

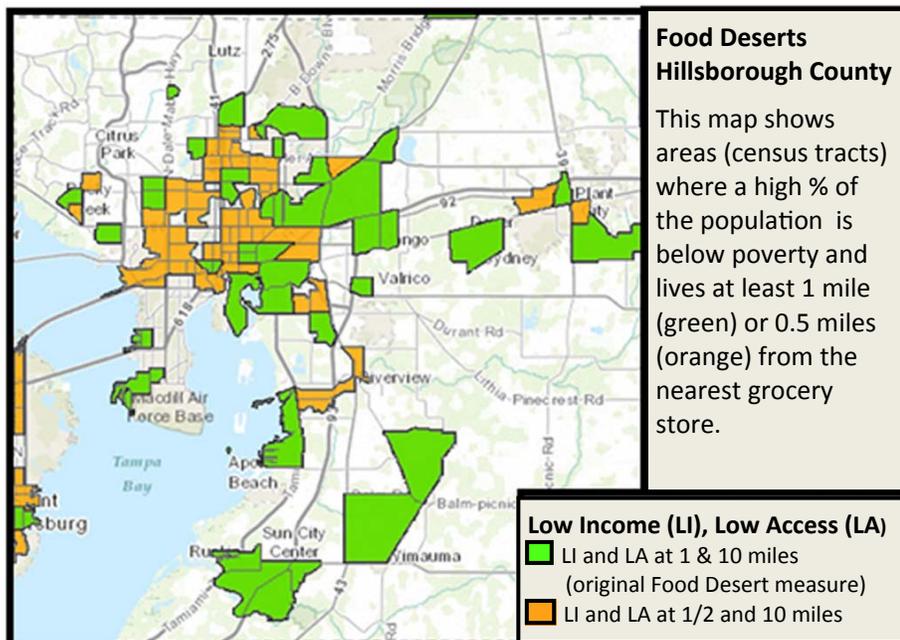
# COMMUNITY WELLNESS NEWSLETTER



## Deserts in Hillsborough County *Addressing Food Security in Our Community*

Consumer choices about food spending and diet are likely to be influenced by the accessibility of food retailers, travel time and mode of transportation to shopping, availability of healthy foods and food prices. Some people, especially those with lower incomes, may have a more difficult time getting healthy and affordable foods. This can negatively affect their food choices and food security (having regular access to safe, healthy, affordable food). The United States Department of Agriculture has defined “*food deserts*” as areas where access to fresh fruit, vegetables, and other healthful whole foods, usually found in impoverished areas, is weak. This is largely due to a lack of grocery stores, farmers’ markets, and healthy food providers within a reasonable distance from home (about 1/2 to one mile in urban areas). Residents in these areas often shop in convenience stores or fast food restaurants, and the least expensive food in these locations is typically higher in fat, added sugar and salt.<sup>2</sup> On any given day or meal, many families in our county may go hungry or have to skip meals. According to Feeding America, 17.2% of residents in Hillsborough County are food insecure, and about 1 in 6 Americans don’t know where their next meal is coming from.<sup>1</sup>

Food deserts are a public health concern because often the people living in these areas are more likely to be overweight or obese and suffer from one or more chronic diseases that can be negatively impacted by a poor diet. While it seems a contradiction to live in a food desert and be overweight, studies show that people who are food insecure are especially vulnerable to obesity due to the associated risk factors of poverty and consumption of high calorie, low nutritive foods.<sup>3</sup>



### Food Deserts Hillsborough County

This map shows areas (census tracts) where a high % of the population is below poverty and lives at least 1 mile (green) or 0.5 miles (orange) from the nearest grocery store.

**Low Income (LI), Low Access (LA)**  
■ LI and LA at 1 & 10 miles  
(original Food Desert measure)  
■ LI and LA at 1/2 and 10 miles

There are ways the community can help improve food security in neighborhoods. Farmers’ markets and community gardens are a great strategy to increase fruit and vegetable access and consumption. These enterprises are also an important part of the local food system. Their popularity is on the rise, and many neighborhoods in Hillsborough County have farmer’s markets and/or community gardens. Other opportunities for increasing food access are also popping up with the help of Tampa Bay Network to End Hunger, Feeding America, Tampa Bay Harvest and initiatives from the health department, local governments and community partners. By supporting these efforts we can all help increase household food security, decrease and eliminate food deserts and promote healthy diets and lifestyles.

