



# Day One Newsletter

**Day One Program** – *We have relinquished our normal front page update of the Day One program to give you this important news about the Flu Vaccine Shortage from the Centers for Disease Control.*

## 2004-05 Flu Vaccine Shortage: Who should Get Vaccinated?

Almost half of the nation's flu vaccine will not be delivered this year. Chiron, a major manufacturer of flu vaccine, will not be distributing any influenza vaccine this flu season. Chiron was to make 46-48 million doses vaccine for the United States. Because of the vaccine shortage, CDC is changing its guidance about who should get vaccinated this season.

### WHO SHOULD BE VACCINATED?

The existing flu vaccine supplies should be to protect people who are at greatest risk from serious complications from influenza disease.

Everyone in this group should seek vaccination:

- People 65 years of age and older
- Children ages 6 months to 23 months
- Adults and children 2 years of age and older with chronic lung or heart disorders including heart disease and asthma
- Women who will be pregnant during the influenza season
- Adults and children 2 years of age and older with chronic metabolic diseases (including diabetes), kidney diseases, blood disorders (such as sickle cell anemia), or weakened immune systems, including persons with HIV/AIDS
- Children and teenagers, 6 months to 18 years of age, who take aspirin daily
- Residents of nursing homes and other chronic-care facilities
- Household members and out-of-home caregivers of infants under the age of 6 months (Children under the age of 6 months cannot be vaccinated.)
- Healthcare workers who provide direct, hands-on care to patients

### WHO SHOULD GO WITHOUT VACCINATION?

Healthy people 2 to 65 years of age are asked to postpone or skip getting a flue shot this year so that available vaccine can go to protect those at greater risk for flu complications.

### WHAT ABOUT THE NASAL VACCINE, FLUMIST®?

FluMist®, the nasal-spray flu vaccine, is an option for health individuals, ages 5 to 49 years of age. FluMist® is not recommended for healthcare workers taking care of severely immunocompromised people when they are in a protective environment and cannot be given to pregnant women.

### WHAT ELSE CAN YOU DO TO PREVENT THE SPREAD OF FLU?

There are certain good health habits that can help prevent the spread of flu.  
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West Virginia  
Hospital Association

Oct/Nov 2004

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*Good Health Habits continued from page one...*

- Avoid close contact with people who are sick. When you are sick, keep your distance from others to protect them from getting sick too.
- Cover your nose and mouth with a tissue when you cough or sneeze - and dispose of the tissue afterward.
- If you don't have a tissue, cough or sneeze into your sleeve.
- Wash your hands after you cough or sneeze - with soap and warm water, or an alcohol-based hand cleaner.
- If you get the flu, stay home from work or school. You will help prevent others from catching your illness.

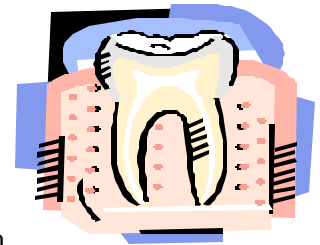
#### **WHAT IF YOU ARE IN A HIGH RISK GROUP AND YOUR CLINIC HAS NOT VACCINE?**

Contact your local health department and ask your regular vaccine provider about other options for influenza vaccination. Health Departments throughout the United States are trying to make sure that as many high-risk people as possible will eventually be able to go to either their regular vaccine provider or a flu shot clinic to get the vaccine.

For more information visit [www.cdc.gov/flu](http://www.cdc.gov/flu)

## **Baby Bottle Tooth Decay**

Baby Bottle Tooth Decay (BBTD) is caused by prolonged contact with almost any liquid other than water. This can happen from putting a baby to bed with a bottle of formula, milk, juice, soft drinks, sugar water, sugared drinks, etc. Allowing her to suck on a bottle or breastfeed for longer than a mealtime, either when awake or asleep, can also cause BBTD.



When liquid from a baby bottle builds up on the mouth, the natural or added sugars found in the liquid are changed to acid by germs in the mouth. This acid then starts to dissolve the teeth (mainly the upper front teeth), causing them to decay. Baby Bottle Tooth Decay can lead to severe damage to your child's teeth and can also cause dental problems that affect her permanent teeth.

But there are steps you can take to prevent Baby Bottle Tooth Decay. Keep these pointers in mind as you care for your child's teeth:

- ♥ Never put your child to bed with a bottle. By 7 or 8 months of age, most children no longer need feedings during the night. Children who drink bottles while lying down also may be more prone to getting ear infections.
- ♥ Only give you baby a bottle during meals. Do not use the bottle as a pacifier; do not allow your child to walk around with it or drink it for extended periods.

These practices not only may lead to BBTD, but children can suffer tooth injuries if they fall while sucking on the bottle.

- ♥ Teach your child to drink from a cup as soon as possible, usually by 1 year of age. Drinking from a cup does not cause the liquid to collect around the teeth, and a cup cannot be taken to bed. If you are concerned that a cup may be messier than a bottle, especially when you are way from home, use one that has a snap-on lid with a straw or a special valve to prevent spilling.
- ♥ Keep your baby's mouth clean. This is an important part of preventing tooth decay. After feedings, gently brush your baby's gums and any baby teeth with a soft infant toothbrush. Use water and a soft child-sized toothbrush for daily cleaning once your child has 7 to 8 teeth.

