Not Vaccinating Your Children Leads to Loss of General Immunity

Recent evidence in the U.S. shows that more and more American children are not getting routine vaccinations. Experts are concerned that this may lead to a decline in general immunity that has long protected many Americans from serious infections.

In a community where most people are immunized, the unvaccinated few are still protected from disease by the immune people around them. General immunity protects infants who are too young for certain vaccines and adults who cannot be immunized due to a medical condition.

The majority of U.S. children are up-to-date with routine vaccinations that protect against infections such as polio, measles, mumps, whooping cough and chicken pox. However, recent reports from the CDC show that immunization varies from state to state. In 2013, there were 17 states where less than 90% of 1 1/2 to 3-year olds had gotten their first dose of the measles-mumps-rubella (MMR) vaccine. Nationally, there has been a small dip in the numbers of children who received other vaccines. A common misconception is that these diseases are a thing of the past, so it is not harmful to skip or delay children’s vaccinations. Over time, this could lead to loss of the general population immunity on which we depend.

Parents most often opt to skip vaccinations for their children due to unsupported beliefs about vaccine safety. The idea that the MMR vaccine causes autism continues to circulate despite the fact that the 1998 study that first proposed the idea was later found to be fraudulent. Some parents wish to delay their children’s vaccinations because current vaccine schedules subject babies and toddlers to too many shots in a short period. However, studies have found no evidence that the vaccine schedule harms babies’ immune systems.

High vaccination rates protect more vulnerable groups from serious infections. Delaying or skipping vaccination adversely affects the entire community.

Is it a Cold or Allergies?

It can be difficult to determine if your child has a common cold or seasonal allergies because they often have similar symptoms. There are differences between the two conditions, however. If you know what to look for, they are easy to spot.

Symptoms that are similar between allergies and colds include a runny, stuffy or itchy nose, sneezing, coughing, fatigue and headaches. A child with allergies often has fits of sneezing and an itchy nose, and they usually rub their noses in an upward motion. He or she may also complain about an itchy, scratchy throat or itchy eyes, which is not characteristic of a cold. Nasal discharge may also be a telling sign. If it is clear, that usually indicates allergies. With a cold, nasal discharge often appears yellowish.

If children have seasonal allergies, there are things you can do at home to help with symptoms. Limit outdoor activity in the early morning when pollen counts are higher. After kids have been outside, they should wash their faces, hands, and hair and change clothes to remove pollen and other allergens. You should also keep windows closed and change air conditioner filters monthly. Talk to your pediatrician about whether daily allergy medications are a good option for your child.
Avoiding and Treating Athlete’s Foot

The athlete’s foot fungus thrives in warm, moist environments such as socks, shoes and the floors of public showers and locker rooms. Tips for recognizing, preventing and treating athlete’s foot are included below:

The most common symptoms are severe itching and redness between the toes. This inflamed skin may crack and peel. Burning and stinging is not uncommon. The skin may ooze fluid and become crusty.

The best defense against athlete’s foot is to keep the skin clean and dry. Follow these steps:

- Always dry your feet thoroughly (especially between the toes) after a bath or swimming.
- Wear sandals or flip-flops in public locker rooms, showers and swimming areas.
- When at home, take your shoes off to allow your feet to stay dry.
- Change socks often to keep your feet dry.
- Wear cotton socks with athletic shoes as cotton absorbs more moisture.
- Wear dress shoes that allow air to reach the feet. Alternate dress shoes every few days to allow them to dry.
- Throw away worn-out athletic shoes.
- Never wear other people’s shoes, especially athletic shoes.
- Consider sprinkling antifungal foot powder inside socks and shoes to absorb moisture and prevent fungal growth.

