



Health and Child Care Newsletter

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Severe Acute Respiratory Syndrome (SARS)

What is a Suspected Case of SARS? It is a respiratory illness of unknown onset since February 1, 2003, and the following criteria:

- Measured temperature greater than 100.4°F (greater than 38°C) **AND**
- One or more clinical findings of respiratory illness (e.g., cough, shortness of breath, difficulty breathing, or hypoxia) **AND**
- Travel within 10 days of onset of symptoms to an area with documented or suspected community transmission of SARS ([see list below](#); excludes areas with secondary cases limited to healthcare workers or direct household contacts) **OR**

Close contact* within 10 days of onset of symptoms with a person known to be a suspect SARS case.

What is a Probable Case of SARS? It is a suspected case with one of the following:

- X-ray evidence of pneumonia or respiratory distress syndrome
- Autopsy findings consistent with respiratory distress syndrome without an identifiable cause

†**Travel** includes transit in an airport in an area with documented or suspected community transmission of SARS.

Areas with documented or suspected community transmission of SARS:

People's Republic of China (i.e., mainland China and Hong Kong Special Administrative Region); Hanoi, Vietnam; Singapore; and Toronto, Canada.

***Close contact** is defined as having cared for, having lived with, or having direct contact with respiratory secretions and/or body fluids of a person known to be suspect SARS case.

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Inclusion/Exclusion and the SARS Virus

On March 15 the Centers for Disease Control and Prevention (CDC) issued a health alert to hospitals, clinicians and state health departments about **Severe Acute Respiratory Syndrome (SARS)**. Since then, public and private health officials have teamed up to identify, isolate and monitor suspect cases of SARS. While the cause is still being investigated, the most likely pathogen identified by CDC at this time is coronavirus.

There are some precautions child care providers can take to protect themselves and other children from exposure to the virus:

1. If a child has been in a high risk area or has had contact with someone from a high risk area, they need to be screened for suspected symptoms of SARS.
2. Exclude children with a fever greater than 100.4 F with a cough or problems breathing
3. Good hand washing!!!
4. Thoroughly disinfect toilets, sinks, other surfaces, and toys.
5. Cover nose and mouth with a tissue when sneezing or coughing.
6. Exclude children at risk for a suspected case of SARS or exposure to a suspected case of SARS.
7. Contact your local health department with any questions.

West Nile Virus Infection and Prevention

What is West Nile virus infection?

The West Nile virus infection is one that is spread by the bite of infected mosquitoes and usually causes a mild illness, but may also cause encephalitis (inflammation of the brain), meningitis (inflammation of the lining of the brain and spinal cord) or polio-like paralysis. This virus is named after the West Nile region of Uganda where the virus was first isolated in 1937. It was first identified in the United States in New York in 1999.

Who gets West Nile virus infection?

Anyone can get West Nile virus infection if bitten by an infected mosquito; however, even in areas where transmission of West Nile virus is known to be occurring only a small proportion of mosquitoes are likely to be infected. Less than 1% of people bitten by an infected mosquito will become seriously ill. People who are over age 50 are at greater risk of severe illness.

How is West Nile virus spread?

West Nile virus is almost always spread by the bite of an infected mosquito. Mosquitoes are infected by biting a bird that carries the virus. West Nile virus is not spread from person to person or directly from birds to humans, but some cases have resulted from blood transfusion and organ transplants. There may be a chance that infected mothers may transmit the virus to their unborn or nursing children.

I've gotten a mosquito bite. Should I be tested for West Nile virus infection?

No, most mosquitoes are not infected with West Nile virus. See a physician if you develop the symptoms below.

What are the symptoms of West Nile virus infection?

The disease may be mild or serious. Mild illness includes fever and muscle aches, swollen lymph glands and sometimes a skin rash. In the elderly, infection may spread to the nervous system or bloodstream and cause sudden fever, intense headache, and stiff neck and confusion, possibly resulting in encephalitis or meningitis. Healthy children and adults may not have any symptoms.

How soon after exposure do symptoms appear?

The symptoms generally appear about 3 to 14 days after exposure but may appear as soon as 1 day after exposure or as late as 7 or more days.

Does past infection with West Nile virus make a person immune?

Yes, a person who gets West Nile virus probably cannot get it again.

What is the treatment for West Nile virus infection? Is there a vaccine for West

Nile virus?

There is not specific treatment. Supportive therapy will be used in more severe cases. Most people recover from this illness. There is no vaccine for humans.

How can West Nile virus infection be prevented?

By controlling the mosquito population and protecting against mosquito bites in the following ways:

1. Wear long, loose and light-colored clothing.
2. If possible, stay indoors when mosquitoes are biting.
3. Use insect repellent with the smallest percentage of DEET necessary for the length of time you are exposed to mosquitoes, but no more than 50% for adults and 10% for children under 12.
4. Turn over or remove containers in your yard where water collects, such as old tires, potted plant trays, buckets and toys.
5. Eliminate standing water on tarps or flat roofs.
6. Clean out birdbaths and wading pools once a week.
7. Clean roof gutters and downspout screens.

Where can I get more information on West Nile virus?

