



The Englewood Health Watch El Observador de Salud de Englewood

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Immunizations for the older child

As most parents remember, a series of immunizations are given during the first few years of a child's life. These are usually completed by the time a child enters school at age 4-6 years. However, vaccinations are still needed as your child approaches his/her teens. The CDC recommends the following vaccines for children at their 11-12 year-old check up, or as soon as possible thereafter.

- * Tdap
- * Meningococcal vaccine
- * Human papillomavirus vaccine series

If your child did not complete all of his/her early immunizations, he/she may need to "catch-up" with their vaccinations and may need one or more of the following vaccinations:

- * Hepatitis B
- * Polio
- * Measles-Mumps-Rubella (MMR)
- * Varicella (Chickenpox)

Some children may also need additional vaccines if they have underlying chronic illnesses or special conditions apply. These may include:

- * Flu vaccine
- * Pneumonia vaccine
- * Hepatitis A vaccine

Source: [CDC Vaccine Schedule for Teens and College Students](http://www.cdc.gov/vaccines/recs/schedules/teen-schedule.htm)
<http://www.cdc.gov/vaccines/recs/schedules/teen-schedule.htm>

The Health Department offers immunizations at the monthly Child Health Conference, which is now for children ages newborn to 18 years. Vaccinations are provided through the Vaccine for Children program.

Please call the Public Health Nurse for more information including eligibility or for an appointment at 871-6511.

For more information about the [Vaccine for Children Program](http://www.cdc.gov/vaccines/programs/vfc/parents/default.htm), including eligibility:

<http://www.cdc.gov/vaccines/programs/vfc/parents/default.htm>

Vitamin D and Health

A lack of Vitamin D has increasingly been linked to illnesses including osteoporosis, type 2 diabetes, hypertension and cancer. The risk for Vitamin D deficiency may be increased for certain groups of people including: adults over the age of 50, people with dark skin, people with little exposure to the sun, people who are obese, breast fed infants, and people with problems of the stomach and liver that may influence fat absorption. Early symptoms of deficiency may not be noticeable, so a healthy diet including Vitamin D can help decrease the risk of illnesses caused by a lack of Vitamin D.

Getting enough Vitamin D can be done by choosing certain foods, getting more sunlight or taking supplements. Your body produces vitamin D in response to sunlight on your skin. In the winter months, this may not be possible so extra attention to diet is important. Some sources of Vitamin D include cod liver oil, salmon, mackerel, and egg yolks. Other sources of Vitamin D are foods that have been "fortified" with Vitamin D (meaning Vitamin D has been added) such as fortified milk, cereal and orange juice.

If you choose to take supplements for Vitamin D, the dosage should be discussed with your doctor as the recommended dosages are different depending on your age and if you have any underlying illness. Vitamin D levels can be checked by a blood test that would have to be

ordered by your doctor if he/she feels it is indicated. Supplements may interact with medications and can be toxic if taken in too large a quantity.

Getting enough Vitamin D can be a challenge, but can be done through careful food choices, moderate sunlight exposure and talking about the possibility of supplements with your doctor.

For additional information please contact the Debbie Shulgach RN, BSN Public Health Nurse 201-871-6511

Adapted from: [National Institutes of Health Office of Dietary Health Factsheets](http://ods.od.nih.gov/factsheets/list-all/VitaminD/)
<http://ods.od.nih.gov/factsheets/list-all/VitaminD/>



World AIDS Day

Conceived in August 1987 by James W. Bunn and Thomas Netter of the World Health Organization in Geneva, Switzerland, World AIDS Day was first observed on December 1st, 1988. Dedicated to raising awareness and money for the AIDS pandemic, fighting prejudice and improving education, it reminds us that HIV is still part of our daily reality and the importance of continuous communication and prevention efforts throughout the year.

Each year, World AIDS Day has a specific theme used year-round to highlight HIV/AIDS awareness and encourages political leaders to keep their commitment to fighting the dreadful disease. This year's theme is 'Universal Access and Human Rights'. The Theme this year is "Universal Access and Human Rights", reminding us, and the world's leaders, that too many infected people do not have access to adequate care and services.

While the United States has been the world's biggest donor of AIDS-related funding, we lacked a comprehensive plan on AIDS. In July 2010, the [National HIV/AIDS Strategy](#), promised by President Obama during his campaign, was launched. This program aims at: increasing access to care and improving health outcomes for people living with HIV, reducing HIV-related disparities and health inequities, and reducing new HIV infections.

In 2009, only 4% of HIV/AIDS budget funding was spent on prevention, including research. In a study by the Centers for Disease Control and John Hopkins University, one scenario that assumed no increase in funding for HIV prevention predicts a 38% increase in the number of people living with HIV. This makes a compelling case for more attention and funding to tackle the problem.

What are we doing?

The Englewood Department of Health will commemorate World AIDS Day at the Dizzy Gillespie Auditorium of Dwight Morrow High School on Wednesday, December 1 from 8 am to 10 am. Dr. Jennifer Ashton, an OB/GYN physician from Hygea Gynecology, and Mary Hill from "Buddies of New Jersey" are two featured speakers for this event. Later in the day, from 2 to 7 p.m., we will co-sponsor "Testing on the Palisades" with Urban League of Bergen County. The HIV test will be administered in the center of the city (by Bethany Presbyterian Church and Uptown Haircutters, 65 West Palisade Avenue) to anyone who wishes to know his/her status, and will be free of charge. Results will be available within 20 minutes. If you do not know your HIV status, do not miss this occasion.

Reasons to Quit Smoking

Why should you quit smoking? Every smoker has his or her own personal reasons for quitting. Here are some common reasons listed from the American Lung Association. Think about what is most important to you.

