, P&S	1	2	4	5	25%
SYPHILIS, TOTAL	13	4	9	31	244%
TETANUS	0	0	0	0	0%
TOXIC SHOCK SYNDROME	0	0	0	0	0%
TUBERCULOSIS	19	31	NA	69	NA
TULAREMIA	0	0	0	0	0%
TYPHOID FEVER	3	0	0	4	400%
YERSINIOSIS	0	1	2	3	50%

Emergency Medical Services Supervisor Seriously Injured in Rodeo Accident

by Luana Ritch, Bureau of Licensure and Certification

Bureau of Licensure and Certification EMS Supervisor Fergus Laughridge was seriously injured in an accident at the Senior National Finals Rodeo in Reno, Nevada in mid-November. Mr. Laughridge was serving as the event's Arena Director when cowboy Mark Thompson was bucked from a horse and suffered a fractured skull and other injuries. Fergus, an EMT—Advanced (Paramedic), was struck and trampled by a pick-up rider's horse when he rushed to assist the fallen cowboy.

Mr. Laughridge suffered multiple posterior rib fractures on both sides of the spine and bi-lateral pneumo-thorax (collapsed lungs) injuries as well as contusions of the lungs, liver, and spleen. After several days in Washoe Medical Center's Intensive Care Unit (ICU), he is now recovering at home and hopes to return to work part-time in mid-December and full-time after the first of the year. Cowboy Mark Thompson is slowly recovering from his injuries that were complicated by a history of previous closed head trauma.

Mr. Laughridge was serving as Vice President of the Senior National Finals Rodeo at the time of the accident. He was elected President of the organization on November 15 and reported he is looking forward to next year's rodeo season. The Senior National Finals Rodeo is held each year in November in Reno.

Bureau of Licensure and Certification Closes Reno Office

Due to increased operating and survey-related expenses, the Bureau of Licensure and Certification has closed its Reno office in an effort to reduce expenditures. The Bureau's Plumb Lane office was closed November 19, 2001. All staff and activities were relocated to the Carson City office located at 1550 East College Parkway, Suite 158, Carson City, Nevada 89706. Staff previously assigned to the Reno office can be reached at (775) 687-4475.

The Reno office was opened in the mid 1990s in an effort to move services closer to the majority of licensed providers in northern Nevada. However, an examination of providers and others visiting the Reno location indicated that most providers still utilized the main Carson Office to conduct business with the Bureau. One exception was the number of Emergency Medical Services (EMS) personnel residing in the Reno-Sparks area. The Bureau's EMS program will be exploring ways to lessen the impact of the closure on this group of providers, perhaps, through the enhancement of internet-based services.

Jennifer Dunaway, former Reno office supervisor, related, "We welcome this change as an opportunity to improve and streamline services provided to the public."

Bureau of Community Health Biannual Meeting

by Frank Sakelarios, Bureau of Community Health

During the week of September 24 - 27 the Community Health Nurses and the Community Health Clinic support staff had their biannual meeting in Carson City. The meeting was held at the Nevada State Library and Archives. This meeting gave the nurses an opportunity to get together to discuss nursing issues in the rural communities, gain Continuing Education Units, and network with other State Health Division staff.

The first day of the meeting gave the nurses and support staff an opportunity to hear from Richard Whitley, Bureau Chief of Community Health. Richard discussed the role and importance of the nurses to the rural communities, the State Health Division Future Search that was held in Reno in July, and the merger of the Bureau of Community Health Services and the Bureau of Disease Control and Intervention Services. The nurses also were able to gain valuable information from the presentations on Labs given by Sandy Deveny, Lei Chen, and Laura Cooper. They were also able to gain valuable information from Sherry Torgerson and Rick Sowadsky concerning sexually-transmitted diseases (STDs) in the rural communities.

The second day of the meeting gave the nurses another great educational opportunity. They were able to hear presentations about Lunelle, the new injectable contraceptive; the Health Alert Network; tobacco cessation and nicotine patch use for women on birth control; and immunization data.

The nurses also had the opportunity to participate in a lecture and hands on session covering the insertion technique of the Mirena IUD. Dr. Tracy Green, also gave a tuberculosis update to round out the informative day.

The third day of the meeting again provided the nurses an excellent educational opportunity. They were able to hear presentations on teen suicide, HIV, and the treatment of hepatitis C. The nurses also had the opportunity to hear from Phil Weyrick, State Health Division Administrative Services Officer, and his staff about timesheet issues facing the nurses. This was a question-and-answer session with both groups being able to gain valuable information.

On the last day of the meeting the nurses and support staff were able to learn about computer training opportunities that are available to them.

It also gave the nurses and support staff an opportunity to discuss issues they had and ways to resolve those issues.

Overall, this was an excellent opportunity for the nurses and support staff to meet together and learn about different issues facing the people of the State of Nevada and their communities. It also gave them an opportunity to network and meet staff in the Carson City office since the merger of the Bureau of Community Health Nursing and Bureau of Disease Control and Intervention Services. The nurses and support staff are eagerly awaiting the next meeting to be held in the spring.

