Our Mission

“To assure the highest possible level of health for the people of the communities we serve.”

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Back to School Immunizations

Vaccine-preventable diseases are still seen in Michigan, and may cause disability or death. Immunization is one of our most cost-effective measures to protect children from these diseases. A high proportion of children must be immunized to prevent outbreaks of disease in school settings and other places where children work and play closely together.

Since 1978, Michigan State law has required that each student entering kindergarten or a new school district be up-to-date on their immunizations. In addition, Michigan schools are required to assess and report the immunization status of all 6th grade students. Each student is assessed for the following immunizations: diphtheria, tetanus, pertussis, polio, measles, mumps, rubella, hepatitis B, and varicella.

Additionally the Advisory Committee on Immunization Practices (ACIP) to the Centers for Disease Control and Prevention (CDC) recommends routine vaccination with the following vaccines for the age groups described below.

**Meningococcal Conjugate Vaccine (MCV4) – One dose**

- Adolescents 11-12 year old.
- Adolescents at high school entry.
- College freshmen that live in dormitories.
- Other recommended adolescents, such as those with: damaged or removed spleen; HIV; terminal complement component deficiency; plans to travel/live in parts of the world where this disease is common, such as parts of Africa; and possible exposure to meningitis (Not serogroup B).

Meningococcal disease is caused by bacteria that infect the bloodstream and the linings of the brain and spinal cord, causing serious illness. Every year in the United States, 1,400 to 2,800 people get meningococcal disease. Ten to 14 percent of people with meningococcal disease die, and 11-19 percent of survivors have permanent disabilities (such as mental retardation, hearing loss, and loss of limbs). The disease often begins with symptoms that can be mistaken for common illnesses, such as the flu. Meningococcal disease is particularly dangerous because it progresses rapidly and can kill within hours.

The vaccine is highly effective. However, it does not protect people against meningococcal disease caused by “type B” bacteria. This type of bacteria causes one-third of meningococcal cases. More than half of the cases among infants aged <1 year are caused by “type B,” for which no vaccine is available in the United States. The new meningococcal vaccine was licensed by the U.S. Food and Drug Administration (FDA) for use in people 11-55 years of age. It is manufactured by Sanofi Pasteur and is marketed as Menactra™.
Human Papillomavirus virus vaccine (HPV4) – 3 doses

- Adolescent females 11-12 years old.

- Adolescent females ages 13-18 years of age who have not received the vaccine. It may be given to females as young as 9 years of age.

- The vaccine is also recommended for young women 19-26 years of age.

The Human Papillomavirus virus is the leading cause of cervical cancer in women. Gardasil®, manufactured by Merck, is the first vaccine developed to prevent cervical cancer, precancerous genital lesions and genital warts due to HPV. It has been tested in thousands of women around the world and has been found to be safe and effective in providing protection against the two types of HPV that cause most cervical cancers.

Tetanus, Diphtheria, Pertussis (Tdap) – Booster dose

- Adolescents 11-18 years old.

- Adolescents who have already gotten a booster dose of Td are encouraged to get a dose of Tdap as well, for protection against Pertussis. Waiting at least 5 years between Td and Tdap is encouraged, but not required.

- Adolescents who did not get all their scheduled doses of DTaP or DTP as children should complete the series using a combination of Td and Tdap.

- Adults 19 – 64: should substitute Tdap for one booster dose of Td. Td should be used for later booster doses who have close contact with an infant younger than 12 months of age should get a dose of Tdap. Waiting at least 2 years since the last dose of Td is suggested, but not required.

Healthcare workers who have direct patient contact in hospitals or clinics should get a dose of Tdap. Waiting at least 2 years since the last dose of Td is suggested, but not required.

Tdap was licensed in 2005. It is the first vaccine for adolescents and adults that protects against tetanus, diphtheria and pertussis disease. Pertussis (Whooping Cough) causes severe coughing spells, vomiting, and disturbed sleep. It can lead to weight loss, incontinence, rib fractures and passing out from violent coughing, pneumonia, and hospitalization due to complications.

In 2004 there were more than 25,000 cases of Pertussis in the U.S. More than 8,000 of these cases were among adolescents and more than 7,000 were among adults. Up to 2 in 100 adolescents and 5 in 100 adults with Pertussis are hospitalized or have complications.

