

health matters

Sunday, September 26, 2004

Volume 1, Issue 12

Back to School... and back to ...Runny-Noses, Colds, Flu!



Expert Advice for Parents as the Flu Season Approaches

Back to school means back to runny-noses, colds and bouts with the flu bug, but added to these normal daily risks for children in the Imperial Valley are the statistics that show the Valley has up to three times the normal asthma rate among school age children and younger.

"We are already seeing some of the common medical problems associated with (the season)," said Dr. Luz Tristan, Chief of Pediatrics and Neonatology in El Centro Regional Medical Center.

She said children and the elderly are more affected by being confined to enclosed areas during colder months and asthma and its complications like pneumonia are prone to occur during this season. Viruses and bacteria are



transmitted by inhalation and by direct contact with recently contaminated articles and surfaces.

The U.S. Department of Health has reported some viruses can live from 20 minutes to two hours on surfaces like school cafeteria tables, desks and doorknobs. The U.S. Department of Education estimates that nearly 22 million school days are lost annually because of the common cold.

El Centro Pediatrician Mirza R. Baig, M.D., said parents may let a child return to school after a bout with the flu or cold even though the child might have a residual runny nose or cough, conditions he said that tend to linger. "If the child feels good, has no fever, is not vomiting and is sleeping properly, it is okay for him or her to return to school," he said.

Both Drs. Tristan and Baig recommend early season flu shots for children as well as adults. "Annual influenza vaccine can be given to infants older than six months, children, adolescents and adults to reduce the impact of the flu," Dr. Tristan said. The U.S. Department of Health agrees, reporting it is particularly important for infants 6 months to 23 months who are more likely to be hospitalized with the flu.

Taking influenza prevention measures can also help to avoid flu complications such as ear infections, pneumonia, asthma exacerbations, upper respiratory problems like croup, or secondary bacterial infections. Priority should be given to high risk children and adolescents with asthma or other chronic pulmonary diseases like cystic fibrosis, cardiac disease, chronic renal problems, HIV patients, diseases requiring long term aspirin treatment, diabetes and pregnancy.

Asthma patients should avoid exposure to allergens in the air, avoid exposures to



Dr. Luz Tristan is the Chief of Pediatrics and Neonatology at ECRMC



El Centro Pediatrician Mirza R. Baig, M.D.

furry animals and smokers, control exercise, and avoid known food allergies. School authorities should be apprised of children with asthma so they will know how to react in the event of shortness of breath or other asthmatic symptoms.

The U.S. Department of Health reports asthma is the leading serious chronic illness among children in the U.S. causing more than 14 million lost school days each year.

Operating under grants from both the California Endowment and the Imperial County Children and Family First Commission, the El Centro Regional Medical Center has had two ongoing programs to assist asthmatic children in the Imperial Valley.

One of the programs seeks to identify asthmatic children in schools and educate both the students and their families in self-managing the disease. The other

seeks to identify the allergens existing in schools and other areas frequented by children. For more asthma information call 482-0978.

Dr. Tristan is available at the Valley Family Care Clinic in Calexico, located at 2451 Rockwood Avenue, Ste. 101, or by calling 357-0508. Dr. Baig is available in El Centro at 1560 S. Imperial Ave., or by calling 352-0581.



Student Lunches, Simply...



By Frances Christopherson, Registered Dietitian, Dietary Department, ECRMC

There are two things to consider when planning a lunch: making it nutritious and making it safe.

Foods, particularly protein foods, are not considered safe if they are out of the safe temperature zone from 40 degrees to 70 degrees more than 2 hours, and 1 hour if the temperature is above 90 degrees.

So, it's best to have an insulated bag, add the freezer gel packs, or freeze foods the night before. And, with these safety

measures, food is considered safe until lunch. Have your child throw away any perishable leftovers.

Then there are some foods which are safe without cold storage. These are fresh fruits and vegetables, cheese, breads, crackers, peanut butter, jelly, mustard, and pickles.