October Employee of the Month

Congratulations to Martha Peralta

Bureau of Family Health Services

Mike Willden, Director of the Department of Human Resources, recognized Martha for her outstanding contributions to public health, as well as her dedication and loyalty to the State Health Division. As the recipient of the *Employee of the Month*, Martha parked in the Director's reserved parking space. A job well done!!!

How Is Your Drinking Water Being Protected From Terrorist Activities?

by Adele Basham, Bureau of Health Protection Services

Everyone wants to be confident the water they drink from their tap is safe. While the events of September 11 have focused attention on security issues, the potential for terrorism is not new. Water systems have always worked to protect facilities from vandalism and monitored drinking water sources to assess their vulnerability to contamination. The State Health Division is working with water systems to help them identify their vulnerability to security threats and vandalism and to take steps to ensure protection of the public health of their customers.

Experts agree that in guarding against criminal or terrorist actions, water utilities should consider a variety of elements, including physical security, cyber security, monitoring and surveillance, treatment barriers, and hazardous chemical storage. Water utilities can take straightforward, common sense actions to increase security and reduce threats from terrorism. It is recommended that water utilities guard against unplanned physical intrusion, make security a priority for employees, coordinate actions for effective emergency response and invest in security and infrastructure improvements.

The Drinking Water State Revolving Fund (DWSRF), administered by the State Health Division, Bureau of Health Protection Services, is available to assist water systems in security and infrastructure improvements. The primary type of assistance available through the DWSRF is in the form of low-interest loans for infrastructure improvements. However, the DWSRF also funds various technical assistance and source water assessment activities.

For more information on the Drinking Water State Revolving Fund, contact Adele Basham at (775) 687-4750, extension 265.

Lesbian and Gay Adolescents: Identity Development and Substance Abuse

by Lyell Collins, Bureau of Alcohol and Drug Abuse

Lesbian and gay adolescents come from all walks of life, every economic level and all religious denominations. Living in large metropolitan and rural areas, some are student leaders, athletes, and quite possibly even your neighbor. For the most part, they are indistinguishable from their heterosexual peers and, for this reason, largely invisible.

A primary task of identity development in lesbian and gay youth is learning to manage a stigmatized identity. Lesbian and gay youth who suffer stigma have social, behavioral, and health-related consequences. Internalized as self-hate and low self-esteem, stigma may be acted out behaviorally, increasing high-risk behaviors, such as unprotected sex and substance abuse. This behavior intensifies distress and increases the risk of suicide. Substance abuse issues tend to be more commonplace in stigmatized groups, and several studies report different patterns of alcohol and drug use, including higher rates of alcohol-related problems and more widespread use of marijuana and cocaine than among heterosexual populations. More troublesome for lesbian and gay youth is use of alcohol and drugs to cope with stigma-related stress, which tend to heighten the chances for chemical dependency in later years.

They are our children, our brother and sisters, our aunts and uncles. Being such, it is our responsibility to see that they have a nurturing caring environment in which to grow. Part of the nurturing process is seeing that counseling services are available. Community Counseling Center of Las Vegas, a Bureau of Alcohol and Drug Abuse funded agency, is one such agency that provides services to the gay, lesbian and transgender populations. They offer adult and youth support groups and one-on-one counseling, along with resources that can help enhance coping skills, self-esteem, and positive help-seeking behaviors. For more information call the Community Counseling Center at (702) 369-8700.

Biological Terrorism – The Public Health Role

by Dr. Randall Todd, State Epidemiologist

The events of September 11, 2001 caused everyone to realize that terrorists could attack us on our own soil in unconventional ways. Shortly thereafter we saw the first cases of inhalational anthrax, a disease that had not been diagnosed in the United States since 1976. In fact, from 1900 to 1976 there had only been 18 cases of inhalational anthrax reported in the United States. So rare had this disease become, that the diagnosis of the first case in Florida raised a concern that the victim may have been intentionally infected. Although we do not know if the same people who organized the attacks of September 11 are also behind the attempts to intentionally spread anthrax, the public health consequences are the same.

The threat of biological terrorism has profound ramifications for those of us who work in the field of public health. Unlike an attack with an explosive device, a biological attack may go undetected for at least the period of time that it takes for the first cases to incubate. The problem is further compounded by the fact that many of the first victims to fall ill may initially present with symptoms too nonspecific to be recognized as an illness associated with an agent of biological terrorism. Due to these characteristics, it becomes vitally important that public health professionals working in concert with medical and other healthcare providers be alert and able to recognize unusual patterns of illness even before they are definitively diagnosed. With conventional weapons, it is law enforcement, fire, and other emergency response personnel who are the "first responders." By contrast, with a biological weapon, it is healthcare providers and public health workers who are the "first recognizers." Those State Health Division staff who work in epidemiology, surveillance, and disease investigation have a heightened responsibility to be alert.