Call your local health department or visit the following web sites-

Centers for Disease Control and Prevention <http://www.cdc.gov/ncidod/dvbid/westnile/index.htm>

VDH Office of Epidemiology <http://www.vdh.state.va.us/epi/wnv.htm>

American Mosquito Control Association <http://www.mosquito.org>



Choose Your Cover

Skin cancer is largely preventable by limiting exposure to UV radiation, sunlight. Exposure to UV radiation during childhood and adolescence plays a role in the future development of skin cancer. *Children have more opportunities and time than adults to be exposed to sunlight. Plan ahead and remember to protect your children from the sun all year round and during all outdoor activities, and not just when at the beach or pool.



SEEK SHADE Because the sun's UV rays are strongest and do the most damage during 10:00 am-3:00 p.m., avoided outdoor activities between this time. If this is not possible, then finding the shade of a tree, beach umbrella, or tent is a practical way to protect the skin.



RUB IT ON Sunscreen with SPF 15 or higher and both UVA and UVB protection should be used whenever a person spends time outdoors. To be effective, sunscreen needs to be generously applied 30 minutes before going outdoors and reapplied after swimming or sweating. Read label before applying lotion to children.



COVER UP A shirt, beach cover-up, or pants are all good choices. However, a typical shirt actually has a sun protection factor (SPF) rating substantially lower than the recommended SPF 15, so it is wise to double up on protection by using sunscreen with at least sun protection factor SPF 15 and stay in the shade when possible.



GET A HAT The head and neck are common sites for skin cancers to occur, so a wide-brimmed hat should be worn to shade the face, ears, scalp, and neck from the sun's UV rays. A hat with a four-inch brim provides the most protection. If a baseball cap is worn, sunscreen with a sun protection factor (SPF) of at least 15 should also be used to protect the ears and neck.



GRAB SHADES Sunglasses protect the tender skin around the eyes and reduce the risk of developing cataracts. Look for sunglasses that block as close to 100% of both UVA and UVB rays. Wraparound lenses are ideal because they keep UV rays from hitting the sides of the eyes.

Play it safe when out in the sun! For more information visit <http://www.cdc.gov/chooseyourcover/> or call (804) 786-6527 for a free brochure.

* children 6 months and younger should not be exposed to the sun

We ultimately make our dogs what they are—good or bad: Reducing Dog-related Injuries

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www.SafeKidsSafeDogs.com
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Every year, hundreds of thousands of children and adults are injured by dogs. Every year, more and more communities attempt to “solve” the problem by restricting or even banning certain breeds or types of dogs. However, the problem of dog-related injuries does not go away. There is no 100% safe breed or cross of dog. The majority of all reported dog-related accidents happen from a dog known to the victim. Statistics range from 75-85% depending on source and what year looked at. How many incidents go unreported? Dog-related accidents have three main elements: dog poorly trained and socialized, child poorly trained and socialized, lack of adequate supervision. And we should toss in: lack of basic and current dog knowledge on behalf of the owner. Let’s look at a few main reasons dogs are more likely to bite:

- **Poorly trained, socialized and maintained.** Dogs are not born knowing how to exist with our species. They need to be taught manners, acceptance of various things and rules. Some older and often called “traditional” training techniques may actually worsen undesired behaviors. Dogs are naturally protective and may bite to try and keep a threat from the property. Dogs left unsupervised in a yard when no one is home are greater risks – they are being left in a position where they may feel the need to stop a perceived threat, i.e. a child reaching over a fence to pat the dog or entering the property to play. If the child is perceived to be a threat, the dog may decide to act.
- **Scared.** Dogs react to fear by either running (Flight) or trying to stop it (Fight). Dogs who are scared or anxious are more likely to bite if they feel they cannot or decide not to escape.
- **Lower tolerance.** This comes from many things including poor training, frustration, feeling scared/anxious, feeling ill or sore, age-related aches, pains and etc. Dogs with puppies may not be as tolerant of some or all people – even ones lived with.
- **When overly excited.** Many accidents are a result of play gone too far, play that is too rough, lack of manners (such as jumping when greeting), etc. Improper play or play gone too far can end up with serious consequences.
- **When tired/sleeping.** A tired dog is more likely to be less tolerant of things. Startling a dog awake can lead to a bite from being scared.

What can we do to help reduce the amount of dog-related injuries? First, we need to educate ourselves about how dogs think and learn. We need to better understand them. Many dog owners and even dog trainers are ignorant to the inner workings of dogs. Then we must do the following:

Impress the following lessons upon children:

- Never run up to a dog, even one you know. This can make a dog feel threatened.
- Never scream or run around a dog, even your own. It can encourage rough play or make a dog feel threatened.
- Approach dogs from the side or front - do not sneak up on a dog from behind or while the dog is sleeping or eating.
- Never approach a dog without adult supervision - even if the dog belongs to a friend or neighbor.
- Always let a dog sniff you first, hold your hands in fists, and do not stare him in the eyes. One meaning in “dog-speak” of staring in the eyes is you are threatening him.
- Pat under the chin or on the back, some dogs may get nervous if you touch the top of the head or reach over their heads.
- If approached by a dog, stand still. If you are on a bike, stop, put the bike down and stand still. Never run or ride