Now, the other thing: making a balanced nutritious lunch. The plan: *Have food from each group!* And for sure, serving size will vary from kindergarten to high school age!

Try to have food from EACH food group!

Here are some examples:

MILK GROUP: Buying milk at school; Low fat fruit yogurts; Packaged pudding

MEAT GROUP: Ham, Turkey, Roast Beef, Tuna, Peanut Butter, Nuts, Cheese, Egg

FRUIT GROUP: Fresh Fruits, Dried Fruits, Fruit Juices



VEGETABLE GROUP: Raw vegetables, such as: Carrots, Broccoli, Celery, Tomato; Vegetable juices, such as: Tomato, V-8

BREAD GROUP: White or Wheat Bread, Bagels, Roll, Crackers

Lunch Ideas!

A lunch can be:

- 1-2 pkgs Peanut Butter Cracker Sandwiches
- 1-2 oz. String Cheese
- Tomato Juice
- Fresh Apple
- 8 oz. Milk

A lunch can be:

- 1-2 Lightly Buttered Bagel Halves
- 1-2 oz. Peanuts
- 1 Small Box Raisins
- 1 cup Packaged Pudding
- Fresh Carrot Sticks

A lunch can be:

- Meat or Cheese Sandwich
- 4 oz. Fruit Juice
- Cherry Tomatoes
- 8 oz. Milk or Lowfat Fruit Yogurt



Our Family Serving Yours

Prevent & Recognize Diabetes In Your Child

Diabetes is a disease that affects the body's ability to produce or utilize insulin. Insulin is the hormone made in the pancreas which helps change food into energy. People with a diabetic pancreas either do not make insulin or the body does not use the insulin properly. There are several types of diabetes including Type 1, Type 2, gestational diabetes (during pregnancy), and insulin resistant (pre-diabetic) or other diabetes related symptoms.

According to the National Diabetes Information Clearinghouse, there are a total of 18.2 million people—6.3% of the population—that have diabetes. (Diagnosed: 13 million people; Undiagnosed: 5.2 million people.) Out of which, about 206,000 people are under 20 years of age. This represents 0.25% of all people in this age group.

Approximately one in every 400 to 500 children and adolescents has Type 1 diabetes. Clinic-based reports and regional studies indicate that Type 2 diabetes is becoming more common among children and adolescents, particularly in American Indians, African Americans, and Hispanic/Latinos. Studies show that diabetes is the fifth leading cause of death in America

According to the California Department of Education, 2004, in the early 90's, 1% to 2% of the total student body was diabetic. By the mid 90's, the numbers had

increased to 16%. By the year 2003, 40% of all 5th, 7th and 9th graders either suffered from obesity or were at risk for obesity.

One problem is that physical exercise has decreased considerably amongst children. Kids are spending more and more time in front of the television or computer. And with most children riding to school on a bus, or in a car, it is estimated that a total of four to five hours per day, are spent sitting.

To add to the problem, kids have fast food readily available to them—and now with "Supersize" options. The California Department of Education estimates that a child views 20,000 fast food commercials in a year.

If children maintain this current lifestyle it will eventually have a negative effect on their health and greatly increase the likelihood of developing diabetes.

The two most effective ways to prevent childhood diabetes are to increase the amount of physical activity in the child, and provide nutritious, portion-conscious meals.

For more information contact the Diabetes Education & Self-Management Center at 1271 Ross Avenue in El Centro, or call (760) 352-5813.



Risk factors for children include:

- **Being Overweight** – 85% of children diagnosed with Type 2 diabetes have a body mass index (BMI) in the 85th percentile or above for their age and sex. These children often eat a high-fat, low-fiber diet, which contributes to weight gain. Getting little or no physical activity also increases a child's risk for developing diabetes.
- **Family History** – At least 75% of children with Type 2 diabetes have a parent, or sibling with the disease.

Symptoms that might indicate glucose levels are up are: extreme thirst, frequent urination, dry skin, hunger, blurred vision, drowsiness and nausea. Symptoms that might suggest glucose levels are down are: shaking, fast heartbeat, sweating, anxious, dizziness, hunger, impaired vision, weakness, fatigue, headaches and irritability.