By the time your toddler is 2 years of age, you should be brushing his teeth once or twice a day, preferably after breakfast and before bedtime. Once you are sure your child will spit, and not swallow toothpaste, you should begin using a fluoride toothpaste. Use a pea-sized amount of toothpaste to limit the amount he can accidentally swallow.

For more information visit: [www.medem.com](http://www.medem.com)

## Is it twins? How will you know?



*It is possible! Your chances of having twins are about 1 in 80. Even so, more twins are being born these days than ever before. It seems that older mothers—those over 35—are more likely to have*

*twins than their younger sisters. And the number of women who postpone childbearing until that age definitely has gone up in recent decades. In addition, increased use of fertility drugs has contributed to the higher incidence of twins and other multiple births. These days, in the United States alone, 120 sets of twins are born every day!*

**How will you know?** The only way to know for sure if you're expecting twins is to identify two separate heartbeats. They can be detected by abdominal ultrasound in your fourth month or by vaginal ultrasound as early as seven or eight weeks.

**Take a double look** Twins are a double blessing, say their mothers. But they do make a pregnancy just a little bit harder.

- **Your weight gain**, for example, will be between 35 and 45 pound rather than the 25 to 35 pounds for a single birth. In addition to the weight of a second fetus, additional blood volume, extra amniotic fluid, and a second placenta add up to still more weight.
- **Your due date may be somewhat fluid.** Twins often are born prematurely because their combined weight may speed the on set of labor.
- **You need optimum nutrition** for each of your babies to arrive at a good birth weight. Make sure every single bite you eat is packed with nutrients. Also, because of the squeeze the babies are putting on your stomach, try eating six little meals throughout the day instead of three larger ones. Extra protein and extra calcium without too much additional fat also are important. Be sure to drink fat-free milk, eat reduced-fat cheeses, and buy only the leanest cuts of meat. Lunch on water-packed tuna. Skip the chips and only dream of high-fat ice cream—stick to the lower fat or fat-free versions.
- **Consider taking a daily vitamin and mineral supplement.** Even a balanced diet may not meet your extraordinary nutritional needs. Your doctor can help you select the right one.

### Talk to other moms of twins

Surf the Internet for a support group. Mothers of twins and other multiples say that being able to talk to other women in the same situation is a lifesaver.

For more information visit [www.verybestbaby.com](http://www.verybestbaby.com).

## Baby's Health—Common Conditions

It's natural to worry when your newborn has a skin or eye condition that you didn't expect, but most are perfectly normal. Here's some information to help calm your concerns.

- **Soft spot.** The indent on top of a baby's head (the fontanel) is where the bones haven't completely grown together. It's covered by a tough membrane and is not easily injured. By about 18 months, it will grow closed.
- **Jaundice.** This yellowish tint to baby's skin occurs when a substance called bilirubin builds up faster than the baby's liver can break it down. If the condition persists, the baby may need treatment with special lights.
- **Spotty skin.** Plugged pores can cause little white spots on your baby's face. They will fade away in time.
- **Stork bites.** These pink, brown and red stains on the back of baby's neck will likely go away by about 18 months.
- **Mongolian spot.** A large bluish-gray mark on the baby's back is common among babies of Asian or African ancestry. It will likely disappear by age 5.
- **Bruises.** Don't be too alarmed. Bruises from delivery will heal eventually.
- **Cradle cap.** This flaky condition on a baby's scalp is caused when the skin produces too much oily sebum. Loosen the scales with baby oil or petroleum jelly, then shampoo scalp and pat dry.
- **Crossed eyes.** Extra folds of skin at the inside corner of the baby's eyes may make him look cross-eyed. Most babies outgrow the condition.
- **Clogged tear ducts.** If baby's eyes look watery or have a discharge, she may have clogged tear ducts. Consult your baby's doctor.
- **Rashes are common in newborns.** Most will fade with time, but ask your doctor if you're concerned.



For more information visit [www.verybestbaby.com](http://www.verybestbaby.com).

## West Virginia Hospital Association

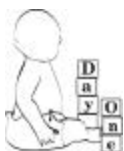
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## Information & Reminders

### Early Childhood Resource Lending Library

The library contains number resources such as books, brochures, videotapes, training manuals, workbooks, curriculum guides, assessment tools, and self-study modules. Also available for loan are environmental controls, adapted toys and software.




Topics include:

-  Early childhood development and curriculum;
-  Child care infants and toddlers;
-  Families;
-  Supervision and administration;
-  Disabilities across the lifespan;
-  Training;
-  Team building;
-  Interagency collaboration;
-  And assistive technology

Materials are available for loan to early childhood personnel and parents. For more information or to borrow materials, visit the library at 350 Capitol Street, Room 427 Charleston or call: 304/558-5388 or toll free within West Virginia at 1-800-642-9704.

Read to your children -  
it will make a difference!

**A child who has been read to from a young age:**

-  **Is better prepared to learn to read**  
National Reading Panel, 2000
-  **Had heard more than 30 million words by age 3 and has a vocabulary of 20,000 words by age 6.** - Hart & Risley, 1995, *Meaningful differences in the Everyday Experiences of Young Children*
-  **Scores highest on reading, math, and general knowledge tests.** - Christian, Morrison, & Bryant 1998, *Predicting Kindergarten Academic Skills*.