Source: USDA Food Access Research Atlas

Sources:

- <http://feedingamerica.org/press-room/press-releases/fa-florida-hunger-facts.aspx>
- <https://apps.ams.usda.gov/fooddeserts/foodDeserts.aspx>
- [http://frac.org/pdf/frac\\_brief\\_understanding\\_the\\_connections.pdf](http://frac.org/pdf/frac_brief_understanding_the_connections.pdf)

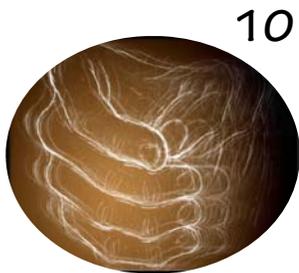
Cover Story

Emily Brown, DTR, CLC  
Health Educator Consultant

Leslene Gordon, PhD, RD, LD/N  
Community Health Director

THE INSIDE STORY:

- 3 Nutrition Nuggets
- 4 MEASLES RISING
- 5 Who Needs a Flu Vaccine?
- 6 Smoke-Free Housing
- 7 Breast and Cervical Cancer Early Detection
- 8 Walk and Bike to School Day
- 8 WALKABILITY Day Results
- 8 Imagine 2040
- 9 Unlicensed Medical & Health Care Activity
- 10 Parkinson's Disease - The Shaking Palsy
- 12 Look Before You Lock - Where's Baby?
- 13 Child Safety Seats
- 14 On-going Community Services
- 15 Community Happen-



## Personal Responsibility, a Reality

We are going through a period of phenomenal change all around us at so many different levels that it's hard sometimes to keep up. Some of the changes are good, some not so good, and others, well, we will just have to wait and see. Our commitment to ensure the health of Hillsborough citizens has not changed, hence our continued focus and vigilance related to preventing disease and promoting healthy behaviors.

As a health department, we are very familiar with research and other data that indicate the health status of our community. We know that obesity rates are still high and growing; that diabetes hospitalizations and deaths are higher than they should be; and that our infant death rates far exceed other counties. All of these are complex health issues that must be addressed by many different types of social and health interventions, and public agencies must continue to act on these interventions and provide the resources for our partners to do the same. We recognize the citizens in this community as our partners and are well aware that community, families, and individuals must also take steps to make themselves healthy. No agency or institution, no matter how good, can have an impact on the health status of the community if individuals don't recognize their role in assisting with these problems. We can promote screenings and even offer them free of cost, but individuals have to take action to actually receive the service.

We encourage our local businesses, faith-based organizations, schools, and other governmental agencies to continue their support of public health efforts. But we also encourage individuals to make those personal changes in behavior that improve health. Small changes on a long-term basis, such as reducing calories from fats and sugar, reducing sodium, controlling portion sizes, increasing fruits and vegetables, and increasing physical activity are some of the simple steps that we continue to promote. Small, gradual, ongoing changes will ultimately transform *unhealthy* behaviors to healthy behaviors. As Mark Twain said, "*Habit is habit and not to be flung out of the window by any man, but coaxed downstairs a step at a time.*" A 2009 research study by Lally and colleagues showed that it takes about 66 days of repeating a behavior to make it a new habit. Sixty-six may sound longer than the typical 21 days that we often hear, but if the result is lower blood sugars or lower cholesterol or longer life, then 66 days is a minor commitment.

As complex as things are, we plan to keep the message simple as we support individuals in their efforts towards improved health.

Have a question or comment?  
Contact us:  
[hillschdfedback@doh.state.fl.us](mailto:hillschdfedback@doh.state.fl.us)

Managing Editor: Cindy Hardy  
Copy Editors: Amanda Brokaw  
Emily Brown  
Nailah Ramsingh

# Nutrition Nuggets

**Friday, October 24, 2014 is FOOD DAY!**

Food Day is a nationwide celebration of healthy, affordable, and sustainably produced food that promotes healthier diets and food education. It is the perfect opportunity to raise awareness of the need to improve the health and wellbeing of our community by making healthy food more accessible to everyone. Food should be healthy, affordable, and easily accessible.

***Celebrate with us and help inspire a change in our diets and food practices.***

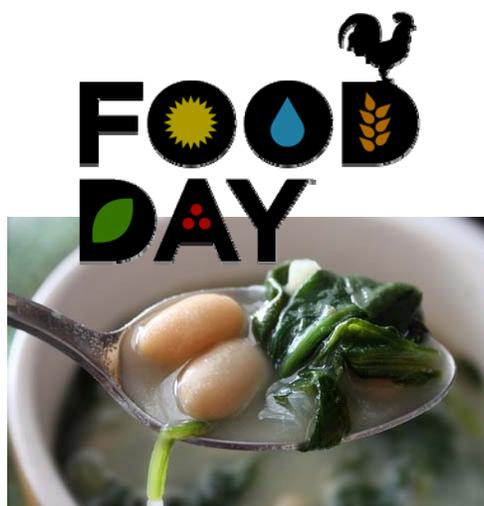
Wondering how you, your family and friends can participate in the Food Day celebration?