✓ For your health! According to the Surgeon General, quitting is a step a smoker can take to improve the length and quality of his or her life. As soon as you quit, your body begins to repair the damage caused by smoking. Of course it's best to quit early in life, but even someone who quits later in life will improve their health.

✓ To save money! It's getting more expensive to smoke cigarettes. State and federal cigarette taxes continue to go up, and in some places, a pack of cigarettes can cost \$10.00. Even if a pack costs "only" \$5.00 where you live, smoking one pack per day adds up to \$1,825.00 each year.

✓ To save the aggravation! It's getting less convenient to smoke. More and more states and cities are passing clean indoor air laws that make it illegal to smoke in bars, restaurants, and other public places.

✓ It's good for the people around you! Cigarette smoke is harmful to everyone who inhales it, not just the smoker. Whether you're young or old and in good health or bad, second-hand smoke is dangerous and can make you sick. Both you and the people in your life will breathe easier!

Better breathing can mean better sleep at your house: Not only are smokers more likely to snore, so are non-smokers who breathe second-hand smoke on a daily basis. Life is just better as a nonsmoker! Smoking interferes with your sense of taste, so food tastes better when you quit. Your sense of smell also improves, so get ready to really enjoy the scent of flowers or fresh-cut grass. You'll be able to make it through a long movie or an airplane flight without craving a cigarette. Within a few weeks after quitting, your smoker's cough will disappear and you'll have more energy.

Cyberbullying: A growing epidemic

Around 10% of all adolescents in grades 7-9 are victims of internet bullying.¹ Although teens have been bullying each other for generations, emerging social media and other online technologies have expanded the effect and extent of bullying. This phenomena has recently taken flight and is defined as cyberbullying. The New Jersey Department of Education defines cyberbullying as "...when a child, preteen or teen is tormented, threatened, harassed, humiliated, embarrassed or otherwise targeted by another child, preteen or teen using the Internet, interactive and digital technologies or mobile phones."

The effects of cyberbullying are well-documented in recent news coverage and have already contributed to a shift in suicide rates globally. In 2004, cyberbullying was the number 11 cause of deaths in the U.S., accounting for 32,439 deaths. Since then, the suicide rate has lowered by 11%, though in a category that did not even exist 20 years ago.² Social networking outlets have implemented precautions to help teens deal with cyberbullying, Internet Service Providers will block hurtful messages through IMs and chat rooms and, if the occurrence becomes too high, an account may be deleted; in addition, numerous support groups and organizations have been formed to address this emerging epidemic.

Locally, our Department of Health's Reach & Teach Program is working with other organizations to implement a *Youth Advisory Board* and an *Underserved Teens Victims Initiative* to address and educate teens on the harm and reach of cyberbullying. With the two goals posed by the national partners who created the *Underserved Teen Victims Initiative*, we will raise awareness about teen victimization and identify effective strategies for reaching and supporting teen victims, as well as build the capacity of victim services professionals to reach and support these teen victims. These campaigns may be audio, video, or public service announcements (PSAs) as well as producing resources, including brochures, palm cards, or tip sheets.

¹ Frisen. A. 2010. Cyberbullying. Science Daily: University of Gothenburg

² Thomas. C. 2009. Teen Online and Wireless Safety Survey. The National Center for Missing and Exploited Children.

Homemade Eggnog—make it safe

Eggnog may be safely made at home using whole or liquid eggs that are pasteurized rather than whole raw eggs which may contain salmonella. Pasteurized eggs are found next to regular eggs at the store. Egg substitutes can also be used. "Pasteurized" means that the product has been heated to the point that will kill bacteria. If you must use "regular" unpasteurized eggs, use a recipe in which you cook the egg mixture to 160°F. At 160°F., the egg mixture thickens enough to coat a spoon. If a recipe calls for folding raw, beaten egg whites into the eggnog, use pasteurized eggs. It has not been proven that raw egg whites are free of salmonella bacteria.

Follow the recipe carefully and refrigerate the prepared product immediately. When refrigerating a large quantity of eggnog, divide it into several smaller containers so that it will cool quickly. Eggnog purchased from your local grocery store has been pasteurized and you do not need to cook it.

The holidays are usually hectic, and by following these tips on the use of raw eggs vs. pasteurized eggs, you will have one less thing to worry about. For more information on food safety, contact our Environmental Health Unit at 201-871-6510.

'Tis the Season to Be Cautious

Special fire safety precautions need to be taken when keeping a live tree in the house. When selecting a Christmas tree, make sure the needles on that live tree are green and hard to pull back from the branches. If the tree is fresh, the needles should not break and the trunk should be sticky to the touch. Do not place your tree close to a heat source, including a fireplace or heat vent. The heat will dry out the tree, causing it to be more easily ignited by heat, flames or a spark. Do not put your live Christmas tree up too early or leave it up for more than two weeks. Keep the tree stand filled with water at all times. When it comes time to dispose of your Christmas tree, never put tree branches or needles in a fireplace or wood burning stove. When the tree becomes dry you will want to get it out of the house promptly. The best way to dispose of your tree is by taking it to a recycling center or having it hauled away by a community pickup service. Have a safe and happy holiday!



*Happy Holidays from the Director and Staff
of the Department of Health*

Free Rabies Clinics for 2011

Mark your calendar!! The 2011 free rabies clinics will be held February 26th at Municipal Court from 11am to 1pm and April 28th from 6 to 7 pm. Please note that late fees for pet licenses start on March 1. Renewal notices will be mailed during the last week of December. Failure to renew your pet's license may result in a summons being issued. Please check the rabies expiration date – if it is BEFORE November 30, 2011 a booster vaccination is required prior to renewal. If you no longer own your pet, please call the Health Department at (201) 871-6506.

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