

March 2005

## March 2005 Is Brain Injury Awareness Month

By Tom Brown



and the primary causes of these injuries were falls and motor vehicle crashes, accounting for roughly 60 percent of the injuries. People with brain injury are often left with an array of disabilities that can include difficulties with memory, problem solving, judgment, reasoning, impulse control, behavioral and/or emotional control, and a variety of physical disabilities. These disabilities often affect their personal relationships with family, friends, and co-workers. It is not uncommon for a person with a brain injury to become detached from their pre-injury support systems and experience social isolation, loss of employment, and difficulty with substance use and abuse.

In 1998, Iowa's Governor designated IDPH as the lead agency for brain injury in Iowa. IDPH provides a staff member to the Advisory Council on Brain Injuries and has been the recipient of TBI State Grant Program dollars from the Health Resources and Services Administration – Maternal and Child Health Bureau for several years. This grant funding has allowed IDPH, the Advisory Council on Brain Injuries, the Brain Injury Association of Iowa, and the University of Iowa's Center for Disabilities and Development to create the Iowa Brain Injury Resource Network (IBIRN). The association's IBIRN system is operated in cooperation with the Iowa Department of Public Health and consists of a comprehensive support system that functions at over 55 hospitals, reha-

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**T**he Centers for Disease Control and Prevention estimates that at least 50,000 – 55,000 Iowans live with a disability resulting from traumatic brain injury (TBI). This is a year 2000 estimate and it is not a static number, it grows each year! The Iowa Department of Public Health (IDPH) has verified that from 2000 to 2002, an average of 2,292 Iowans per year, more than six each day, sustained a TBI severe enough to require hospitalization

## March 6-12 is National Problem Gambling Awareness Week

By Frank Biagioli

**T**he Iowa Gambling Treatment Program is participating in National Problem Gambling Awareness Week March 6-12, 2005. The campaign aims to increase public and professional awareness of problem gambling issues. This week is part of a national effort to increase awareness of the help available to individuals and families affected by problem gambling. It also celebrates those who are overcoming its effects.

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bilitation centers, and community-based service and /or support agencies. Support begins at the time a person is injured and/or receives services from one of the more than 55 programs. A critical first step involves linking the family members of the person with the brain injury with a trained volunteer family member who has "been there before."

The Iowa Family Support Network, a subdivision of the Iowa Brain Injury Resource Network, provides 26 trained volunteers around the state. The care coordinator or discharge planner at an IBIRN program location can call a volunteer who will respond within 24 hours. This volunteer visits with the family in crisis, providing mentoring and emotional support. The family and volunteer maintain continued peer mentoring contact at a comfort level that is determined by them individually.

At the IBIRN location, staff gives the family a comprehensive **Iowa Brain Injury Resource Network Tote Bag** of information, resources, and referral guides that provides information on brain injury and linkages to existing services and support systems. Additionally, the staff may personalize the tote bags to include other resources that would be appropriate for the family's situation. Since recovery from brain injury is a long-term process, these tote bags are given to families to refer to as their loved one progresses through the many steps

of "getting back to normal." It will hopefully create a relationship with the IBIRN system that is centered on meeting their long-term information and resource needs.

The Brain Injury Association of America has identified March 2005, as Brain Injury Awareness Month. Help us recognize this designation by assisting us in linking more families and service providers to the valuable resources available through the IBIRN. To receive IBIRN tote bags, information on the Iowa Brain Injury Resource Network, information on how to become a member location, or to request technical assistance contact:

Ed Boll, Program Director  
Brain Injury Association of Iowa  
(712) 729-3983  
[edboll@mtcnet.net](mailto:edboll@mtcnet.net)

Or

Brain Injury Program  
Iowa Dept. of Public Health  
Lucas State Office Building  
(515) 281-6283

# March 6-12 is National Problem Gambling Awareness Week

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This public and private sector endeavor seeks to achieve an environment in which persons experiencing the effects of problem gambling, and those at risk of developing these problems, are able to access appropriate services and resources to enable a return to a healthy lifestyle. In addition, the activities support the recognition of problem gambling as a public health issue, a disorder for which individuals deserve effective treatment.

