

Iowa among five healthiest states

A publisher of state health rankings has placed Iowa among the nation's five healthiest states for the fourth year in a row.

Iowa was ranked fourth in healthiness this year, the same ranking as last year, by the Morgan Quitno Press. The state ranked 3rd in 2002 and fifth in 2001. The year before that, it ranked 15th.

New Hampshire ranked first this year, followed by Vermont, Hawaii, Iowa and Minnesota. Mississippi was in last place; New Mexico ranked 49th, Louisiana 48th, Alabama 47th and South Carolina 46th.

"We're very pleased to be ranked so high again," said Mary Mincer Hansen, director of the Iowa Department of Public Health. "It reflects the wonderful quality of life in Iowa and the strong commitment of our local health departments and health-care providers to ensuring the health of all Iowans."

"However, to maintain and improve our ranking, more Iowans need to par-

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Thomas Oldham, a senior at Lincoln High School and the president of JEL (Just Eliminate Lies), spoke to a crowd of over 200 teens from across Iowa during Youth Advocacy Day, held on Wednesday, March 31. The event was part of the ninth annual **Kick Butts Day**, sponsored by the American Cancer Society, American Lung Association, and the Campaign for Tobacco-Free Kids.

Iowa youth speak out at the Capitol

By Thomas Oldham, JEL, and Dan Ramsey, Central Iowa Tobacco-free Partnership

Over 200 high school students from across Iowa traveled to Des Moines on Wed., March 31 to ask public officials to fully fund a comprehensive tobacco-control program and reduce youth consumption by increasing Iowa's tobacco tax.

The American Cancer

Society, American Lung Association, and the Campaign for Tobacco-Free Kids sponsored the ninth annual **Kick Butts Day**.

Young people were empowered to stand up and speak out in the fight against big tobacco in **Kick Butts Day** events across the country. Following a press conference on the

capitol steps, students asked their legislators and the governor to sign a contract and pledge to support efforts to reduce youth consumption.

"We're giving our public officials the chance to apologize to the young people of Iowa," said Thomas Oldham, a senior at Lincoln

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ticipate in our public health programs that promote abstaining from tobacco, eating nutritious foods in moderation and exercising regularly.”

The rankings, in the publication, Health Care State Rankings 2004, are based on 21 health-related fac-

tors. They include infant mortality rates, the portion of the population covered by health insurance, per capita expenditures for health care, the portion of the population lacking access to primary medical care, childhood immunization rates and percent of adults who smoke.

More information about the rankings is available at www.statestats.com.

More information about health in Iowa is available at www.idph.state.ia.us.

Lighten Up Iowa survey sets baseline for program

By Louise Lex, PhD, Healthy Iowans 2010 Coordinator

What do Repeat Offenders, Sweat Hogs, Cellulite Chronicles, Lardolicious, Distance Divas, and Sweet Marshmallows have in common? Along with 1,147 other Lighten Up Iowa teams, members of these teams have joined forces to increase their physical activity and improve their nutritional choices for five months, beginning in January 2004.

Iowa Department of Public Health epidemiologist Joann Muldoon has been working with the Lighten Up Iowa partners, the Iowa Department of Public Health, Iowa Games and Iowa State University Extension, to track team progress. Muldoon developed and mailed a survey in January 2004 to a random sample of 160 teams to assess the health behaviors of team members before they were involved in Lighten Up Iowa.

A second survey will measure behavior changes after the five-month campaign and again several months later. State Nutrition Extension Specialist/Assistant Professor Ruth Litchfield and Assistant Professor of Health and Human Performance Greg Welk at Iowa State University will assist in data analysis.

The pre-survey results help to answer the question of who joins Lighten Up Iowa teams and reasons for joining teams. About 84 percent of the survey respondents were women, who may be more inclined

to have sedentary jobs and be less involved in physical activity than their male counterparts.

Team members are well educated with some college or technical school education (37%) or more (49%). Most are between the ages of 25 and 64. The largest age groups

wanted to lose weight (72%); and thought the team approach would work (61%).