There is another aspect to biological terrorism to which **all public health workers need to respond.** With the recent public concern about anthrax, our healthcare systems have not been overwhelmed with large numbers of ill people. Indeed, Nevada has not had any illnesses associated with biological terrorism. But we have seen our **healthcare system challenged with large numbers of the "worried well."** People are understandably frightened by the prospect that they may fall victim to a biological weapon. In essence, their fear is as much a goal of the terrorist as is the actual disease that could result. Therefore, public health workers also have a responsibility to combat the "terror" in terrorism. **This means we all have a job to do.** One of the best countermeasures to fear is information. As public health workers, we have a responsibility, not just at work, but in our off-duty interactions with friends and families to **acquire and provide accurate information** that will help place some of the fear and terror into reasonable perspective. Two reliable sources of accurate information are the State Health Division's web site at www.health2k.state.nv.us and the Center for Disease Control and Protection bioterrorism site at www.bt.cdc.gov.

Finally, it may be helpful for public health workers to be aware that there have been no human cases of anthrax reported in Nevada subsequent to the events of September 11. In fact, the last incidence of anthrax in Nevada was a cutaneous case reported in 1992. The Nevada State Health Laboratory has processed more than 250 suspicious letters, packages, and powders. None of these have shown any evidence of anthrax. This information should be at least somewhat reassuring as we go into the cold and flu season. The public needs to remain on alert; however, in most instances their cold and flu symptoms will represent a cold or the flu, not anthrax. All of us can help by reassuring people with whom we interact and pointing them in the direction of accurate information.

Congratulation to Dr. Todd

Mike Willden, Director of the Department of Human Resources, selected Dr. Todd as November's *Employee of the Month.*

Hail and

Welcome to **Lori Cofano**, Fluoridation contractor, Bureau of Family Health Services and was formerly a dental hygienist.

Welcome to **Michelle Mayfield**, WIC Nutrition Coordinator, Bureau of Family Health Services, who transferred from the Carson WIC clinic. Four years State service.

Welcome to **Anne Franz**, WIC Breast Feeding Coordinator, Bureau of Family Health Services, previously with Washoe Medical Center.

Welcome to **Jessica Cowee**, Abstinence education contractor, Bureau of Family Health Services, who recently graduated from the UNR with a degree in Psychology.

Welcome to **Brian Wellins**, Health Resource Analyst, Bureau of Health Planning and Statistics, who is new to State service and recently graduated from UC Berkeley, with a degree in Statistics.

Welcome to **William Lee**, Health Data Analyst contractor, Bureau of Health Planning and Statistics, who was previously employed as a Sales Manager with Philip Morris Corporation.

Welcome to **Simon Chong**, Health Data Analyst contractor with the Bureau of Health Planning and Statistics, who recently graduated from the UNR with a degree in Computer Information Systems.

Welcome to **Debbie Dunbar**, Administrative Asst., Bureau of Community Health, who transferred from the Carson Health Clinic. Eleven years State service.

Welcome to **Charlene Herst**, Health Education and Information Officer, Bureau of Community Health, previously employed with Vanguard Media.

Welcome to **Mandy Barnes**, Adoption Clerk, Bureau of Health Planning and Statistics, who transferred from the Bureau of Health Protection Services. Four years State service.

Farewell

Welcome to **Susan Joy Edwards**, Health Education and Information Officer, Bureau of Drug and Alcohol Abuse, who was formerly employed with the University of Phoenix.

Welcome to **Rick Reighley**, Public Health Engineer, Bureau of Health Protection Services, returning to State from private sector. Twelve years previous State service.

Welcome to **Lei Chen**, Disease Control Specialist, Bureau of Community Health, who is new to State service and graduated from the UNR with a PhD in Environmental Science and Health.

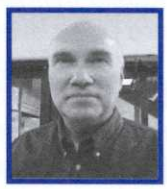
Welcome to **Leslie Tashiro**, personnel officer, who is new to State service and previously employed by RTP Corporation.

Welcome to **Stephanie Graeber**, Administrative Asst., Bureau of Family Health, new to State Service.

Welcome to **Ann Stone**, Personnel Technician, Administration, who transferred from DOT. Five years State service.

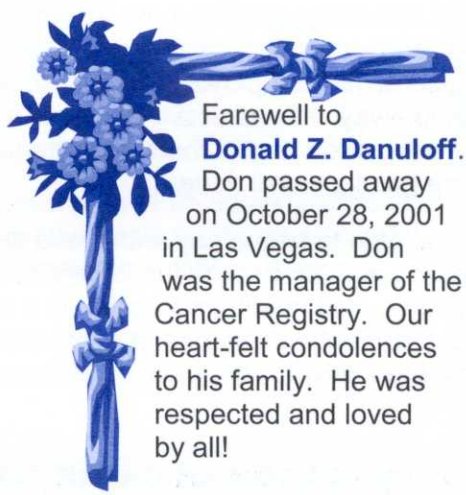
Farewell to **Dennis White**, WIC Program Manager, Bureau of Family Health Services. You'll be missed. Best of luck!