The Iowa Behavioral Risk Factor Surveillance System (BRFSS) survey of about 5,000 households is designed to col-

lect information on health risk behaviors to monitor prevalence of Iowa residents age 18 and over.



2003 results from Iowa's three gambling questions include:

- About one-third of people admitted to

gambling in the last 12 months.

- 1.6 percent of respondents said the money they spent gambling had led to financial problems.
- 1.7 percent reported the time spent gambling had led to problems in family, work, or personal life.

Governor Thomas J. Vilsack has

signed a proclamation proclaiming the week of March 6-12, 2005, as National Problem Gambling Awareness Week in Iowa.

The awareness week is a collaborative effort sponsored by the National Council on Problem Gambling, the Association of Problem Gambling Service Administrators, the Iowa Gambling Treatment Program in the Iowa Department of Public Health, Iowa providers of gambling treatment services, and local organizations nationwide.

The Iowa Gambling Treatment Program [www.1800betsoff.org](http://www.1800betsoff.org) web site and the [www.npgaw.org](http://www.npgaw.org) web site contain information on problem gambling. Iowans can also call the 1-800-BETS OFF Helpline (1-800-238-7633), and outside Iowa people can call 1-800-522-4700 for help.



Iowa Department of Public Health

Promoting and Protecting the Health of Iowans

# March is National Nutrition Month!

## Top Ten Reasons a Registered Dietitian Can Benefit You and Your Community

By Angie Tagtow

**A**lmost daily, the media reports the latest statistics on overweight and obesity and the critical impacting impact this has on society. Based on the recent Community Health Needs Assessment and Health Improvement Plans (CHNA&HIP) submitted by each Iowa local board of health, communities across Iowa are taking action against this nationwide and statewide epidemic. From altering school food and nutrition policies and adding after school activities that promote physical activity to promoting the 5 A Day program at congregate meal sites and working with restaurants on serving appropriate portion sizes, public health officials are leading the charge in creating a healthier Iowa.

March is National Nutrition Month and is a great time to build a relationship with a registered dietitian. Whether it is as a partner to implement CHNA&HIP initiatives or to assist with achieving your personal food and nutrition goals, a registered dietitian can provide reliable, objective nutrition information, separate facts from fads, translate the latest scientific findings into easy-to-understand nutrition information, and implement community-based nutrition interventions.

### **Registered Dietetics Professionals: Proven Expertise and Excellence**

When choosing a registered dietitian to help with your nutrition or food preparation needs, you're connecting with a food and nutrition expert. Dietitians undergo rigorous academic training and extensive practice experience and maintain their state-of-the-art food and

nutrition knowledge by completing ongoing professional education programs. Dietitians are registered by the American Dietetic Association Commission on Dietetic Registration and must be licensed to practice in



Iowa. Some dietitians may also hold additional certifications in specialized areas of practice.

### **When Can Howa Registered Dietitian Can Benefit Help You?!**

1. You want to eat smarter to stay fit. A registered dietitian can help you sort through misinformation and get you on a healthy eating plan. You can learn how to read labels at the supermarket, how cooking healthy is inexpensive, not expensive how to eat out without ruining your eating plan and how to resist all of the office temptations.

2. You're struggling with weight issues and need to gain or lose weight. A registered dietitian can provide ideas for additional healthy calorie sources for healthy weight gain or a healthy restricted-calorie eating plan—accompanied by regular physical activity—while that allows you to continue to eat still eating all your favorite foods.

3. You have diabetes, cardiovascular problems or high blood pressure. A registered dietitian can be an integral part of your healthcare team by helping you to

modify your eating plan without compromising great taste.

4. You're pregnant or trying to get pregnant. A registered dietitian can advise you on getting help make sure you get nutrients like folate, especially during the first three months of pregnancy, which can lower your newborn's risk for neural tube or spinal cord defects.

5. You need guidance and confidence for breastfeeding your baby. A registered dietitian can help to make sure you're getting enough iron, vitamin D, fluoride and B vitamins beneficial for both you and your new little one.

6. You're struggling with a toddler who just doesn't seem to eat or a teenager who eats lunch from a vending machine. A registered dietitian can help you find foods and techniques that will allow your child independence in choosing healthy foods to eat and give you peace of mind. You have digestive problems.