Muldoon will survey participants in June and again in the fall to evaluate the effectiveness of the Lighten Up Iowa program. Iowa State University researchers, Litchfield and Welk, who analyzed the 2003 surveys, noted significant improvements in physical activity and dietary habits among the survey respondents. The level of change that was maintained after the campaign was significantly better than reported at the beginning of the program.

The Iowa Games, Iowa State University Extension, and the Iowa Department of Public Health will use the results of the 2004 surveys to plan the 2005 campaign, scheduled to begin on January 19 and conclude June 8, 2005.

For more information visit www.lightenupiowa.org or contact::

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are between 35-44 (23%) and 45-54 (32%). Ninety-seven percent are Caucasian and they either have never smoked; smoked fewer than five packs in their entire life or quit smoking (92%). Those who quit smoking quit within the last year.

More than 90 percent had a goal of losing weight and exercising more or being more active. Not quite the same percentage reported that they planned to eat more fruits and vegetables. And, most participants wanted to be more physically fit, feel healthier, have clothes fit better, feel better about themselves, be thinner/slimmer, and prevent or lessen health problems.

What factors motivated participation? The largest percentages of responses were in these categories: peers at work were joining (61%); wanted to exercise more (62%);

Celebrate National Women's Health Week

Plan now to join the 2004 National Women's Health Week celebration, May 9-15.

Whether you are an individual, a health-care provider, a business leader, a community organization, or a governor, mayor, or tribal leader, there is something you can do to participate in National Women's Health Week.

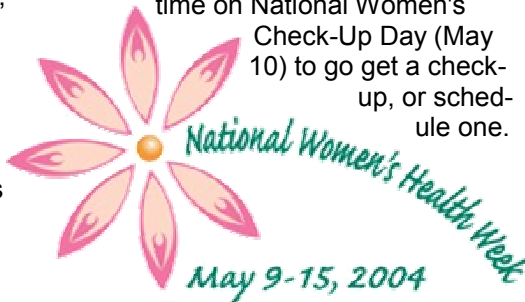
There are many reasons and many ways to participate in this nationwide celebration of women's health. Here in Iowa the IDPH Women's Health Team will have a proclamation signed by Governor Vilsack, will collaborate with Lighten Up Iowa for women-inspired fitness activities, and will be sponsoring displays in the lobby of the Lucas Building.

One display will be static and promote general women's health. The other will change throughout the week, highlighting various IDPH programs that are women's health-related. The changing displays will include tobacco use, WIC and nutrition, depression, abstinence, arthritis, asthma and diabetes.

Other ways people can participate in women's health week include:

Visit a health-care provider or make an appointment

Encourage women you know to take time on National Women's Check-Up Day (May 10) to go get a check-up, or schedule one.



Participate in a National Women's Health Week event near you:

Get involved in the week. Encourage all the women you know to celebrate their health. Learn more about participating in this year's National Women's Health Week activities.

Take the NWHW Challenge and Get Fit:

Thousands of women across the country will take the President's Challenge and get fit together.

Sign up for weekly health tips by e-mail:

Learn about how you can receive weekly health tips by e-mail (available in Spanish).

Download your health information resources packet:

Find a comprehensive list of health information resources for women, including a checklist for women's next health check-up, a prevention guide, and information on cancer, HIV/STDs, cardiovascular health, diabetes, and more.

Create a prevention calendar:

Create a health calendar with the Pick Your Path to Health campaign. In just a few simple steps you can design a calendar that includes health appointments and important dates, as well as select from a list of health tips to get women on the path to better health.

For more information contact Janet Peterson, at 515/242-6388 or jpeterso@idph.state.ia.us. Information is also available at www.4woman.gov/whw/2004/.

Iowa youth speak out

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High School and the president of Just Eliminate Lies (JEL). "Our lawmakers have waited too long. If the tobacco tax is increased, we will reduce youth consumption by a staggering amount, and save thousands of Iowa lives."

