



HEALTHY MOTHERS, HEALTHY BABIES
Coalition of Georgia

HMHB Resource Watch

Improving access to healthcare for Georgians women and children.

Public Health News **National Colorectal Cancer Awareness Month!!!**

Vol. 12 Issue 8

March 17, 2010

Inside this issue:

Screen for Colorectal Cancer **March Marks Colorectal Cancer Awareness Month**

It's a deadly and silent killer, and it's the third leading type of cancer in the United States. Colorectal cancer is especially dangerous because patients may not know they have this cancer until it's too late.

"We call colorectal cancer a silent killer, because there are not obvious symptoms-at least not in the beginning stages of the cancer," said Bayhealth Medical Center cancer-screening nurse navigator Paula Hess, MSN,RN,OCN.

Hess said colorectal cancer is likely in an advanced stage by the time symptoms surface. These symptoms may include unexplained fatigue, pain in the abdomen or rectum, bleeding from the rectum and changes in bowel habits lasting a week or more.

Bayhealth Medical Center will observe Colorectal Cancer Awareness Month by offering educational seminars and activities, and lifesaving colorectal screenings.

"Since colorectal cancer has no obvious symptoms, the best way to protect yourself is to have a colonoscopy".

"This procedure allows the gastroenterologist or surgeon to view the lining of your colon to detect any polyps or other abnormalities. Most polyps that are found are an overgrowth of normal tissue, but when a precancerous polyp is removed, we know we've prevented colon cancer," said Hess.

Cancer screening guidelines call for colorectal screenings for men and women starting at the age of 50.

For anyone with a family history of colorectal cancer or precancerous polyps, or a personal history of inflammatory bowel disease such as Crohn's disease or ulcerative colitis, screening will need to start earlier.

Colonoscopies should be repeated every seven to 10 years, or more frequently, depending on the results of the first exam and family history.

One colorectal cancer-screening expert said colonoscopies may seem intimidating but are far easier than most people may realize.

The colonoscopy is actually a very simple procedure that takes less than 30 minutes while you are under conscious sedation. Most people don't even remember the procedure," said Bayhealth Clinical Coordinator for Endoscopy Cheryl Schmidt, RN.

Schmidt said doctors can detect and remove polyps, and retrieve biopsy samples during colonoscopies. She said people who have their polyps removed have a 90 percent reduction in incidents of colorectal cancer.

References

CapeGazette.com (2010). March marks colorectal cancer awareness month. Retrieved on March 17, 2010 from <http://www.capegazette.com/storiescurrent/201003/colorectal16.html>

Public Health News	1
Public Health News	2
HMHB in the Community	3
News from National Healthy Mothers, Healthy Babies	4
News from National Healthy Mothers, Healthy Babies	5
Health Conferences and Observances	6



HEALTHY MOTHERS, HEALTHY BABIES
Coalition of Georgia

HMHB Resource Watch

Improving access to healthcare for Georgians women and children.

Public Health News

Vol. 12 Issue 8

American Cancer Society Guidelines for Colorectal Cancer Screening

March 17, 2010

INCREASED RISK – Patients With a Family History			
Colorectal cancer or adenomatous polyps in any first-degree relative before age 60, or in 2 or more first-degree relatives at any age (if not a hereditary syndrome).	Age 40, or 10 years before the youngest case in the immediate family, whichever is earlier	Colonoscopy	Every 5 years.
Colorectal cancer or adenomatous polyps in any first-degree relative aged 60 or higher, or in at least 2 second-degree relatives at any age	Age 40	Same options as for those at average risk.	Same intervals as for those at average risk.
HIGH RISK			
Familial adenomatous polyposis (FAP) diagnosed by genetic testing, or suspected FAP without genetic testing	Age 10 to 12	Yearly flexible sigmoidoscopy to look for signs of FAP; counseling to consider genetic testing if it hasn't been done	If genetic test is positive, removal of colon (colectomy) should be considered.
Hereditary non-polyposis colon cancer (HNPCC), or at increased risk of HNPCC based on family history without genetic testing	Age 20 to 25 years, or 10 years before the youngest case in the immediate family	Colonoscopy every 1 to 2 years; counseling to consider genetic testing if it hasn't been done	Genetic testing should be offered to first-degree relatives of people found to have HNPCC mutations by genetic tests. It should also be offered if 1 of the first 3 of the modified Bethesda criteria is met. ¹
Inflammatory bowel disease -Chronic ulcerative colitis -Crohn's disease	Cancer risk begins to be significant 8 years after the onset of pancolitis (involvement of entire large intestine), or 12-15 years after the onset of left-sided colitis	Colonoscopy every 1 to 2 years with biopsies for dysplasia	These people are best referred to a center with experience in the surveillance and management of inflammatory bowel disease.