7. You have digestive problems. A registered dietitian will work with your physician to help fine-tune your diet so you are not aggravating your condition with fried foods, too much caffeine or carbonation.

8. You're caring for an aging parent. A registered dietitian can help identify with food/ or drug interactions, proper hydration, or special diets for hypertension and changing taste buds.

9. You want to improve your performance in sports. A registered dietitian can help you set nutrition goals to achieve high performance whether you're running a marathon, skiing or jogging with your dog.

To locate a registered dietitian in your area or access National Nutrition Month materials, contact



# March is National Nutrition Month! Top Ten Reasons a Registered Dietitian Can Benefit You and Your Community

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the American Dietetic Association at [www.eatright.org](http://www.eatright.org) or visit the Iowa Dietetic Association website at [www.eatrightiowa.org](http://www.eatrightiowa.org). With more

than 700 registered dietitians in Iowa, the Iowa Dietetic Association is the state's largest organization of food and nutrition professionals. ADA

and IDA serves the public by promoting optimal nutrition and well-being.

## Practicing Prevention: Health Care and Sexual Violence

By Binnie LeHew

IDPH is joining with other states to promote public awareness activities for Sexual Assault Awareness Month in April. Sexual violence is estimated to affect 1 in 5 Iowa women and 1 in 17 Iowa men in their lifetimes. Did you know that many long-lasting physical symptoms and illnesses have been associated with sexual victimization of women? Sexual violence is associated with at least four of the ten leading health indicators for Healthy People 2010, including tobacco use, substance abuse, mental health, and responsible sexual behavior. People who grow up in homes where there is child abuse, neglect, domestic violence, or substance abuse are at greater risk for alcoholism, drug abuse, depression, and suicide. Because of this, health care providers need to understand that sexual assault and intimate partner violence are hidden risk factors for many common women's health problems.

The Centers for Disease Control and Prevention have announced a five-year initiative called *Practicing Prevention: Healthcare and Sexual Violence*. The goal is to raise awareness within the healthcare community about sexual violence and to encourage health care providers to become a positive part of the solution. Some suggestions for activities that public health providers can do during April include:



- Host a display or awareness activity during April in your clinic or health care setting to educate patients about sexual violence, the impact it has on their health, and resources available in the community.

- Offer a "lunch and learn" session for your staff about sexual violence and its impact on health.

- Partner with your local sexual assault or victim service program to help with a community

awareness event or fundraiser. To find a service program near you, visit the Iowa Coalition Against Sexual Assault's website, <http://www.iowacasa.org>.

- Contact IDPH for more information or resources for health care providers, or visit the National Sexual Violence Resource Center at [www.nsvrc.org](http://www.nsvrc.org).

The theme for Sexual Assault Awareness Month is "Decide to End Sexual Violence: Building healthy, respectful relationships." We encourage you to use your creativity and help us promote this vision. Can YOU relate? Healthy relationships are about:

Respect for each other  
Equality in importance  
Listening and communicating  
Awareness of rights, differences, and desires  
Trusting yourself and one another  
Empathy

Iowa Department of Public Health. "2001 Behavioral Risk Factor Surveillance System Survey – Sexual Violence module.

Koss MP, Heslet L. Deleterious Effects of Criminal Victimization on women's Health and Medical Utilization". *Archives of Internal Medicine*, 1991.

Felliti et al, "The Adverse Childhood Experiences Study." *Am J Prev Medicine*, Vol. 14 (4) May 1998.



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# Conference Attendees Will Receive Publications

By Louise Lex



## Governor's Conference Building Iowa as a Healthy Community

The Governor's Conference on Public Health: Barn Raising V, on July 28 and 29 at Drake University in Des Moines will offer participants a rich menu of dynamic speakers, special preconference and evening training sessions, a chance to meet colleagues at a smoke-free reception, and the opportunity to showcase products and programs at poster sessions. (See poster session announcement on page 6.) Participants also will receive some new publications.