Farewell to **Cliff Lawson**, Public Health Engineer, Bureau of Health Protection Services, who is transferring to NDEP. You'll be missed. Best of luck!



Farewell to **Thomas Purkey**, Administrative Service Officer, Bureau of Health Protection Services, who is transferring to the Division of Forestry. Congratulations on the promotion.

Farewell to **Steve Woodbury**, WIC Food Coordinator, Bureau of Family Health Services, who is transferring to Commission on Tourism. You'll be missed. Best of luck!



Farewell to **Donald Z. Danuloff**. Don passed away on October 28, 2001 in Las Vegas. Don was the manager of the Cancer Registry. Our heart-felt condolences to his family. He was respected and loved by all!

Strengthening Relationships

by Rebecca Vernon, Bureau of Alcohol and Drug Abuse

Relationships can be fragile things—especially in the workplace. They are often built and destroyed on a daily basis. This emotional chaos feeds anxiety, depression, demotivation, loss of confidence, and/or physical and mental illness. Constant attention to the work grindstone creates a tendency to forget about the needs and the feelings of co-workers. Employers can promote mutually supportive relationships to create a healthier and happier workplace environment with improved morale, awareness, and creativity, which ultimately leads to improved recruitment, retention, motivation, and cooperation of staff.

The Bureau of Alcohol and Drug Abuse (BADA) is not unique, and the employees work at a hectic pace. They are dedicated, hard working people who find ways to work together and to make things work out. Full schedules or not, all try to pitch in whenever and wherever there is a need to get the job done or help their fellow employees. BADA supports the building of healthy office relationships with activities throughout the year by taking time to recognize special days like birthdays, potlucks to welcome new employees, or to wish well those going away. These activities create a special day for the person to give them an extra pat on the back for a good job well done.

Being able to take a day and spend time together to unwind and have some fun is very good medicine. Bringing staff members together in a relaxed nonjudgmental environment helps team-building and productivity, and, most of all improves the personal well-being of the employees. Knowing each other creates the ability to understand each other. This bond between workers improves active listening and patience to help each other, and joint activities to improve team building so we may provide better service.

With this concept in mind, over the weekend, BADA staff recently enjoyed a retreat away from the office to have a barbeque at one of the employees ranch for a day of fun and games. There was horseback riding, a horseshoe tournament and lots of food. You could hear children playing and laughter being shared by everyone. This gave everyone the opportunity to reacquaint in a relaxed environment and share some time together without having a deadline or agenda attached.

They also organized a Halloween potluck to break the monotony of a long year and brought the entire floor together to welcome the Bureau of Community Health. Lots of goodies, a pumpkin carving, and a costume contest brightened the day. A surprise pumpkin visited everyone at BADA leaving a token of appreciation for their hard work throughout the year.

December brought the close of the year with a BADA open house on December 20 hosting a "healthy food" theme to wish everyone well for the holidays. We extend our wish to everyone for a safe, healthy and happy holiday season.

Do you know who your Health Division Safety Committee Members are?

Dan Olsen, Administration Services
Trenna Smith-Montes, Bureau of Alcohol and Drug Abuse
Lyell Collins, Bureau of Alcohol and Drug Abuse
Claude Council, Community Health
Tami Tersteege, Family Health Services
Jean Meyer, Family Health Services
Lori Cook, Health Planning and Statistics
John Lambert, Licensure and Certification
Richard Fenlason, Licensure and Certification
Stan Marshall, Health Division Coordinator

Note: Please review your office safety guidelines and update yourself on fire evacuation procedures.

We may be having safety inspections and fire drills in the near future.

Helping Others

by Kathy Davis, Bureau of Alcohol and Drug Abuse

This year, in an effort to help the greatest amount of people during this holiday season, bureaus throughout the Health Division combined their efforts and focused donations on one non-profit, community-based program, *Lighthouse of the Sierra*.

They provide service-enriched and affordable housing in a tranquil and safe neighborhood setting to struggling women and families seeking recovery from addiction, along with comprehensive and integrated prevention, intervention, and treatment services, which are "wrapped around" the entire family over the course of their one-year stay. Services are individualized for both parent and child to strengthen the family and promote economic stability. Their emphasis on healing the whole family offers a powerful opportunity for positive change.

Other services offered include:

Individual and group substance abuse counseling
Intensive, integrated case management
Couples and family counseling
Relapse prevention
Parenting education and home-based family support
GED, ESL, and literacy education
Consumer credit and debt management counseling
Budget, nutrition, and household management
Domestic violence and victim support services
Employment readiness and job development
Medical health services
Family advocate support

Currently, *Lighthouse of the Sierra* serves approximately 25 families, comprising of 26 adults and 45 children. Children's gifts were provided by other organizations; therefore, the focus for the State Health Division was on gifts for the adults and groceries for the holiday meal. Other items collected were clothing, books, and miscellaneous household items.