Athlete’s foot typically responds well to good foot hygiene and over-the-counter (OTC) drugs, if used properly. Follow these treatment tips:

- Soak infected feet in a mixture of Epsom salt or vinegar and water to help dry the skin.
- Keep feet clean and dry.
- Select an OTC antifungal cream, lotion, liquid, spray or powder such as Lamisil AT®, Lotrimin AT®, Tinactin® or Desenex® and apply to the clean dry skin of the infected area.
- Use one of these products exactly as directed on the package.
- Although symptoms will improve significantly after one week of proper treatment, continue using the antifungal drug for 1 to 2 weeks after symptoms disappear to make sure the fungus is completely eliminated.
- Observe good foot hygiene to prevent a re-infection.
- OTC antifungal drugs should not be applied to blistered or oozing skin without first consulting with your pharmacist or doctor.
- If you notice a pus-like drainage, blisters or ulcers in the inflamed areas, or develop fever, contact your doctor.
- If you are diabetic, have any illness that makes it hard for your body to fight infection, or take any drug which weakens your immune system, let your doctor coordinate treatment of your athlete’s foot.
New Study Finds U.S. is Still Overusing Antibiotics

A study of more than 1 million patient visits for a respiratory-related infection from 2005 to 2012 found that healthcare providers in the U.S. are still prescribing antibiotics far too often. The study looked at how often antibiotics were prescribed for the common cold, bronchitis and ear infections. The common cold is caused by a virus, and bronchitis and ear infections are also commonly caused by viruses. In these cases, antibiotics are rarely necessary. However, researchers found that antibiotics were prescribed for 68% of clinic visits involving these viral infections. Researchers found that doctors in similar practices, or even in the same clinic, often had wide variation in their prescribing habits. For example, about 10% of healthcare providers prescribed an antibiotic in 95% or more of these patients, while other providers rarely prescribed antibiotics in this situation. We are still prescribing antibiotics far too often. Antibiotics are not effective at treating the common cold or other viral infections, yet they increase risk for the emergence of resistant bacteria.

Seafood Safety Tips during Pregnancy

While a well-balanced diet is recommended for everyone, it is especially important in women who are pregnant, breastfeeding or planning to become pregnant. Developing babies need essential nutrients, vitamins and minerals. Seafood is a wonderful source of omega-3 fatty acids, high-quality protein, vitamins and minerals. Some women worry that eating seafood during pregnancy is dangerous. Though there are certain types of seafood you should avoid, in most cases fish and shellfish are good food choices for pregnant women.

The following recommendations from the U.S. Food and Drug Administration (FDA) can help you enjoy the benefits of seafood safely during your pregnancy:

- **Eat 2 or 3 servings of seafood each week.** Try to incorporate 8 to 12 ounces of fish and/or shellfish into your diet every week. This amount will help maximize the developmental benefits that seafood provides to brain and vision development.

- **Avoid fish higher in mercury.** Methylmercury (a form of mercury) can be found in certain fish. It can be dangerous to an unborn child’s developing nervous system if eaten regularly. If you are pregnant or breastfeeding, do not eat the four types of commercial fish with the highest mercury content. This includes tilefish from the Gulf of Mexico, shark, swordfish and king mackerel. Fortunately, these fish are not very popular and can easily be avoided.

- **Choose fish lower in mercury.** Fortunately, there are many seafood options that are lower in mercury. These include shrimp, salmon, tilapia, pollock, catfish and cod.

- **Eat a variety of seafood.** Different types of seafood offer various nutrients. By eating a variety, you can ensure you receive valuable nutrients as part of your healthy diet.

- **Watch your tuna.** No more than six ounces of fish per week should be from albacore (“white”) tuna. Albacore tuna may contain more mercury than canned light tuna.

- **Pay attention to local fish advisories.** Check if there are any local fish advisories on bodies of water when eating fresh seafood or fish caught from local streams, rivers or lakes.
First Aid Tips for Cuts and Scrapes

The American Red Cross offers many excellent suggestions for the proper care of cuts and scrapes. In caring for minor wounds, consider the following:

- Make sure the injury does not require medical attention. Check for broken bones. If a cut is gaping open, continues to bleed heavily after applying pressure for 5 or 6 minutes, or you can see muscle or fatty tissue, seek medical attention. Where stitches may have been necessary in the past, many doctors now use a medical “superglue” to close minor cuts.
- Attempt to stop bleeding by applying pressure with a clean cloth or sterile pad. Paper towels and toilet paper should not be used as they may leave lint or paper fibers in the wound. Do not use a dish towel, dish rag or used wash cloth that may carry bacteria.
- Clean the wound well. Use running tap water and mild soap (if available). Water from a hose or faucet is OK to use, but do not wash a fresh wound with pond, lake or ocean water because it may be contaminated with bacteria.
- Do not leave the wound dry and uncovered. Dry wounds do not heal as well as moist wounds. Apply an over-the-counter “triple antibiotic ointment” 2 or 3 times daily for 2 or 3 days to add moisture and prevent infection.
- Cover the wound with a sterile bandage to keep the wound clean. Change the bandage once or twice each day. Continue to cover the wound until healing is obvious.