HEALTHY MOTHERS, HEALTHY BABIES
Coalition of Georgia

HMHB Resource Watch

Improving access to healthcare for Georgians women and children.

HMHB in the Community

Glen Haven Elementary School – Atlanta, GA	March 18, 2010 Health Fair 4:00 p.m. - 6:30 p.m.
Holy Trinity Catholic Church - Peachtree, GA	March 20, 2010 Dia de la Familia Health Fair 8:00 a.m. - 12:00 p.m.
Northwest GA Breastfeeding Coalition - Dalton, GA	March 24, 2010 Breastfeeding Conference 7:30 a.m. - 4:15 p.m.
Celebration of Motherhood - Atlanta, GA	March 27, 2010 Grady Hospital Health Fair 9:00 a.m. - 2:00 p.m.
Coca-Cola - Atlanta, GA	March 30, 2010 Health Fair 11:00 a.m. - 2:00 p.m.

Healthy Mothers, Healthy Babies: A Night of Family, Health, and Fun

In Partnership with Chatham County School System and Youth Futures Authority

Date: April 10, 2010

Health Fair - 7:00 p.m.

Location: Myers Middle School, Savannah GA

Screen on the Green - 8:00 p.m.

*Family Fun Activities
Health Information
Movie Showing*

** If you would like to be an exhibitor or sponsor, please contact Para Malden at (770) - 451- 0020 x 309*



HEALTHY MOTHERS, HEALTHY BABIES
Coalition of Georgia

News From National Healthy Mothers, Healthy Babies – March 15, 2010

This Week:

- 1) CPSC Warning on Infant Slings
- 2) Study: Acupuncture and Depression During Pregnancy
- 3) NIH Consensus Statement on VBAC
- 4) Current Issues in Immunization Netconference
- 5) Resources for National Child Abuse Prevention Month
- 6) Sickle Cell Disease Web Site from CDC

MATERNAL-INFANT HEALTH NEWS

1) CPSC WARNING ON INFANT SLINGS

The US Consumer Product Safety Commission (CPSC) has issued a warning to parents and caregivers calling for caution when using infant slings for babies under four months of age. CPSC has researched incident reports from the past 20 years and is currently investigating at least 14 deaths (including three in 2009) associated with sling-style infant carriers. Newborns are at risk from two different types of suffocation hazards from this type of infant carrier, particularly those babies who are premature, twins, in fragile health or those who are a low weight. CPSC has added slings to the list of durable infant products that require a mandatory standard, and recommends that parents and caregivers make sure that the infant's face is not covered and is visible at all times to the sling's wearer. For more information, go to the CPSC Web site at <http://cpsc.gov/cpscpub/prerel/prhtml10/10165.html>. Parents and caregivers are also asked to provide CPSC with any information about incidents or injury reports directly related to infant slings. To report this information, go to <https://www.cpsc.gov/cgibin/incident.aspx> or call CPSC's Hotline at 800-638-2772.

2) STUDY: ACUPUNCTURE AND DEPRESSION DURING PREGNANCY

A study published in the March edition of journal *Obstetrics and Gynecology* examines the efficacy of acupuncture for treatment of depression during pregnancy. A group of 150 pregnant women who were diagnosed with major depressive disorder were randomized to receive either acupuncture specifically for depression or one of two active controls (control acupuncture or massage). Women who received acupuncture specific for depression experienced a greater rate of decrease in the severity of their symptoms compared with the combined controls. The study authors conclude that acupuncture could be a viable treatment option for depression during pregnancy. To review the study online, go to http://journals.lww.com/greenjournal/Fulltext/2010/03000/Acupuncture_for_Depression_During_Pregnancy__A.7.aspx.