THANK YOU

TO ALL OF THE PARTICIPATING BUREAUS, OFFICE MANAGERS AND COORDINATORS

A GREAT BIG THANK YOU

TO ALL CONTRIBUTORS

We wish everyone a wonderful holiday season!

Flu Shots—It's That Time of Year Again!

Reprinted from Centers for Disease Control and Prevention
20001-02 Flu Season Update

Almost everyone will benefit from a flu shot. But some people have a greater need, and they should make a special effort to get this protection each year. Ask your health care provider for more information.

<table>
<tr><th>When to get your flu shot</th><th>Oct</th><th>Nov</th><th>Dec</th><th>Jan</th><th>Feb</th></tr>
<tr><td>65 Years Old or Older People

People with Chronic Health Conditions
This includes health problems such as heart disease, diabetes, kidney disease, asthma, cancer, and HIV/AIDS as well as women who will be at least 3 months pregnant during flu season.

Health Care Workers
Your patients depend on you to stay healthy so you can</td><td colspan="2">Best Time!</td><td colspan="3" rowspan="3">It's not too late to prevent the flu!

You can get a shot at any time during the flu season.</td></tr>
<tr><td colspan="2">Household Contacts of Those Above
People who live with those who are 65 years old or older or those with chronic health conditions.</td><td>Best Time
2001-02</td></tr>
<tr><td colspan="2">Anyone who wants to prevent the flu should get this valuable protection.</td><td>Best Time</td></tr>
</table>

Jeff Whitesides, Bureau of Community Health, receives his annual Influenza immunization from Sandra Hanneke, Nursing Manager, Bureau of Community Health.

Tobacco Control Program

by Charlene Herst,
Bureau of Community Health

Tobacco control in the State of Nevada is more than the sum of its parts. There are many organizations, agencies and government entities that are in the trenches trying to improve the statistics in our state on tobacco prevalence, cessation and policy. They are working in partnership and collaboration with each other, on the local, regional and state level, in order to best use the dollars and staff available.

The Department of Human Resources is directly involved with communities through the Centers for Disease Control (CDC) tobacco grant and the Master Settlement Agreement (MSA). The MSA are agreements with and civil actions against manufacturers of tobacco products. The Task Force for the Fund for a Healthy Nevada allocates those dollars through Requests for Proposal (RFP). The State Health Division also uses the RFP process for the CDC grant then works directly with the sub-grantees. If you would like details on either of these contact Charlene Herst at 684-5914.

The State Health Division also links with other state programs, bureaus, and divisions that deal with tobacco or tobacco-related issues. For , example, there is a natural linkage between alcohol and drug abuse and tobacco. The same can be said of a linkage between chronic diseases and tobacco usage. The Tobacco Control Program, which is within the Bureau of Community Health (BCH), is working to bring about strong , partnerships with other bureau , programs, i.e., the Women's Health Connection, the Chronic Disease Program, and Rural Health Nursing.

We are also working on developing a strong relationship with the Division of Health Care Financing and Policy

(Continued on page 15)

(Continued from page 14)

through their Medicaid program, which currently pays for nicotine cessation products. As of December 7, 2001, Nevada Medicaid will require all pharmacy providers to supply recipients of nicotine cessation products, the Nevada Tobacco Users' Helpline-telephone number. The Helpline is one of the sub-grantees of the MSA.

Partnerships, collaboration, and linkages help sustain programs in times of shrinking resources and personnel, as well as grow stronger when the economy is good. The State Health Division advocates working with local and state coalitions and helping to insure that they are strong so their programs will be strong during good times and bad. The Tobacco Control Program is working to strengthen our role and to create new avenues for cooperation.