Visit
www.ecrmmc.org
for more
NEWBORN
Announcements



Baby Boy Salgado

Date of Birth: 9-14-2004

Weight: 6 pounds 12 oz.

Length: 19.5 inches



Baby Girl Arredondo

Date of Birth: 9-9-2004

Weight: 8 pounds 11 oz.

Length: 20 inches



Baby Boy Murillo

Date of Birth: 9-8-2004

Weight: 8 pounds 13 oz

Length: 21 inches



Baby Girl Gutierrez

Date of Birth: 9-3-2004

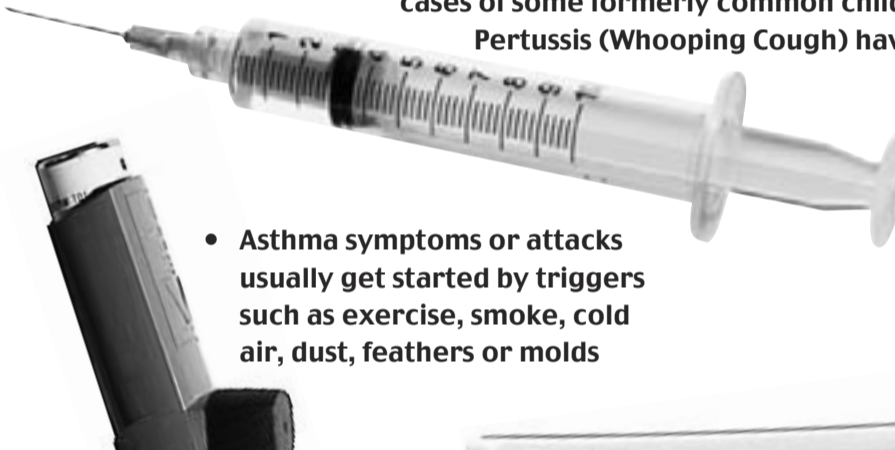
Weight: 7 pounds 5 oz.

For those that are familiar with ECRMC's resource-filled website, we have added a new feature that is already a big hit. Visitors to the site can now find up-to-date newborn announcements and photos. Because these listings are updated on a daily basis, the website is a quick and easy way for parents to share their newborns with family and friends, both near and far away. To find out more about that little bundle of joy your family or friends have been expecting, visit our website at www.ecrmmc.org.


DISCLAIMER This El Centro Regional Medical Center ("ECRMC") newsletter is for the sole purpose of providing readers with reference information as a means of introducing them to ECRMC and to the services provided by its physicians, health care providers, and affiliated clinics. The Information provided is not intended to replace obtaining medical evaluations and health care advice from qualified health care providers. Reference to specific products, processes, businesses, facilities, or services does not constitute or imply recommendation or endorsement by ECRMC. Physicians are not employees of ECRMC.

Staff Writer Robert V. Liggett
©2004 CONVEYOR GROUP

DID YOU KNOW?



- Since the start of widespread vaccinations in the United States, the numbers of cases of some formerly common childhood illnesses such as Measles and Pertussis (Whooping Cough) have dropped by more than 95%
- Asthma symptoms or attacks usually get started by triggers such as exercise, smoke, cold air, dust, feathers or molds
- Toothbrushes should be replaced every two to three months and after illnesses, such as a cold or flu



How to Keep Your Child HEALTHY this Fall:

- Clean toys after sharing, daycare, or extensive use
- Use anti-bacterial gel several times a day
- Make a habit of hand-washing after school
- Teach your child not to drink from other peoples' straws. (Even grandma & grandpa pass on bugs)
- Disinfect "frequent touch" areas: car handles, doorknobs, faucets, toilet handles, seat-belts, backpacks, lunchboxes, tv remote, video game controllers, refrigerator handles, and chairs.
- Stop smoking (or if you absolutely can't quit, NEVER smoke inside)
- Regulate your child's exposure to furry animals, mold, and dust.