Tobacco use is the leading cause of preventable death in Iowa, killing more than 4,600 adults each year. Currently, approximately 508,700 adults in Iowa smoke. Over 500 Iowans will die this year from exposure to secondhand smoke.

If the tobacco tax were raised 60 cents per pack, over 9,900 Iowa kids alive today would avoid smoking-caused death, and Iowa's state revenues would increase by more than \$108 million per year. If the tax were raised by one dollar per pack, Iowa's

state revenues would increase by more than \$155 million dollars per year.

"If Iowa increases the cigarette tax and fully funds its comprehensive tobacco-control program, thousands of teenagers would avoid smoking-related death," said Kassie Hobbs, junior at Bettendorf High School and JEL executive council member. "Iowa will be able to save lives by reducing the number of deaths from lung cancer and heart disease."

For more information about **Kick Butts Day**, and what is being done



High school students participating in the **Kick Butts Day** marched from East High School to the Capitol grounds, where they held a rally and news conference.

to reduce youth consumption, visit the Campaign for Tobacco Free Kids' web site, at www.tobaccofreekids.org.

Busy West Nile virus season anticipated

By Russ Currier, DVM, MPH, State Public Health Veterinarian / Environmental Epidemiologist

During the 2003 season, Iowa reported 147 cases of human West Nile virus (WNV) infection with six deaths. Most cases were concentrated in the western half of the state.

The Centers for Disease Control and Prevention compiled 9,858 reports of (WNV) infections in the United States with the largest focus of infections centered in three states, Colorado, Nebraska and South Dakota.

The Center for Acute Disease Epidemiology (CADE) at the Iowa Department of Public Health, University Hygienic Laboratory, and Entomology Department of Iowa State University will again be working collaboratively to monitor WNV activity in Iowa during the 2004 season.

This year, we will test ill and recently dead crows and blue jays for WNV. These two species are the most sensitive indicators of WNV infection. Other species are also infected, but crows and blue jays, scientifically called "corvids," are most consistent in showing illness and death. These birds are our earliest indicator of WNV activity in an area and testing will be limited to one positive bird per county.

The absence of a WNV positive bird in a county does not mean that there is not viral activity in that area and we encourage the use of repellants and avoiding mosquito bites any time that mosquitoes are active.

The next phase of monitoring will be trapping mosquitoes and placing sentinel flocks of chickens in 12 locations in Iowa for weekly testing of WNV infection.

The sentinel sites are Dubuque, Davenport, Ottumwa, Cedar Rapids, Waterloo, Mason City, Ames (mosquitoes only), Des Moines,

Sioux City, Council Bluffs, and two new sites of Audubon and Sioux counties.

Mosquito trapping at these sites will use two methods. The first will monitor overall mosquito populations on a daily basis with a mosquito trap that uses light as an attractant and small fan to pull them into a holding chamber for collection and processing. The second is called "live trapping" that also uses light as an attractant but also a chunk of dry ice that dissolves into carbon dioxide gas that attracts female mosquitoes. Their perception is

that the CO₂ is exhaled breath of some creature that may provide a blood meal.

These mosquitoes are collected and separated by species into pools of up to 50 and are tested for presence of WNV and other viruses that can infect humans. The number of pools positive for virus provides an indication of infectivity and thus risk of mosquitoes in various communities.

Human cases are expected to occur this year since WNV is now a permanent resident in our state. We urge citizens to take personal protective measures when there is a possibility of a mosquito bite. A patient's personal physician can confirm mild cases of encephalitis and West Nile "fever" with tests available from several commercial laboratories serving various clinics. In some cases, especially at the beginning of the season, these results need to be confirmed by the University Hygienic Laboratory.

Severe cases of encephalitis, almost always requiring hospitalization, will be tested at the University Hygienic Laboratory. The specimens of interest will be cerebrospinal

fluid and blood serum. All patients with a positive test result for WNV must be reported to either the local or state public health department.