Baby's First Immunization

by Anne Franz, Bureau of Family Health Services

Few of us probably think of human milk as a baby's first immunization but it is just that. It is sometimes called "white blood" because it is a dynamic, living fluid able to transport nutrients, affect the biochemistry of the body, and enhance immunity. By four months of age, the thymus gland, so important to the development of the immune system, has been found to be twice as large in breastfed babies as formula fed babies. The American Academy of Pediatrics (AAP) released their official policy on breastfeeding in late 1997. They stated that breast milk was the optimal means of nutrition for infants and that they should be exclusively breastfed for six months with the introduction of solids at that time. Breastfeeding was to continue at least through the first birthday and for as long thereafter as was mutually agreeable to mother and baby. Breast milk continues to provide immunities to the baby as long as the baby is breastfeeding. In her book, *Milk, Money and Madness: The Culture and Politics of Breastfeeding*, Naomi Baumslag states, "If every newborn in the United States were breastfed for just 12 weeks, the health care savings from avoiding nonchronic diseases IN THE FIRST YEAR OF LIFE would be two-to-four billion dollars annually." This is a direct result of the immunologic properties of breast milk. The United States Department of Health and Human Services (USHHS) released their *Blueprint for Action* on breastfeeding earlier this year. They see breastfeeding as a public health challenge. In the United States we have been aware of the numerous health benefits to mothers, babies and the environment for more than 20 years and yet our country has one of the lowest breastfeeding initiation rates in the industrialized world. We shout about the importance of routine medical inoculations against childhood disease and yet continue to only whisper about the importance of "inoculating" infants against diarrhea, respiratory illness, ear infection pneumonia, and other bacterial infections that could be decreased or eliminated by breastfeeding. We have come to believe that it is normal for a baby to average up to 10 illnesses or visits to the doctor in the first year of life. Studies conducted over the past 20 years show that that is the norm only for formula fed infants.

No other mammal species relies on another mammal's milk for their babies' survival except for humans. All mammal milks are "species specific" or very different and unique. We rely on formula manufacturers and their laboratories to not just attempt to duplicate but actually improve on mother nature. We lead women to believe that the choice to breastfeed or formula feed makes no difference; that somehow the two are equal. But if breast milk is a living, dynamic fluid, then how much of each ingredient is enough? We know that babies receive variable amounts of each nutrient in breast milk depending on factors such as their age and what time of day it is. The formula-fed baby gets a set amount of each ingredient each feeding. One of the reasons breast milk has been so vital to premature infants is species specificity. The mother's body seems to "know" what the baby's nutritional needs are and the milk produced is specific to her baby. If breastfeeding is a public health challenge then we need to ask what each of us can do to help support women in the United States in their quest for better health for themselves and their babies whether it be in the community, at work or in the home. When we do so we make an investment in the future health of our entire country.

Diets Don't Work

by Norma J. Thiel, Registered Dietitian, Bureau of Licensure and Certification

Past history and scientific research have proven that diets don't work. They only make people bigger. It's referred to as the yo-yo syndrome. The fad diets and quick weight loss programs can result in weight loss, but the weight often comes back.....with a vengeance! And it usually comes with extra pounds.

So....what's the answer? There are several things you can do. Developing life-long habits of making healthier choices can result in significant changes. Increasing your activity is another proven remedy. It should be consistent, however, to get results. When you reach a plateau, it's time to increase the exercise or aerobic activity in duration or intensity. Just keep it enjoyable so it holds your interest.

In the same way that all fats are not created equal, neither are carbohydrates. Cookies, pie, and cake taste great but contain empty calories. Sugar and white flour offer little nutritious value and, for some people, can trigger cravings. But this doesn't mean you can never enjoy a treat! Just plan a treat day and keep it sensible – based on your long-term goals. In the meantime, try fixing healthy snacks to promote satisfaction and curb cravings. Plan meals that are balanced and have a little bit of everything – and then do it! Don't procrastinate. The following suggestions may help to get you started.

COTTAGE CHEESE DILL DIP

Nutrient Content: 2 oz. Dip = 59 calories, 8 gm protein, 2.6 gm carbohydrates, 5 mg cholesterol, 44 mg calcium, 65 mg potassium, 269 mg sodium

Try this high protein dip with your favorite fresh vegetables.

1 32-oz. carton of cottage cheese*
1 Tbsp. mayonnaise*
1 Tbsp. onion, finely chopped
1 tsp. honey
4-6 tsp. dill weed (dry or fresh)
1/4 tsp. salt
*To reduce the fat, use nonfat or lowfat mayonnaise and cottage cheese.

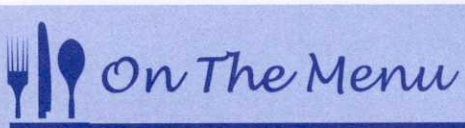
WHEAT BRAN MUFFINS

Nutrient Content Per Muffin: 126 calories, 4 gm protein, 28 gm carbohydrates, 2 gm fiber, 2 gm fat, 0 mg cholesterol, 148 mg sodium

Oven Temp: 400°

1-1/4 cup wheat bran	1/2 cup nonfat milk
1 cup all purpose flour	1 egg
2 tsp. baking powder	1/3 cup honey
1/4 tsp. baking soda	1 Tbsp. oil
3/4 cup applesauce	1/2 cup raisins

Mix together the dry ingredients, including raisins. In a separate bowl, combine the wet ingredients. Combine the wet and dry ingredients, but don't over-mix. Divide the batter into 12 muffin cups. Bake for 20 minutes or until golden brown.



Plan ahead. Make a list and then go grocery shopping.