Again this year, the *2005 Iowa Health Fact Book*, in CD ROM format, will cover the latest data on disease incidence and mortality, health and social behaviors, health resources, and environmental factors. This collaborative publication effort by University of Iowa College of Public Health and the Iowa Department of Public Health began with the first barn raising conference in 1997. Since that time, the fact book has become a valued resource for health care providers, health policy makers, public health practitioners, and health researchers alike.

The conference theme is "Our Past: Where Have We Come

From? Our Present: What Are We Doing Now? Our Future: Where Do We Need to Go?"

As part of the emphasis on our past, participants will receive a copy of the *Iowa Heritage Illustrated* magazine featuring people

and events that have shaped public health in

Iowa. This state has a proud history of men and women who have had a major impact on the public's health--reaching far beyond our borders. This story is an unforgettable one of courage, initiative, and persistence. And it has never been told in word and pictures. The publication is timely for another reason: The year 2005



marks the 125<sup>th</sup> anniversary of the founding of organized public health in Iowa; the first state board of health meeting was held in 1880.

Plans are underway to distribute hard copies of the midcourse update of *Healthy Iowans 2010* at the conference. Other publications that will be available at breakout sessions include an updated *EPI Manual* for local public health, hospital infection control practitioners, laboratories, and health care workers. The manual covers what is considered a reportable disease in Iowa, what are the public health issues with the disease, and outbreak investigations to prevent and control the disease. The *Food borne Manual* also will be available. This manual will assist local public health in the definition of what is a food borne outbreak, how to investigate a food borne outbreak, and what issues are involved in an outbreak.

A pre-conference class, "Beyond Depression: Best Practices for Treating Major Depression," is designed to increase knowledge of best practices in treating major depression. An evening session on abuse mandatory reporter training will be offered for mandatory reporters who are required to report child abuse and dependent adult abuse.

Information on the conference agenda, breakouts, and training sessions is now posted on [www.idph.state.ia.us](http://www.idph.state.ia.us). Click on conferences.



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# The Governor's Conference on Public Health Building Iowa as a Healthy Community

Barn Raising V July 28 and 29, 2005  
Drake University Campus, Des Moines, Iowa

## Display Information

**Please keep this page for future reference.**

Space will be available during the conference to showcase community projects and educational activities related to "building Iowa as a healthy community" in an exhibit or poster session. These displays should relate to the conference themes of new forces shaping healthy communities, telling the story of public health and healthy communities, tools to get the job done, and change models.

Topics may include the results of a study or a report, pictures, photos, diagrams, and a small amount of text that tells about a public health activity in your community. Exhibits should be made to stand alone or on a 3x3 or 3x6 foot table. Posters will be attached to a display board. The conference organizers will provide exhibit tables and display boards.

Handouts may be useful, however, printing of the handouts is the presenter's responsibility and should include the title of the poster or display and the name, address, and telephone number of a contact person.

The display area will be on the 1<sup>st</sup> floor of the Olmstead Center and will be open throughout the conference.

Set-up time: 7:00 AM until 8:30 AM on July 28<sup>th</sup>.

Dismantling: 1:30 PM until 3:30 PM on July 29<sup>th</sup>.



**Applications must be returned to the following address by July 6, 2005:**

Jonn Durbin  
Iowa Department of Public Health  
Lucas State Office Building  
321 E 12<sup>th</sup> Street  
Des Moines, IA 50319  
**OR** e-mail to [jdurbin@idph.state.ia.us](mailto:jdurbin@idph.state.ia.us)  
**OR** FAX to 515-281-4958

Applicants whose displays are chosen for viewing at the conference will be notified by July 13, 2005. Requests for space will be honored subject to availability. To request an application or additional information, contact Jonn Durbin at 515-281-8936 or Dawn Gentsch at 515-282-4548.



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# Dr. Bob Russell is New Iowa Public Health Dental Director

By Julie McMahon

DPH welcomes Dr. Bob Russell, DDS as the Public Health Dental Director for the State of Iowa. Russell first day with the Iowa Department of Public Health was February 25.

Dr. Russell comes to the state from Hackley Community Care Center in Muskegon Heights, Michigan, where he has been the Dental Director since February, 1998. Previous experience includes private practice and as a dentist with both the Michigan Department of Corrections and the Migrant and Rural Community Health Association.