3) NIH CONSENSUS STATEMENT ON VBAC

A consensus statement is now available from the National Institutes of Health (NIH) panel on vaginal birth after cesarean (VBAC). The resource was compiled following the recent convening of the group to assess the available evidence on VBAC and to identify future research needs. Resources include a draft panel statement, speaker abstracts and an archived Webcast of the meeting. The panel drafted its statement based on scientific evidence presented in an open forum and on published scientific literature. Their objective was to provide health care providers, patients and the general public with a responsible assessment of currently available data on VBAC. For more information, go to <http://consensus.nih.gov>.

CHILD, ADOLESCENT, FAMILY & COMMUNITY HEALTH NEWS

- 4) **CURRENT ISSUES IN IMMUNIZATION NETCONFERENCE** Sign up now for the April 1st netconference from the National Center for Immunization and Respiratory Diseases at the Centers for Disease Control and Prevention (CDC).

The latest in the "Current Issues in Immunization" series" will address the new recommendations from the Advisory Committee on Immunization Practices (ACIP) for the new 13-valent pneumococcal vaccine (PCV13) and the new recommendations for meningococcal vaccine. This live program will run from 12 noon until 1:00pm eastern time and is designed to provide clinicians with the most up-to-date information on immunization. Registration for the netconference ends March 30th and space is limited. To register, go to <http://www2.cdc.gov/vaccines/ed/ciinc/>.

5) RESOURCES FOR NATIONAL CHILD ABUSE PREVENTION MONTH

April is National Child Abuse Prevention Month, designed to raise awareness about child abuse and neglect and encourage individuals and communities to support children and families. To learn more about the history of the month, access sample proclamations and press releases, and find strategies for reengaging communities and supporting families, go to <http://www.childwelfare.gov/preventing/preventionmonth/>. Resources from Prevent Child Abuse America, including brochures and other materials for health care providers and for families are available at <http://pcaamerica.channing-bete.com/>. The US Department of Health and Human Services' Children's Bureau, Office on Child Abuse and Neglect, its Child Welfare Information Gateway, and the FRIENDS National Resource Center for Community-Based Child Abuse Prevention have created a resource guide targeted specifically for service providers who work with parents, other caregivers, and their children with the common goal of strengthening families. The guide contains resources to promote community awareness of five important protective factors that can help families protect children from the risk of child abuse and neglect, including tip sheets for parents in English and Spanish. To access the guide online, go to http://www.childwelfare.gov/preventing/res_guide_2010/.

6) SICKLE CELL DISEASE WEB SITE FROM CDC

Sickle cell disease is the focus of a new Web site available from the Centers for Disease Control and Prevention (CDC). The site includes easy-to-read information on facts, symptoms and treatments for the disease in addition to individualized pages for different types of visitors (families, health care providers and partners). The Web site also contains free resources, including tip sheets for living well with sickle cell disease. Partner organizations are encouraged to link to the new Web site. To access a linking graphic and description, as well as a badge and button for use on social networking pages, go to the "Partners" page at <http://www.cdc.gov/ncbddd/sicklecell/partners.html>. Access the Web site at <http://www.cdc.gov/ncbddd/sicklecell>.

Sources:

<http://consensus.nih.gov>
<http://cpsc.gov/cpscpub/prerel/prhtml10/10165.html>
<http://pcaamerica.channing-bete.com/>
http://journals.lww.com/greenjournal/Fulltext/2010/03000/Acupuncture_for_Depression_During_Pregnancy__A.7.aspx
<http://www.cdc.gov/ncbddd/sicklecell/partners.html>
<http://www.cdc.gov/ncbddd/sicklecell>
<http://www.childwelfare.gov/preventing/preventionmonth/>
http://www.childwelfare.gov/preventing/res_guide_2010/
<http://www2.cdc.gov/vaccines/ed/ciinc/>
<https://www.cpsc.gov/cgibin/incident.aspx>

Information is reported as provided and does not necessarily represent the view of or the endorsement by the Healthy Mothers, Healthy Babies Coalition of Georgia. A complete copy of HMHB's disclaimer is available on the HMHB Web site at <http://www.hmhb.org/disclaimer.html>

News From National Healthy Mothers, Healthy Babies – March 8, 2010

This Week:

- 1) NPA to Host Summit and Webinar
- 2) National Effort to Reduce the Risk of Stillbirth
- 3) ACIP Recommendation on PCV13
- 4) SAMHSA Report on Substance Use Among Black Adults
- 6) Study: Parental Concerns About Vaccine Safety