Sample Dinner Menu for the Week

Monday
Grilled Chicken Breast
Baked Potato with lowfat sour cream
Steamed Summer Squash
Cup of Tomato Soup
Green Salad with lowfat dressing

Tuesday
Chef's Salad
Cream of Celery Soup
French Bread or Dinner Roll
Fresh Fruit in Season

Wednesday
Grilled Pork Chops
Brown Rice Pilaf
Italian Green Beans
Marinated Tomato and Cucumber Salad

Thursday
Baked Ham
Scalloped Potatoes
Steamed Broccoli and Carrots
Chilled Pineapple, sliced
Green Salad with lowfat dressing

Friday
Broiled Hamburgers
Tomato, Onion, and Lettuce
Cole Slaw
Fruited Gelatin

Party Buffets—Don't Invite Unwanted Guests

by Julie Flanagan, Bureau of Health Protection Services

A popular way to celebrate holidays or any party occasion is to invite friends and family to a buffet brunch or supper. However, food left out for long periods of time leaves the door open for uninvited guests—bacteria that cause foodborne illness. Here are some tips from the USDA's Meat and Poultry Hotline to help you have a safe party.

The three most important rules to remember are: 1) Wash hands and utensils before preparing and handling foods. 2) Keep cooked foods hot or cold, not lukewarm. 3) Don't leave food out for more than two hours.

Staphylococcus ("staph") bacteria are found on our skin, in infected cuts and pimples, and in our noses and throats. They are spread by handling food and utensils with germ-laden hands and letting prepared foods, particularly cooked and cured meats, cheese, and meat salads, sit at room temperature more than two hours.

Perfringens is called the "cafeteria germ" because it may be found in foods served in quantity and left for long periods of time on inadequately maintained steam tables or at room temperature. The best way to prevent this is to divide large portions of cooked foods such as beef, turkey, gravy, dressing, stews and casseroles into smaller portions for serving and cooling.

Listeria bacteria multiply, although slowly, at refrigeration temperatures. These bacteria can be found in cold foods typically served on buffets. To avoid serving foods containing *Listeria*, follow "keep refrigerated" label directions and carefully observe "sell by" and "use by" dates on processed products. Thoroughly reheat frozen or refrigerated processed meat and poultry products before consumption.

If you are cooking foods ahead of time for your party, be sure to cook foods thoroughly to safe temperatures. Cook fresh roast beef, veal, and lamb to at least 145° F. All other meat, fish, and ground red meats should be cooked to 160°F. Store cooked foods in small, shallow containers in the refrigerator or freezer until serving time. This encourages rapid, even cooling. Reheat hot foods to 165°F. Arrange and serve food on several small platters rather than on one large platter. Keep the rest of the food hot in the oven (set at 200-250°F) or cold in the refrigerator until serving time. REPLACE empty platters rather than adding fresh food to a dish that already had food in it. Many people's hands may have been taking food from the dish, which has also been sitting out at room temperature.

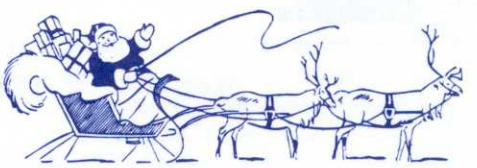
On the buffet table, you can keep hot foods hot with chafing dishes, slow cookers, and warming trays. Cold foods should be held at 40° F or colder. Keep foods cold by nesting dishes in bowls of ice. Otherwise, use small serving trays and replace them.

For more food safety information, call the USDA Meat and Poultry Hotline at 1-(800) 535-4555 from 10 a.m. to 4 p.m. Eastern Time. Food safety recordings can be heard 24 hours a day using a touch-tone phone.

Seasons Greeting from the Bureau of Health Planning and Statistics

(From left to right)
Standing back row: Drew Mather, Mandy Barnes, Tina Perry, Emil DeJan, Wei Yang, Brian Wellins, and Linda Cook.

Front row kneeling: William Lee, Simon Chong, Christene Karpe, Larraine Tooker, and Tim Pollard.



(Continued from page 1)

together a team of the nation's top scientists to investigate a mysterious leukemia cluster in Fallon. Nevada's chief health officer, Dr. Mary Guinan, submitted her resignation last week after three years with the state health division. Her final day is Dec. 7. It's just time," Guinan said of her leaving the post. The chief health officer supervises many aspects of the health division and focuses mainly on disease prevention and surveillance. Guinan said she will continue to teach preventative medicine at the school of medicine in Reno and will do consulting work on infectious disease and bioterrorism.

"She has an incredible background," said Yvonne Sylva, administrator for the health division. "No one is more renowned in the field of HIV and AIDS." Sylva will hire Guinan's replacement, which she said could take two years.

Before Guinan joined the state health division in 1998, she worked at the CDC as a physician and scientist for 20 years. She was a member of the task force that investigated the first cases of AIDS, and her work is documented in the book, "And the Band Played On," by Randy Shilts. "I took care of HIV patients for years," Guinan said. "During the first few years, we had very little to offer patients except supportive care. It's been a miracle with these new cocktail drugs.