His experience includes working with underserved populations, advising, advocating, planning, and developing policy initiatives for improving oral health access, and networking with policy leaders on local,



state and federal levels. A quote from one of Dr. Russell's references summarizes the qualities demonstrated by Dr. Russell during the selection process, "Dr. Russell has been a tremendous asset to Michigan as we work towards developing a comprehensive plan to improve the oral health status of our citizens. His expertise and leadership qualities are so evident within the oral health community here in Michigan that Dr. Russell is often called upon to represent our interests in discussions with state and federal policymakers."

Dr. Russell attended Loyola University School of Dentistry, graduating in 1988. In addition, he has attended the University of Michigan School of Public Health where his major was public health.

## Improving Substance Abuse Treatment Iowa Project to Improve Treatment Access, Success

By Kevin Teale

Iowa has been selected to help develop new procedures to get substance abusers into treatment more efficiently, and work to improve the success rates of those treatment programs. Funding for the project was awarded to Iowa and three other states by the prestigious Robert Wood Johnson Foundation (RWJ), the nations leading health care philanthropic organization. A total of 13 treatment sites in the four states are involved in the project. In Iowa, the local agency selected for the project was MECCA, which provides services in both Central and Eastern Iowa.

National figures show that fewer than a quarter of substance abusers receive treatment, and for those who do get in, half leave the program before receiving the full benefits of treatment. Iowa studies show that over 340,000 Iowans are in need of substance abuse treatment.

"The ultimate goal of this project is to develop ways to increase the access to treatment services for those in need and remove barriers that keep many from completing the treatment plan and receiving the full benefits of treatment," said Janet Zwick, head of the Iowa Department of Public Health's Division of Behavioral Health and Professional Licensure.

The *Paths to Recovery* project is part of a joint project between RWJ and the federal Center for Substance Abuse Treatment (CSAT). By redesigning processes such as patient intake, assessment, scheduling, outreach, and family involvement, the *NIATx* goal is to create a more efficient system that is less frustrating for both patients and staff, and that makes it easier for patients to complete treatment.



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# What is Leadership?

By Marvin Firch

Leadership is truly a concept with many definitions. Webster's dictionary defines leadership as *position or office of a leader, capacity or ability to lead*. The definition implies that leadership is based on position and once in that position an individual will inherently possess the ability to lead.

Most people have the ability to lead if placed in the right circumstance. However, many are thrust in to roles that require higher levels of leadership with limited training and mentoring. This method of leadership development is often characterized as "Leadership by the seat of my pants." Unfortunately, many survive only for a short time before going down in flames or struggle daily to maintain activities. The individual has not lost their baseline leadership ability; they simply are not equipped to lead at this level.

I may have just described a large number of people who have attempted to lead with the best intentions. So, how does one overcome and improve their leadership abilities? W. Fusselman stated, "Today a reader, tomorrow a leader." Numerous books on leadership have been written, but the most effective tend to

be books that focus on leadership principles with *real world* examples. Pick an author that does not profess to have all the answers but one that offers principles.

Written knowledge is only one side of this equation. Jack Welch, former CEO for General Electric, mentored many individuals that have since gone on to lead international and Fortune 500 companies. The key is these individuals were willing to commit and submit to Mr. Welch's expertise.

Most people do not work for a company the size of General Electric and feel they are limited on developing their leadership abilities. In this situation, an individual must search for either a peer in their field or someone at a higher leadership level in another organization.

One trait of a good leader is to grow leaders within the organization. Untapped leadership passes us each day because we fail to acknowledge the next CEO may currently be working in a job where they are overqualified. I started this article by listing



Webster's definition and the reverse is true also. An individual in a lower job class does not automatically lack leadership skills; simply the skills may not have been groomed.

A leader builds an organization that relates to its employees, customers, and communities. John Maxwell in his book, "The 21 Irrefutable Laws of Leadership" has

a chapter entitled *The Law of Legacy*. This chapter illustrates how the Coca-Cola Company never falters after the sudden death of their CEO. Mr. Goizueta grew the company with strong leadership throughout the ranks so in the event a leader left; the company would maintain the level of success.