The larger number of cases in western counties reflects the presence of a very efficient vector species identified as *Culex tarsalis*. This species is a strong flier and indiscriminate feeder on humans, animals or birds hence can be a "bridge vector" from birds to humans and horses. This species as well as other *Culex* species prefer to lay groups of eggs called "egg rafts" on small nutrient-rich surface bodies of water such as in a ditch on a roadside right-of-way. *Culex tarsalis* also favor depositing eggs in run-off waters from irrigated fields.

In summary, controlling mosquito-borne viral diseases such as West Nile virus challenge communities and individuals alike. Communities have responsibilities to eliminate mosquito-breeding environments, also known as "source reduction," by draining standing water and treating other areas with larvicides if economically feasible.

Individuals can do a great deal for themselves by checking out their back yards. For example empty bird baths twice a week; check gutters for clogged drainage; ensure that tarps on firewood, boats etc. are tethered in a manner to shed water; and most important, be sure there are no tires collecting water.

If there is a horse in the backyard, it would be prudent to vaccinate the animal for WNV and the other forms of "sleeping sickness" that include Western, Eastern, and Venezuelan encephalitis and most importantly rabies, another viral encephalitis transmitted, in this case, by skunk bites.

To learn more about West Nile virus in Iowa visit www.idph.state.ia.us/eedo/wnv_surveillance.asp.



Lighten Up Iowa activities fight diabetes

By Tom Carney, Director, Office of Communications and Public Health Education

The well-publicized epidemic of overweight/obesity is helping spawn another nationwide epidemic: diabetes.

Fortunately, some of the measures used to fight one also fight the other. Those measures include food choices and exercise efforts like those in Lighten Up Iowa, the campaign that encourages Iowans to exercise more and eat more daily servings of fruits and vegetables.

"Diabetes takes a heavy toll in human misery and health-care costs," said Mary Mincer Hansen, director of the Iowa Department of Public Health. "The disease has reached epidemic proportions, and is associated with a parallel rise in the rate of overweight and obesity. So, we can do something about the increase in diabetes by controlling obesity."

Diabetes affects the way the body uses food, resulting in high blood-sugar levels that can lead to heart disease, stroke, kidney problems and blindness. Family history is a major risk for diabetes, but so is excess body weight. Signs of diabe-

tes include constant urination, abnormal thirst, unusual hunger, irritability, weakness and fatigue, nausea, vomiting, drowsiness, itching skin, blurred vision and tingling or numbness in feet. Of the 18.2 million Americans with diabetes, an estimated 5.2 million are undiagnosed.

Iowans who believe they may have diabetes should see their doctors. All Iowans should exercise regularly and eat nutritious foods in moderation.

Lighten Up Iowa has enlisted about 8,500 Iowans on over 1,100 teams with members in every Iowa county as part of its second annual campaign, which this year lasts from Jan. 5 to June 4. It is sponsored jointly by the Iowa Department of Public Health, the Iowa Games and Iowa State University Extension.

Besides the Lighten Up Iowa teams, some 250 Go the Distance youth teams - some with as many as 17

members - are competing to maximize their exercise and nutritious eating.

For more information visit www.lighteniowa.org or contact:

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"I have Type I Diabetes. I didn't ask for it, didn't do anything wrong to get it, couldn't prevent it, so I deal with it. Do you know that for every two kids with Type I Diabetes, another kid will develop Type II Diabetes and that it may be preventable?"

Excerpt from 14 year old Emily Moser's speech to her eighth grade English class at West Monona Community School in Onawa.

Raising awareness about diabetes:

Gail Moser, a member of the Iowa Diabetes Network and a mother of a diabetic child created the poster at left to raise awareness about diabetes.

The poster was used as an invitation to invite legislators to attend an information session this spring. For more information about the Iowa Diabetes Network, contact Jeanne Clawson at 515-242-6516 or e-mail

jclawson@idph.state.ia.us.