Signs and symptoms of an infected wound include the following:
- Increased redness or yellow coloration
- Increased swelling
- Increased tenderness
- Odor
- Pus formation/drainage
- Fever

If the condition of a wound worsens, contact a health care professional.

New Acne Medication

A new medication has been approved by the FDA for the treatment of moderate to severe acne. Epiduo® Forte (adapalene and benzoyl peroxide) 0.3%/2.5% gel is an antibiotic-free medication that is applied to the skin once a day. It is a higher strength than the already available Epiduo® (0.1%/2.5%). In clinical trials, patients who used Epiduo® Forte saw improvement in their acne as early as one week after beginning treatment, and continued to see improvements for up to 12 weeks. More than half of the patients saw a substantial improvement in their severe acne. While the medication is well tolerated in most patients, some side effects have been reported and include skin irritation, eczema, atopic dermatitis and skin burning. Patients who take this medication should avoid excessive sun exposure.

Acne is the most common skin condition and it occurs when pores become clogged with dead skin cells. A bacteria called Propionibacterium acnes can cause acne and is often treated with antibiotics. However, this bacteria has become more resistant to available antibiotics so many doctors have resorted to using antibiotic-free medications, which may work better in patients who have become resistant to previously effective antibiotics.
Limit Your Child’s Screen Time

Children love watching TV or movies, playing video games and using smartphones and computers. Sometimes these devices can be educational, but there are some risks if your child overindulges. How much screen time is too much? The American Academy of Pediatrics discourages media use by children younger than two years old and recommends limiting screen time in older children to no more than one to two hours per day.

Excess screen time can be risky for your child. Too much TV has been linked to:

- **Obesity.** The more TV your child watches, the higher the risk of weight gain. Children tend to overeat while watching TV and crave the junk foods they see in ads.
- **Irregular sleep.** Children who watch too much TV are more likely to have trouble falling asleep or staying asleep. This can lead to fatigue and increased snacking.
- **Behavioral problems.** Children who spend more than 2 hours a day watching TV or using a computer are more likely to have emotional, social and attention problems. Excessive TV watching has also been linked to bullying.
- **Impaired academic performance.** Children who have TV in their bedrooms tend to perform worse on tests than children without TV in their bedrooms.
- **Violence.** Exposure to violent media can desensitize children to violence. Children may learn to accept violent behavior as a way to solve problems.
- **Less time for play.** Excessive screen time leaves less time for creative, active play.

Talk to your child about the importance of limiting screen time and set some rules with consequences for breaking them. Here are some ways to limit screen time.

- **Keep TVs and computers out of the bedroom.** Keep them in a common area of the house so you can monitor their activity.
- **Set school day rules.** Don’t let your child spend all of his or her afternoon hours in front of the TV. Avoid using screen time as a reward or punishment, as this makes screen time seem more valuable to kids.
- **Suggest other activities.** Encourage your child to read, play sports, help with cooking or play board games.
- **Set a good example.** Limit your own screen time and be a good role model.
- **Unplug it.** Designate one day a month (or even a week) as a screen-free day for the whole family.

Don’t Decrease Physical Activity In Winter

People tend to become less active during the winter months because of cold weather. However, not being active may hurt you more than you think. New research has shown that it only takes two weeks of inactivity to lose up to one third of your muscle mass. Younger people lose more muscle mass than older people during long periods of inactivity, and the more muscle mass you have the more you lose. This finding may be more important in older people because it is harder to regain muscle mass the older we get. To combat muscle decline during the winter, experts recommend not changing your exercise routine and including weight training as part of your regular exercise.
Do You Have Metabolic Syndrome?