An individual may not be in leadership as defined by job class, but often their customers see the individual as a leader in their profession. People follow leaders and support them during the prosperous and lean times.

*Marvin Firch is the Medicare Rural Hospital Flexibility Program (FLEX) Coordinator. Firch is responsible for the coordination and offering of leadership training, planning, activities, and grants.*

## IRIS Approaches 1 Million Mark

By Kevin Teale



The one million mark is a time for celebration. Such is the case with a state database that keeps track of childhood immunizations. Sometime this spring, the one-millionth entry will be made.

Iowa's immunization registry, IRIS (Immunization Registry Information System) is far more than strictly a records system. The information provides important information for Iowa families, the state medical community, and Iowa's health system in general. It's open to patients at public health clinics, health insurance firms, and private doctor's offices that have joined the system.

For families, IRIS gives them a place to turn in the future if they should ever change doctors (or even years later if the doctor has retired) to check on immunization records. It gives parents reminders when immunizations are due, and can print out a certificate of someone's vaccinations.

For the doctors office, IRIS provides ease of record-keeping, helps manage vaccine inventory, keeps patients from getting unnecessary vaccinations, and provides data on how the practice is providing immunization protection to its patients.

For the state, IRIS data can be used to help identify areas that may be at-risk of vaccine-preventable diseases and allow public health agencies to target those areas with vaccine education campaigns.

IRIS is an important tool as Iowa works to ensure its' children are protected against vaccine-preventable diseases.



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# Epidemiology Notes

From the Center for Acute Disease Epidemiology, 1 800 362-2736 (24-hour number)

## Meth in Iowa—Facts & Figures (updated 12-28-04)

- Over the last three years, 960 cases of Iowa children have been reported as victims of abuse due to parents manufacturing meth or possessing meth precursors.
- In 2003, 1,167 child abuse cases were confirmed involving the presence of an illegal drug in a child's body.
- As of December 28<sup>th</sup>, 1,301 meth lab incidents were reported for 2004, compared to a record high 1,182 lab responses for all of 2003. Iowa has the 3<sup>rd</sup> highest number of meth lab incidents, and is 2<sup>nd</sup> on a per-capita basis.
- State narcotics agents confiscated 352 lbs of methamphetamine from communities throughout Iowa in 2003, twice the previous record quantity.
- In 2003, over 99 percent of the meth lab precursor analyzed by the Iowa Division of Criminal Investigation contained some form of pseudoephedrine.
- The proportion of Iowa's drug treatment adult clientele listing meth as their primary substance of abuse has risen to an all-time high of 15.8 percent.
- A federal report on drug treatment admissions says Iowa has the 4<sup>th</sup> highest rate of meth addiction in the nation.

## Influenza Update

For the past four weeks, Iowa has remained at widespread influenza activity. This increase in flu activity level is due to increased influenza-like illness that our sentinel providers have reported, numerous outbreaks within Iowa long-term care facilities, and numerous schools reporting absentee levels exceeding 10 percent with students reporting different types of illness including influenza, GI illness, and strep throat. Preliminary data shows influenza activity peaking in the state in week 6, which is the week ending February 12, 2005. This may change as IDPH receives more data. In Iowa, of the 201 positive influenza isolates University Hygienic Laboratory (UHL) has reported, 86 percent are Influenza A viruses and 14 percent are Influenza B. Nationally, of the positive influenza viruses, 85 percent have been Influenza A viruses and 15 percent have been Influenza B viruses. IDPH and UHL have not received results back from the CDC on Iowa influenza isolates sent by UHL for antigenic characterization. Nationally, of the Influenza A (H3N2) isolates that have been characterized, 55 percent were characterized as antigenically similar to A/Wyoming/3/2003, which is the A/Fujian/411/2002-like (H3N2) component of the 2004-05 influenza vaccine. The other 45 percent appear to be closely

related to a A/California/7/2004 (H3N2), a strain that is being considered for next year's vaccine.