PHASTER volunteers are ready to respond

By Richard Langholz, Jr., MSPH, Program Coordinator, PHASTER

The Iowa Public Health Auxiliary Support Team for Emergency Response (PHASTER) is looking for people willing to provide their expertise in a public health emergency and interested in participating in a Centers for Disease Control and Prevention pilot project.

The project is being piloted in Iowa, Nebraska and South Dakota. PHASTER is looking for people from all disciplines of public health interested in volunteering their services during a public health emergency.

Federal, state, or local officials may ask us to contact PHASTER volunteers with expertise in specific areas of public health that require assistance during an emergency. PHASTER volunteers are not first responders – rather they are people who can provide relief to first responders or assist in an overwhelming public health emergency.

The initial step in this pilot pro-

ject is to establish a database of people who would be willing to assist in a public health emergency. Signing up does not obligate you to serve when called.

PHASTER

READY TO RESPOND

PHASTER offers volunteers the opportunity to:

- Use their public health skills
- Acquire experience in emergency response
- Develop public health knowledge and skills through web-based educational training
- Provide support to public health responders from other local, state and federal public health agencies
- Determine, on a case-by-case basis, whether to participate

This project is a unique partnership between Iowa State University's Center for Food Security and Public Health and the University of Iowa's

Upper Midwest Center for Public Health Preparedness. Together, our goal is to prepare public health professionals and others to identify and respond to emerging public health threats.

We are communicating with IDPH and the Iowa Department of Homeland Security and Emergency Management with the hope of coordinating efforts in the recruitment of volunteers needed for the PHASTER pilot project. Once this project has been tested, we expect that the CDC will implement it nationally.

Consider joining the team. Visit our web site at www.cfsph.iastate.edu/phaster.html. Documents outlining expectations of PHASTER volunteers, frequently asked questions about the program, and an application form are on the site. To speak to someone in person about PHASTER, please contact Richard Langholz at 515/294-2761 or by e-mail at rlanghol@iastate.edu.



On April 16, U.S. Senator Tom Harkin (far right) convened a hearing of the Senate Subcommittee on Labor, Health and Human Services and Education Appropriations on prevention and wellness-prevention programs at the American Institute of Business. The subcommittee heard testimony on the importance of prevention and the contributing factors of nutrition, physical inactivity, mental health, and tobacco use on the development of chronic disease. Thomas Oldham (far left), a student at Lincoln High School, and current president of Just Eliminate Lies (JEL), made a presentation during the hearing.

Remsen agency takes on childhood obesity

By CFNP Report, published biweekly by the Community Nutrition Institute (CNI)

Healthy Eats, Happy Feets is a training curriculum designed to help combat childhood obesity and promote physical activity. Kim Schroeder, RN, Mid-Sioux Opportunity, Inc., a community action agency based in Remsen, created the Healthy Eats, Happy Feets program with Community Food and Nutrition Program (CFNP) funds in 2002 to target child-care providers.

The CFNP-funded initiative, based on the Iowa Department of Public Health's Team Nutrition training, has trained 317 participants to date, including Head Start personnel, child-care center staff, and registered and non-registered day-care home providers. Not only does Healthy Eats, Happy Feets aid providers in improving their nutrition practices and increasing physical activity among the children in their care, it helps them meet state and federal training requirements.

"We've received a phenomenal response and were surprised to see that providers implemented so many policy changes" they learned in training to improve nutrition and emphasize healthy practices, said Schroeder.

der.

Each participant receives a training kit that contains books like *Wiggle, Giggle, and Shake*; *101 Music Games for Children*; and *Hello Toes, Hello Feet* that promote physical activity. The kits also include books on healthy snacks and materials such as music, musical instruments, and toy parachutes to help providers and children learn fun ways to be active in the child-care environment.

Training sessions are conducted by regional Child Care Health consultants and Child and Adult Care Food Program (CACFP) coordinators. Participants learn about the effects of childhood obesity and discuss 12 policies to encourage healthy eating and activity. Scheduling at least 60 minutes of physical activity daily for toddlers and preschoolers; serving food to children that meets the CACFP guidelines; and having children serve themselves during meals and snacks with adult supervision.