MATERNAL-INFANT HEALTH NEWS

1) NPA TO HOST SUMMIT AND WEBINAR

The National Perinatal Association (NPA) will host its 1st Summit and Webinar: Strengthening and Sustaining NICU Support Programs and State Perinatal Associations on April 22, 2010 at St. John's Mercy Medical Center in St. Louis, Missouri. The on-site program will be held from 8:30am until 4:00pm and the Webinar will be available to participants from 1:00pm until 4:00pm that day. The registration deadline is April 7, 2010. The goals of the summit are to assist state perinatal associations and support programs for families of premature infants with: fostering leadership to assure continued advocacy and support of perinatal health and personal family issues through state associations and parent support programs; providing strategies for improved administration and programmatic operations; and growing and sustaining external support and member/volunteer involvement. To access the summit agenda and registration form online, go to <http://nationalperinatal.org/index/pdf/NPA-2010-FAN-SPA-Summit-Brochure.pdf>.

2) NATIONAL EFFORT TO REDUCE THE RISK OF STILLBIRTH

First Candle has launched an educational campaign, "Kicks Count!", designed to raise awareness about stillbirth and the value of monitoring fetal movement. The campaign was implemented in response to the more than 25,000 stillbirths that occur in the US each year, with a primary goal of distributing 350,000 Kicks Count brochures. Educational brochures are being sent to medical providers, home visiting programs, nursing associations, hospitals, clinics, and more. The materials include information on how to perform a kick count, what parents should do if they have concerns about their baby's movement, and general messages about good prenatal care and identifying premature labor. Learn more about Kicks Count by visiting First Candle's Web site at <http://www.firstcandle.org/new-expectant-parents/kicks-count/> or call Dana Kaplin at 1-800-221-7437 ext. 236. First Candle is a nonprofit organization dedicated to eliminating Stillbirth, Sudden Infant Death Syndrome (SIDS) and other Sudden Unexpected Infant Deaths (SUID) with programs of research, education and advocacy. The Kicks Count campaign is supported by All Baby and Child (ABC).

CHILD, ADOLESCENT, FAMILY & COMMUNITY HEALTH NEWS

3) ACIP RECOMMENDATION ON PCV13

On February 24, 2010 the Advisory Committee on Immunization Practices (ACIP) issued a provisional recommendation for use of the new 13-valent pneumococcal conjugate vaccine (PCV13) for all children ages 2 months through 59 months of age. The recommendation also calls for vaccination of children 60 through 71 months of age who have underlying medical conditions that increase the risk of pneumococcal disease or complications. PCV13 protects against invasive pneumococcal disease, which includes sepsis and bacteremia (bloodstream infections), meningitis (inflammation of the coverings of the brain and spinal cord), bacteremic pneumonia and empyema (accumulation of pus in the cavity surrounding the lungs).

The recommendations for use of PCV13 are scheduled to be published in the CDC Morbidity and Mortality Weekly Report (MMWR) on March 12, 2010. For more information about the vaccine, go to <http://www.cdc.gov/vaccines/recs/provisional/downloads/pcv13-mar-2010-508.pdf>.

4) SAMHSA REPORT ON SUBSTANCE USE AMONG BLACK ADULTS

The Substance Abuse and Mental Health Services Administration (SAMHSA) has released the results of its study, "Substance Use among Black Adults." It found that the current rate of alcohol use for blacks aged 18 and older is significantly lower than the national adult average (44.3 percent versus 55.2 percent) and that young black adults (aged 18-25) are much less likely to be currently engaged in binge drinking than young adults in the general population (25.3 percent versus 41.6 percent). However, there was one exception to the generally lower levels of alcohol use. The rate of current binge drinking among pregnant black women aged 18 to 44 is higher than the national average for pregnant women in that age group (8.1 percent versus 3.6 percent). The study is part of a series of reports examining substance use patterns among different ethnic, racial and demographic groups in America. The studies are designed to provide data that will help public health experts, service providers and communities better understand and address the issues affecting various segments of the population. To access the study online, go to <http://oas.samhsa.gov/2k10/174/174SubUseBlackAdults.cfm>.