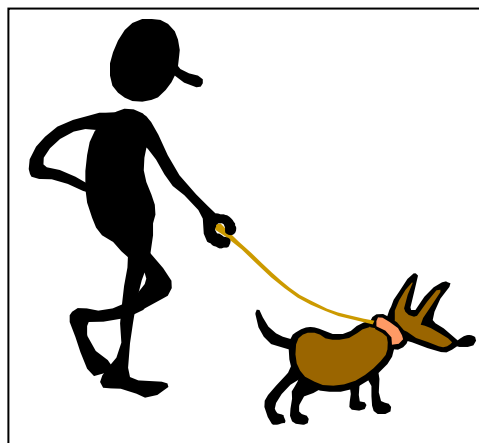
away! Most dogs can easily outrun humans.

- Never approach a dog that is acting afraid (backing up, shaking, tucked tail) or one that is growling or showing teeth - even if the owner is there and says you may approach the dog.
- Never hang over fences or put your hands through fence openings to touch a dog, even one you know. Dogs can be protective of where they live and want to stop you. Or get excited and accidentally nip you when trying to get you to play.
- Leave a mother and pups alone. She may become protective and not want you near her babies.
- Avoid rough games such as tug-of-war, jumping for toys/food, wrestling or chase-the-kid.
- Never tease or hit a dog or pull ears, tail or feet.
- Always inform an adult if you see a loose dog.
- Never run away from a dog - it can encourage a chase.
- If a dog threatens you, avoid eye contact, hold a rolled up jacket or book bag in front of you and back away slowly. Do not scream or run. The dog could chase you.
- If a dog attacks, roll up like a ball and put your hands behind your neck.
- NEVER go with someone who says they have a puppy to show you or they need help finding a lost dog! Run away and tell an adult you know what happened.

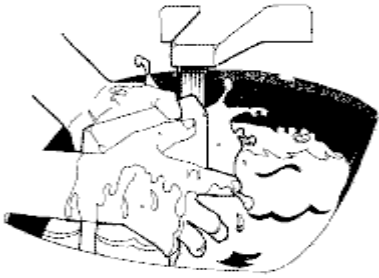
Dog owners must:

- Begin training and socializing your dog or puppy starting the first day it comes into your house. Enroll in a positively based Puppy or Adult dog obedience class.
- Get your dog accustomed to having every part of the body handled.
- Never allow a child to scream, yell or run around a dog. Even if the dog and child belong to you.
- Keep your dog securely fenced and not tied in your yard. Tying can encourage unwanted behaviors.
- Keep your dog leashed when in public. If you want to let him run, go to an area designated for off-leash dogs such as a dog park.
- Never leave your dog unattended in the yard - the temptation for children to “visit” can be too great.
- Make sure your dog knows the rules of greeting: always sitting calmly. If the dog cannot sit, the dog cannot be greeted.
- Never let a child walk a dog unsupervised. Even a medium-sized dog can pull down a child or the child may become frightened and drop the leash.
- Always supervise children (even teenagers) with dogs. And do not hesitate to reinforce the behaviors from both that you want.
- Never force your dog to “say hi” if he is acting wary of a person.
- Monitor your dog’s behavior and address any concerns immediately with a trainer or behaviorist.
- Use every opportunity to teach about dog safety.
- Spay/Neuter your dog. Not a cure-all for bad behaviors, but may help temper ones that may be exacerbated by hormones.

Dog-related injuries will never go away. Even under the best circumstances, accidents may happen. However, through education, understanding, and management, we can greatly reduce the chance of our children or us being injured or that our dog may injure others.



Focus on Hand Washing



Frequent hand washing is the most effective way of preventing the spread of disease. The Virginia Department of Health recommends that child care providers review their hand washing procedures to help prevent children and caregivers from spreading viruses and bacteria.

When should children wash their hands?

- Upon arrival at the child care center
- After using the bathroom or having their diaper changed
- Before and after eating
- Before and after handling food
- After blowing nose, sneezing or coughing
- After playing on the playground
- After playing with a pet
- Whenever hands look dirty
- Before going home

Steps for Proper Hand Washing

- 1) Use soap and warm running water
- 2) Rub your hands vigorously for 15 seconds
- 3) Wash backs of hands, wrists, between fingers and under nails
- 4) Rinse well
- 5) Dry hands with a paper towel
- 6) Turn off the water using a paper towel

When should providers wash their hands?

- Upon arrival at work
- Before and after handling food
- Preparing bottles or feeding children
- After using the bathroom
- Before and after assisting a child using the bathroom or changing a diaper
- After contact with a child's body fluids, such as runny noses
- After cleaning up a child, room or toys
- After taking out the trash
- After handling money
- After playing with a pet
- After removing gloves used for any purpose
- Before giving or applying medications or ointment to a child or self
- Whenever hands look dirty
- Before going home

Help children wash their hands. Teach children to sing a song, such as *Twinkle, Twinkle Little Star*, while scrubbing their hands.