For the most current recommended guidelines for childhood and adult immunizations visit the Michigan Department of Community Health (MDCH), Immunization Division website at http://www.michigan.gov/mdch/0,1607,7-132-2942_4911_4914---,00.html or the Centers for Disease (CDC) website at http://www.cdc.gov/nip/default.htm.

Proper Temperature Means Safe Food

One of the most common questions that a sanitarian is asked is whether or not hamburger that is pink in the middle is safe to eat. Eating hamburger patty that is pink or red in the center with out first verifying that the safe temperature of 160°F has been reached throughout is a significant risk factor for foodborne illness, especially E coli 015:H7. The use of a thermometer to ensure proper cooking temperature is especially important for those who cook or serve ground beef to people most at risk of foodborne illness which can lead to serious illness or even death. Those at most risk include young children, seniors, and those with compromised immune systems.

So, pink or red are ok as long as the INTERNAL area of the hamburger has reached the safe temperature of 160°F. If applied to chicken, the pink or red area must have reached a temperature of 165°F. You can measure this by using a metal stem thermometer available at any hardware, grocery and variety store. Ask your friendly sanitarian, they will be happy to show you their thermometer and illustrate how to use it.
Another often asked question, “Is potentially hazardous food at a picnic safe to eat if it has been sitting out for a couple of hours?” Potentially hazardous food is defined as a food of animal origin that is raw or heat treated; a food of plant origin that is heat treated or consists of raw seed sprouts; cut melons; garlic in oil mixtures that are not modified in a way that results in mixtures that do not support the growth of illness causing bacteria or virus.

Provided safe food handling practices were followed during preparation, including proper temperature controls, the 1999 Food Code allows potentially hazardous foods to sit out without any temperature control (41°F or below for cold foods and 140°F or above for hot foods) for a maximum of 4 hours. After 4 hours, the food shall be discarded.

Note, if this method is used for temperature control, do not continually add fresh food product to the dish. Use the entire product in the container and when empty, replace it with a new dish and new food product that has been refrigerated at 41°F or colder or hot held at 140°F or warmer.

Do not add the product from the container that has been out for 4 hours to the food in the new container.

There are just a few of the many healthful information available in the Environmental Health Division at the Dickinson-Iron District Health Department.

The Dickinson-Iron District Health Department will be conducting its annual hearing and vision screening clinics for children 3 ½ to 6 years old. These clinics will be provided during the summer months. The Health Department is requesting that parents, grandparents, or guardians of preschool children call NOW for an appointment for the FREE screening.

Michigan Law requires that children entering school be tested for hearing and vision problems prior to enrollment. In addition, health care professionals encourage young children to be screened to detect problems at an early age. School vision screening programs have demonstrated that too frequently children enter school with vision defects. Some serious defects cannot be corrected at school age while treatment in the preschool years can be highly successful. Preschoolers are tested for clearness of vision, muscle balance, and any obvious symptoms of eyesight problems. Five to ten percent of preschoolers screened may be referred to a professional eye care specialist for further examination.

Hearing loss is a common problem. A hearing problem can affect a child’s behavior or performance in the classroom. Seven out of ten children need treatment for an ear problem before they reach the age of four. A child who has trouble hearing may hear you correctly at times, appear to ignore you at other times, or show signs of speech difficulty. Public health screening by a technician can identify hearing problems. Children showing hearing problems at the screening are then offered the opportunity to attend a free otology clinic to be examined by a medical ear specialist.

Please call the Health Department now for an appointment for your child’s screening. In Dickinson County call (906) 774-1868 or in Iron County call (906) 265-9913.
Kids’ Healthy Lunches to Go

Entrepreneurs are jumping on the publicity about childhood obesity concerns; healthy lunch delivery services are opening in major cities across the US:

- Brown Bag Naturals - www.brownbagnaturals.com
- Kid Chow - www.kidchow.com
- Health e-Lunch Kids healthelunchkids.com
- Kidfresh - kidfresh.com

If you don’t live near a delivery service, it may not be long. Each company above claims to be expanding. Of course if you can’t wait, you could always pack a healthy lunch.


(Source: Health Promotion Practitioner)