6) STUDY: PARENTAL CONCERNS ABOUT VACCINE SAFETY

A study published online March 1st in the journal *Pediatric* examines parental vaccine refusal and specific vaccine safety concerns in order to determine whether these concerns were more common in specific segments of the population. In January 2009, researchers sent out over 2,500 online surveys to a nationally representative sample of parents of children who were 17 years of age or younger. The main outcome measures were parental opinions on vaccine safety and whether the parent had ever refused a vaccine that a doctor had recommended for the parent's child. While most parents agreed that vaccines protect children from disease, more than half of the respondents also expressed concern regarding serious side effects and 11.5 % of parents had refused at least one recommended vaccine. Women were more likely to be concerned about serious adverse effects, to believe that some vaccines cause autism, and to have ever refused a vaccine for their child. The study authors found that Hispanic parents were more likely than white or black parents to say that they generally follow their doctor's recommendations about childhood vaccines. This group of parents were less likely to have ever refused a vaccine, but were actually more likely to be concerned about serious adverse effects of vaccines and to believe that some vaccines cause autism. To access the study online, go to <http://pediatrics.aappublications.org/cgi/content/abstract/peds.2009-1962v1>.

Sources:

- <http://nationalperinatal.org/index/pdf/NPA-2010-FAN-SPA-Summit-Brochure.pdf>
- <http://oas.samhsa.gov/2k10/174/174SubUseBlackAdults.cfm>
- <http://pediatrics.aappublications.org/cgi/content/abstract/peds.2009-1962v1>
- <http://www.cdc.gov/vaccines/recs/provisional/downloads/pcv13-mar-2010-508.pdf>
- <http://www.firstcandle.org/new-expectant-parents/kicks-count/>

Information is reported as provided and does not necessarily represent the view of or the endorsement by the Healthy Mothers, Healthy Babies Coalition of Georgia. A complete copy of HMHB's disclaimer is available on the HMHB Web site at <http://www.hmhb.org/disclaimer.html>



Public Health Conferences and Events

- **Strengthening Environmental Justice Research and Decision Making: A Symposium on the Science of Disproportionate Environmental Health Impacts** - (Environmental Protection Agency (EPA)) - March 17-19, 2010, Washington, DC
- **Webinar: Ensuring Cultural Competence Across Care Settings** - (Agency for Healthcare Research and Quality (AHRQ)) - March 18, 2010, 4:00 p.m. ET. Learn how cultural competency can be the foundation for effective innovations on childhood obesity, health care access, and other health care services.
- **International Conference on Healthcare - Associated Infection 2010** - (Centers for Disease Control and Prevention (CDC)) - March 18-22, 2010, Atlanta, GA.. The meeting will set the agenda for healthcare-associated infection (HAI) prevention for the next decade.
- **27th Annual BRFSS Conference** - (Centers for Disease Control and Prevention (CDC)) - March 20-24, 2010, San Diego, CA. The purpose of this conference is to determine the content of the 2011 BRFSS Survey; update attendees concerning state of the art behavioral risk factor monitoring, methodologies, and technological innovations; and provide networking opportunities for participants.

March Health Observances

1-31
National Colorectal Cancer Awareness Month
Prevent Cancer Foundation
www.preventcancer.org/colorectal

1-31
National Endometriosis Awareness Month
Endometriosis Research Center
www.endocenter.org

1-31
National Nutrition Month
American Dietetic Association
www.eatright.org

1-31
Save Your Vision Month
American Optometric Association
www.aoa.org

1-31
Workplace Eye Wellness Month
Prevent Blindness America
www.preventblindness.org



HEALTHY MOTHERS, HEALTHY BABIES *Coalition of Georgia*

*Improving access to healthcare
for Georgians women and
children.*

Healthy Mothers, Healthy Babies Coalition of
Georgia, Inc.
2300 Henderson Mill Road, Suite 410
Atlanta, GA. 303045
www.hmhbga.org

Phone: 770-451-0020
The Powerline: 770-451-5501 or 800-822-2539
Fax: 770-451-2466
E-mail: thecoalition@hmhbga.org

This newsletter is being distributed to HMHB Coalition Members. Please submit your questions or comments about this newsletter and or its content to Kayla Brown at kayla.brown@hmhbga.org.

Information is reported as provided and does not necessarily represent the view of or the endorsement by the Healthy Mothers, Healthy Babies Coalition of Georgia, Inc. A complete copy of HMHB's disclaimer is available on the HMHB Web site at <http://www.hmhb.org/disclaimer.html>.