Participants also learn how to overcome barriers to putting the policies into practice, and brainstorm in

groups to develop activities for children that support the policies and tie in to related exercises that promote literacy.

To measure the effectiveness of the training curriculum, Mid-

Sioux Opportunity conducts an initial evaluation at the end of each training session and a three-month follow up. The initial evaluation includes an action plan with at least one policy the child-care provider has selected, a description of how the policy will be implemented, possible barriers, and how the barriers can be overcome.

Results from the initial evaluation show that approximately half of participants said they were motivated to attend the training session because the topic was interesting and to fulfill training requirements. Of all participants, 39 percent submitted a plan to make policy changes in their child-care practices.

A three-month evaluation form sent to all participants uncovered what policies and activities they have implemented to foster healthier eating habits and physical activity in their day-care setting.

That evaluation found that among 89 child-care providers serving at least 1,111 children, more than 80 percent adopted policies to insure that: 1) food meets CACFP guidelines; 2) sanitation, hygiene and food handling are monitored; and 3) children have access to safe drinking water all day. Other key policy changes implemented included those that endorsed: food/activity not used for punishment or reward; 60 minutes of activity daily; and nutrition/physical activity taught as learning objectives.

The project will be completed in May and final outcomes reported. With the results collected so far, it looks like Healthy Eats, Happy Feets has provided important steps for day-care providers to offer more healthy food and more physical activities to Iowa children.

Mid-Sioux's CACFP coordinator, Clydene Canady, summed up the effort by noting that, "Providers love the kits because they contain information and materials they can actually use."



Members of Mid-Sioux Opportunity Inc. work with local child-care providers to increase physical activity and nutrition through Happy Eats, Happy Feets.

CHNA/HIP finishes mid-course review

Local boards of health and public health providers have begun updating their county's Comprehensive Health Needs Assessment /Health Improvement Plan (CHNA/HIP). The last comprehensive CHNA/HIPs were submitted in 2000.

Updated reports have been requested by February 2005. The uniform reporting tool will provide a centralized, consistent method for local boards of health to report the results of their independent community health assessments and to document the community-health improvement plans from 99 Iowa counties.

A recent survey was administered to identify what community health assessment models local boards of health were using or contemplating using. The survey was also designed to determine the kinds of technical assistance that would be most beneficial to local public health providers as they carry out the assessment and planning process.

The survey instrument was developed as a collaborative effort by IDPH staff Hal Chase, Dr. Louise Lex, Julie McMahon, Ken Sharp and Angie Tagtow, as well as Mary Pat Wohlford-Wessels from the Division

of Public Health at Des Moines University. The electronic survey was sent in December 2003 to Iowa's county health departments.

Ninety-five health officials responded to questions about such

the assessment process, the majority of counties continue to do their CHNA/HIP independently. As counties form regional groups to work on other projects, including bio-terrorism initiatives, it would seem likely that



needs as selecting health indicators, establishing health priorities, marketing public health initiatives, organizing community planning, and managing barriers to success.

In a significant number of counties, respondents asked for additional technical assistance, additional resources, and additional training in selecting health indicators, analysis of data, establishing health priorities in their communities, marketing of public health needs to increase awareness and involvement, development of social marketing of public health, and identifying barriers.

The results of the survey also show that while several counties are working together as they implement

greater numbers of counties will partner in developing and implementing community health needs assessments.

As CHNA/HIP moves forward, IDPH staff will be looking at ways to help to deliver technical assistance, offer resources to aid the counties in completing their community health needs assessment and health improvement plan, and to report their findings on the CHNA/HIP reporting tool.

To learn more about the CHNA/HIP visit <http://www.idph.state.ia.us/chnahip>.

Governor's Conference on Aging to be held May 17-18

The 25th Annual Governor's Conference on Aging, May 17-18, will be held at the University Park Holiday Inn, 50th & University in West Des Moines.