More than one-third of U.S. adults suffer from metabolic syndrome, a combination of health problems that increase the risk of heart disease and diabetes. The rate of metabolic syndrome increases dramatically with age; almost half of people aged 60 or older in the US have the syndrome. 39% of the Hispanic population has metabolic syndrome, the highest prevalence of all ethnic groups.

Metabolic syndrome represents a combination of conditions which include high blood pressure, abnormal cholesterol levels, high blood sugar and a waist circumference (greater than 40 inches for men or 35 inches for women). Metabolic syndrome is a key indicator of heart disease risk. Metabolic syndrome places a huge burden on our health care system.

Physicians encourage healthy lifestyle choices among individuals who have metabolic syndrome or are in danger of developing it. These choices include avoidance of obesity, regular exercise, avoiding sugar-sweetened beverages and cooking meals at home that incorporate fresh ingredients.

Common Warning Signs of an Approaching Heart Attack

About 20% of heart attacks occur suddenly with no warning, but most heart attacks occur after days, weeks or months of warning signs. If you experience one or more of the warning symptoms listed below, especially if they are new, worsening, unexplained or you have other heart disease or heart disease risk factors, see your doctor as soon as possible. If the chest pain is severe and you feel like you have a weight on your chest, have trouble breathing, are nauseous and/or experience a cold sweat, and you are very pale, call 911 immediately.

Common Heart Attack Warning Symptoms

- Unusual fatigue or overwhelming exhaustion. Lack of strength. Wake up tired. Symptoms worsen over time.
- Frequent indigestion. Chest pain that feels like heartburn. May be associated with nausea and vomiting.
- Shortness of breath. Become winded with little effort. Breathing improves when physical activity stops. Shortness of breath that becomes worse over time.
- Chest pain and discomfort. Chest pain may be vague, like a mild heartburn attack or a pulled muscle. In some cases chest pain will be severe. Pain may radiate to the jaw, neck, arms, upper back and/or shoulder. Radiating pain requires prompt medical attention.
- Chest pressure. The pressure may be mild or crushing, like having a weight on your chest. Chest pain with pressure is not heartburn. Chest pressure, with or without pain, requires immediate medical attention.
- Difficulty falling asleep or staying asleep.
- Cold, sweaty, clammy, pale skin.

Symptoms may come and go for days or weeks. Symptoms will most likely increase in frequency and severity as a heart attack nears.
## Drugs Going Generic in 2015

In 2014 over 20 prescription drugs lost their patent, allowing generic versions to be sold. Among these brand to generic conversions were high-dollar drugs like Celebrex®, Lunesta® and Nexium®. Generic versions of the following brand name drugs will be available in 2015.

<table>
<thead>
<tr>
<th>Brand Name Drug</th>
<th>Generic Name</th>
<th>Primary Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abilify®</td>
<td>aripiprazole</td>
<td>schizophrenia, bipolar disorder, depression (severe)</td>
</tr>
<tr>
<td>AndroGel®</td>
<td>testosterone gel</td>
<td>testosterone replacement</td>
</tr>
<tr>
<td>Avodart®</td>
<td>dutasteride</td>
<td>enlarged prostate</td>
</tr>
<tr>
<td>Coreg CR®</td>
<td>carvedilol ext. rel. capsules</td>
<td>heart failure, high blood pressure</td>
</tr>
<tr>
<td>Epogen®</td>
<td>epoetin alfa injection</td>
<td>anemia in chronic kidney disease</td>
</tr>
<tr>
<td>Gleevec®</td>
<td>imatinib</td>
<td>chronic myeloid leukemia</td>
</tr>
<tr>
<td>Namenda®</td>
<td>memantine</td>
<td>Alzheimer's dementia</td>
</tr>
<tr>
<td>Procrit®</td>
<td>epoetin alfa injection</td>
<td>anemia in chronic kidney disease</td>
</tr>
<tr>
<td>Zyvox®</td>
<td>linezolid</td>
<td>severe bacterial infections</td>
</tr>
</tbody>
</table>

Twenty additional prescription drugs will be available generically in 2015. Significant cost reductions will occur as generic competitors enter the market.