The average time from HIV to the onset of AIDS used to be 10 years; now we hope nobody will ever actually get AIDS."

Before her groundbreaking work with the AIDS virus, Guinan worked in India in the smallpox eradication program, helping to eliminate the deadly disease in the 1970s.

Guinan's colleagues said her experience at the CDC and her knowledge about communicable diseases has helped the health division develop more complete databases and tracking systems to monitor and prevent disease. "She's excellent in the communicable disease area," Sylva said. "She put together a good public health communications system, so we can now make data-based, informed decisions." Guinan worked on fluoridating Nevada's water supply to help prevent tooth decay and helped investigate the leukemia cluster in Fallon during her three-year stint as Nevada's chief health officer.

She said the state's biggest health problem is cigarette smoking. "We have one of the highest chronic obstructive pulmonary disease hospitalization rates in the country, and that's hard to get unless you smoke," she said. "Smoking is directly related to chronic lung disease, and it's costly. You see people walking around with an oxygen tank, and it's usually a result of smoking."

Guinan would like to see a statewide, comprehensive smoking prevention program in place, perhaps paid for through a cigarette tax. She said better access to treatment programs is needed to help smokers quit. "I know it's hard; I was a smoker for 10 years," Guinan said. "I smoked while I was a medical student, and then finally decided I didn't really want to develop chronic lung disease. I don't really mind dying, but I don't want to live and suffer."

Future Search

Stop by one of the Future Search Open Houses to view the conference materials and learn more about the Public Health Agenda developed during the meeting.

January 9, 2002: Special Children's Clinic, Las Vegas
January 16, 2002: Nevada State Library, Carson City

Call the State Health Divisionat (775) 684-4248 or check the web page at www.health2k.state.nv.us for more information. Hope to see you there!

Mark Your Calendar! Upcoming Meetings, Seminars, and Conferences

January 2002

January 9 and 16 — Department of Human Resources
Master Settlement Agreement (MSA) Grantees Workshop
January 9: Carson City with teleconference to Las Vegas
January 16: Las Vegas with teleconference to Carson City

February 2002

February 20 — Nevada Diabetes Council Meeting
(Videoconference at 8 different locations)
Contact: Kim Neiman at 775-684-5982

February (TBA) — Statewide Partners for Cardiovascular Health Conference,
Contact: Charlene Herst at 775-684-5914 or Kim Neiman at 775-684-5982

April 2002

April 13 — Multi-Cultural Disease Prevention Festival
Clark County Government Center, Las Vegas
Contact: Pat Klepzig at 1-800-828-8293, Ext. 7482

National Health Observances

January
Cervical Cancer Month
National Birth Defects Prevention Month
National Volunteer Blood Donor Month
January 21–27 Healthy Weight Week

February
American Heart Month
National Children's Dental Health
February 11–17 National Child Passenger Safety Awareness Week
February 11–17 National Children of Alcoholics Week

March
Alcohol Awareness Month
March 21 American Diabetes Alert
American Red Cross Month
National Nutrition Month

April
April 2–8 National Public Health Week
April 22–28 National Infants Immunization Week
April 28–29 2001 March of Dimes Birth Walk America

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:
Sharon Wicker, Health Division
505 E. King Street, Room 201
Carson City, Nevada 89701-4797

Governor

Kenny C. Guinn

State Board of Health

Joey Villaflor, M.D., Chairman
William E. Quinn IV, Vice Chairman
Dee Hicks, R.N.
Jade Miller, D.D.S.
Jerry Reeves, M.D.
Frances Sponer
Roger Works, D.V.M.
Yvonne Sylva, Administrator, Secretary

Health Division

Yvonne Sylva, Administrator
Vacant, State Health Officer

Health Newsletter Editorial Staff

Betsy Baker, Administration
John Flamm, Public Information Officer
Jane Dreiling, Bureau of Licensure and Certification
Julie Flanagan, Bureau of Health Protection Services
Mark Hemmings, Bureau of Health Planning and Statistics
Frank Sakelarios, Bureau of Community Health
Trenna Smith-Montes, Bureau of Alcohol and Drug Abuse
Nola Haynes, Bureau of Family Health Services
Charlene Herst, Bureau of Community Health

Frequently Called Health Division Numbers

Nevada State Switch Board North	(775) 684-1000
South	(702) 687-5000
Bureau of Health Division Administration	(775) 684-4200
Bureau of Public Information Officer	(775) 684-4221
Bureau of Health Planning & Statistics	(775) 684-4218
Office of Vital Records	(775) 684-4242
Bureau of 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
Bureau of Licensure & Certification	(775) 687-4475
Emergency Medical Services	(775) 687-4475
Bureau of 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
Bureau of Community Health	(775) 684-5900
Community Health Promotion / Educator	(775) 684-8014
Community Health Nurses	(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 (STD's)	(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 E. King Street, Room 201
Carson City, Nevada 89701
HTTP://www.state.nv.us

Return Service Requested

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