Historically, high-quality presenters and their informative workshops have made this conference an annual "must attend" event for many older Iowans, professionals, and family caregivers. This year's conference will present Ms. Mary Piper, Ph.D. as the keynote speaker. Mary wrote the bestseller *Another Country: Navigating the Emotional Terrain of Our Elders*.

Other general session speakers are John-Paul Chaisson-Cardenas,

M.S.W., administrator of the Iowa Division of Latino Affairs in the Department of Human Rights, and Peter Martin, Ph.D. who is a professor and director of the Gerontology Program at Iowa State University.

Governor Tom Vilsack has been invited to recognize Iowans who have reached their 100th birthday and will present special awards to individuals and organizations that have provided outstanding services to older Iowans.

Forty-four workshops offering updates on health care, legal issues, service diversity and innovative programming will be presented during

the two-day conference. Continuing education units will be granted for many sessions. Health screenings will be offered free to persons registering for the conference. Screenings will include: blood pressure, memory, bone density and diabetes.

To celebrate the 25th anniversary, a special reception and dinner dance has been planned for the first evening of the conference.

Interested persons may obtain registration information by calling Alice Vinsand, Inc. at 1-800-264-1084. For more information, contact the Iowa Department of Elder Affairs, (515)242-3333 or 1-800-532-3213 or www.state.ia.us/elderaffairs.

Epidemiology Notes



From the Center for Acute Disease Epidemiology, Iowa Department of Public Health, 1 800 362-2736 (24-hour number)

Rotavirus Outbreak in Eastern Iowa: Earlier in the week, an eastern Iowa county public health agency was notified about a rotavirus outbreak within their community, with dozens of children being hospitalized. Rotavirus is the most common cause of severe diarrhea among children 6 months to 2 years of age in the United States. In fact, most children have had the virus by age 3 and have antibodies to protect them from it.

The infection usually begins with fever and vomiting, lasting about 3 days, followed by watery diarrhea for 3-8 days. Nausea and abdominal cramps are also common symptoms. Sometimes, severe dehydration results, which accounts for the majority of hospitalizations from the disease. The extreme dehydration that can be caused by rotaviruses is second only to the dehydration caused by cholera.

Rotavirus is usually transmitted from person to person through the fecal-oral route. The infectious dose is quite small, thus it doesn't take much exposure to be infected. The investigation of the outbreak in eastern Iowa found no single source of the outbreak, but rather several common exposures, including a few day-care centers, a birthday party, and a restaurant with a play area for children. Local public health officials have provided recommendations to these facilities to stop the spread of disease.

So what are the main ways that rotavirus can be prevented? It's no surprise that proper hygiene and hand washing technique is at the top of the list. Disinfecting hard surfaces, toys, doorknobs and other inanimate objects is another important prevention measure. This virus can survive on hard surfaces, hands, and in contaminated water for several days.

Thirdly, proper handling and disposal of dirty diapers, even after the child no longer has symptoms is very important. Individuals may shed the

virus in stools for as long as 10 days after the onset of symptoms.

Seasonal: Tick Consciousness

Pays Off: A spring reminder: In 2003, the following tick-borne diseases were reported: 72 cases of Lyme disease; 3 of Rocky Mountain spotted fever; 1 ehrlichiosis; and no tick-borne tularemia. May and June are the most significant months for transmission of these diseases and various spring activities, such as mushroom picking, hiking in brushy areas, and turkey hunting, can increase tick exposure.

Preventive measures include use of insect/tick repellents, and searching for and removing ticks at the end of a day of exposure. Most ticks will require more than a full day to embed themselves in human skin, and another day of feeding to transmit organisms. Showering, checking skin and prompt removal of any ticks after a day of exposure are the most effective measures to prevent disease transmission.

Finally, monitoring of tick types from affected Iowans during the past 15 years has revealed a significant increase in the deer tick (Lyme vector) in the central third of the state. Thus, Lyme transmission can be expected from tick bites in the eastern two thirds of Iowa.