## Disease Reporting Posters

Both the revised "Diseases Reportable to Iowa Department of Public Health" and the new "Environmental and Occupational Diseases Reportable to Iowa Department of Public Health" posters are now available through the Clearinghouse. Please use them in conjunction with each other. They can be obtained by calling 888-398-9696. Any backorders due to unavailability are being filled. If you have not received your items that were backordered, please notify the Clearinghouse.

## What is Community Acquired MRSA?

Methicillin Resistance *Staphylococcus aureus* can cause illness in persons outside of hospitals and health-care facilities. MRSA infections that are acquired by persons who **have not** been recently (within the past year) hospitalized or had a medical procedure (such as dialysis, surgery, catheters) are known as community associated MRSA infections. Staphylococcal or MRSA infections in the community are usually manifested as skin infections, such as pimples and boils, and can occur in otherwise healthy people.

How can I prevent staphylococcal or MRSA skin infections?

Practice good hygiene:

- Keep your hands clean by washing thoroughly with soap and water or using an alcohol-based hand sanitizer.
- Keep cuts and scrapes clean and covered with a bandage until healed.
- Avoid contact with other people's wounds or bandages.
- Avoid sharing personal items such as towels or razors.

More information is available at: [http://www.cdc.gov/ncidod/hip/aresist/ca\\_mrsa\\_public.htm](http://www.cdc.gov/ncidod/hip/aresist/ca_mrsa_public.htm)

## HIV Health Alert

New York City health officials announced that a patient rapidly developed AIDS shortly after being diagnosed with a rare, drug-resistant strain of the HIV virus. The patient was diagnosed in December with 3-DCR HIV, a strain that is resistant to three different classes of anti-retroviral medication.

Drug resistance is becoming increasingly common among patients who are undergoing treatment for HIV. However, cases of drug-resistant HIV in newly diagnosed, previously untreated patients are extremely rare.

The man appeared to have developed AIDS within two to three months after he was infected, or 20 months at the most. In most other cases, onset of AIDS occurs



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# Worth Noting

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## **National Public Health Week is April 4-10, 2005**

The materials for National Public Health Week (NPHW) 2005 are now available. The American Public Health Association (APHA) now has more than 130 partners and six sponsors. As a grassroots campaign, your participation is essential to APHA success.

The theme for NPHW will focus on empowering aging Americans to live longer, healthier lives. APHA believes that many individuals and their families, as well as communities and policymakers, are missing opportunities to take the preventive actions necessary to keep aging Americans strong and healthy throughout their later years. As a result, older Americans often endure chronic physical and mental illnesses that could be avoided or diminished if they were more proactively addressed. NPHW 2005 will be dedicated to empowering Americans to live stronger, longer. During the week, APHA and its partners will promote the three Ps for adding more healthy years to life: Preventing health problems by practicing healthy living, Protecting your health through early detection and screening, and developing a Plan to manage your health that will promote a high quality of life in later years.

Visit the NPHW website at: [www.apha.org/nphw/toolkit/05-toolkit.cfm](http://www.apha.org/nphw/toolkit/05-toolkit.cfm).

## **Mini-Grant Request for Proposals**

### **Deadline: April 18, 2005**

The Wellmark Foundation issues this Request for Proposals (RFP) for its mini-grant program. The applicant is encouraged to go to the Web site, [www.wellmark.com](http://www.wellmark.com), for information. Definitions of the five priorities are found under the menu item marked "The Wellmark Foundation," then click on "how to apply for funding."

*The Wellmark Foundation priority areas for funding include the following. Within the mini-grant competition, projects must demonstrate a logical, strong connection to one or more of these priority areas:*

**Asthma**

**Diabetes**

**Cardiovascular Disease**

**Depression**

**End-of-Life Care with an Emphasis on Pain Control**

## **The American Lung Association's 801 Grand Power Climb was a Huge Success!**

Congratulations to the Ten Lucas Leapers! Ten Lucas Leapers were the fastest corporate coed team and topped the team fundraisers with over \$1,800 raised. They participated among over 350 registrants and were one of 33 teams to climb the stairs to support local Asthma programs. The event raised over \$38,500 total.

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## **Iowa Department of Public Health**

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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 the FOCUS Editor, Sarah Taylor at [staylor@idph.state.ia.us](mailto:staylor@idph.state.ia.us).



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