Food-borne Illness Primer for

Physicians: It is estimated that 76 million people get sick, more than 300,000 are hospitalized, and 5,000 die annually in the U.S as a result of food-borne illnesses. Due to changes in American dietary habits and the food-production, processing, and distribution industry, many food-borne pathogens are considered emerging pathogens.

To help increase awareness of food-borne illnesses among physicians, nurses and other health-care providers, a new edition of Diagnosis

and Management of Food-borne Illness: A Primer for Physicians and Other Health Care Professionals, has been released.

The primer was produced collaboratively by the American Medical Association (AMA), the American Nurses Association (ANA), the Centers for Disease Control and Prevention (CDC), the Center for Food Safety and Applied Nutrition-Food and Drug Administration (CFSAN-FDA), and the Food Safety and Inspection Service (FSIS) of the United States Department of Agriculture.

This primer is intended to provide health-care professionals with current and accurate information for the diagnosis, treatment and reporting of food-borne illnesses. It also provides health-care professionals with patient-education materials on prevention of food-borne illness. The primer offers continuing medical education credit for physicians, nurses, or health-care educators. A PDF version of the primer is at <http://www.ama-assn.org/ama/pub/category/3629.html>.

West Nile Virus Workshop

Will be Held: West Nile virus 2004 ICN briefing May 18. It will be telecast to 17 sites throughout Iowa from 12:45 PM to 3:00 PM on Tuesday, May 18th.

The program will give an overview of West Nile virus surveillance activities in Iowa with an emphasis on lessons learned from the 2003 season and what to expect for 2004. Details are available on IDPH's web site at:

<http://www.idph.state.ia.us/conferences.asp>.

Worth Noting

Summer session at DMU begins May 5

Registrations are being accepted for the Master in Health Care Administration and the Master of Public Health programs at Des Moines University. The summer session begins May 5 and runs through August 22 with courses starting throughout the session.

Courses being offered include: Entrepreneurship and Strategic Marketing, Behavioral Science and Health, Bioterrorism Preparedness & Response, Gerontology and Patient Populations in Long-Term Care, plus many more.

If you would like additional information about the courses available or the program admission requirements, call (515)271-1364 or toll free at (800) 240-2767 ext. 1364 or e-mail hmadmit@dmu.edu. You can also find more information online at www.dmu.edu.

Public Health Quick Reads

IDPH Director Mary Mincer Hansen is now publishing a biweekly newsletter, Quick Reads, for local public health partners. Quick reads can be found on the IDPH web site www.idph.state.ia.us under "Recent Additions."

Disease Prevention and Immunization, The Faces of Public Health

The Bureau of Disease Prevention and Immunization will be conducting a training to update health professionals on disease prevention and immunization issues/programs. The training will take place through June 16 at various sites across the state. Visit www.idph.state.ia.us/conferences.asp for more information.

Fundamentals of HIV Prevention Counseling

Fundamentals of HIV Prevention Counseling will be held June 15-17, and September 21-23. This three-day workshop will demonstrate effective, client-centered HIV prevention counseling strategies to assist clients in reducing their risk of acquiring or transmitting HIV. For more information, contact Training Resources at 515-309-3315 or go to www.idph.state.ia.us/conferences.asp.

State Library Grant Resources

Competition for grant money continues to increase. The State Library has resources to aid in your search for those elusive dollars. For a bibliography of information available at the State Library go to: <http://www.silo.lib.ia.us/for-ia-libraries/funding-info/bibliography.html>

The class *Grant Research: Using State Library Resources* is also offered for an extensive look at resources available for writing successful grants. See more information and register for the class at: <http://www.silo.lib.ia.us/for-state-govt/databases/training-for-state-employees.htm>

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What would you like to see in the Iowa Health FOCUS? Send your suggestions for future articles, letters to the editor, upcoming events, or to add names to the mailing list by e-mailing us at staylor@idph.state.ia.us.