**Consider the following ideas:**

- \* Join in on a local Food Day community event
- \* Answer the [14 Questions](#) from [FoodDay.org](#) to see how your diet is impacting your health
- \* Take the Eat Real challenge and use the day to eat healthier

## Tips for Eating Real:

- \* Take and encourage reasonable portion sizes by using appropriately-sized serving utensils and plates.
- \* Eat fruits and/or vegetables every time food is served.
- \* Pick whole grains whenever possible (100% whole grain or whole grain as the first ingredient).
- \* Choose poultry, fish, shellfish, or lean meat.
- \* Exchange at least one meal a week with a vegetarian option.
- \* Replace desserts and pastries with fruit or other healthful foods.
- \* Whenever possible, prepare foods in a healthy way (grilled, baked, poached, roasted, braised, or broiled). Avoid fried foods.
- \* Use healthier condiments and dressings, on the side of course.
- \* Try lower-sodium options.
- \* Make water your default beverage.
- \* Switch full-calorie sugar-sweetened beverages for water, 100% juice diluted with water, low fat or non-fat milk, or calcium and vitamin-D fortified milk alternatives with 40 calories or less per serving.



## SPINACH & WHITE BEAN STEW

Serves 4

Sauté 3 minced garlic cloves in 2 Tbsp. of olive oil for 1-2 minutes. Stir in a 15 oz. can of reduced sodium white beans with their liquid and a 8-10 oz. bag of baby spinach. Season with plenty of freshly ground pepper. Top each serving with 1 Tbsp. of grated parmesan cheese.

### Nutrition per serving:

254 calories; 9 g fat (2 g saturated fat); 15 g protein; 31 g carbohydrates; 9 g fiber; 320 mg sodium

# MEASLES RISING



Sounds a like a movie title. A scary movie. Many advances in technology, medicine, science, and industry have been made in the last 15 to 20 years, so finding a disease in our population which is vaccine-preventable and was declare eliminated<sup>1</sup> from the US in 2000 is now at the highest levels since then for just the first 6 months of this year, from January 1, 2014 to August 1, 2014, is extremely concerning.

Centers for Disease Control and Prevention (CDC) has recently published a report of measles activity and it is indeed a scary and worrisome situation. But it does not have to be. A proven-safe, effective, and available vaccine is able to prevent the disease, thereby preventing outbreaks because of the group immunity it provides when as many people as can be are vaccinated. Before the measles vaccine program started in 1963, approximately 3 to 4 million people got measles each year in the United States. Of those, 400-500 died, 48,000 people were hospitalized and 1,000 developed chronic disability from measles encephalitis. Measles is not just a fever and a rash that goes away in a few days. It is a highly contagious respiratory disease with the potential for complications, making it exceptionally serious.

According to Dr. Anne Schuchat, Assistant Surgeon General director of CDC's National Center for Immunizations and Respiratory Diseases, "the current increase in measles cases is being driven by unvaccinated people, primarily US residents, who got measles in other countries, brought the virus back to the United States and spread it to others in communities where many people are not vaccinated."<sup>2</sup>

The large number of measles cases this year stresses the importance of vaccination. More than ever, health care providers need to be alert to the possibility of measles and be familiar with the signs and symptoms allowing for early detection. "Many US health care providers have never seen or treated a patient with measles because of the our nation's robust vaccination efforts and our rapid response to outbreaks", said Dr. Schuchat.<sup>2</sup>

## Measles Cases and Outbreaks

January 1 to August 1, 2014\*

**593**

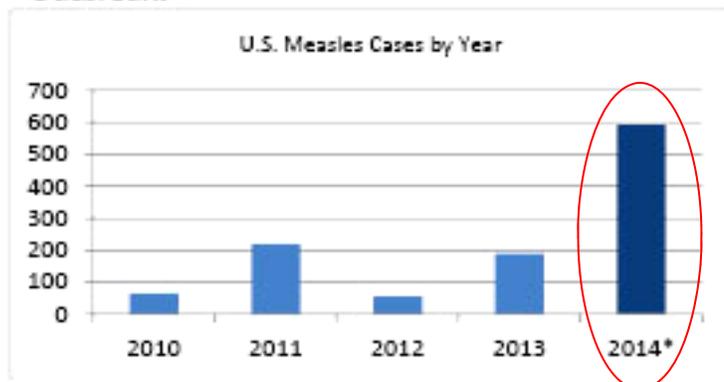
Cases

reported in 21 states: Alabama, California, Connecticut, Hawaii, Illinois, Indiana, Kansas, Massachusetts, Minnesota, Missouri, New Jersey, New York, Ohio, Oregon, Pennsylvania, Tennessee, Texas, Utah, Virginia, Washington, Wisconsin

**18**

Outbreaks

representing 89% of reported cases this year



\*Provisional data reported to CDC's National Center for Immunization and Respiratory Diseases



Timely vaccination is the best way to prevent measles. Infants and young children are at highest risk of contracting a serious case of measles. Currently, the American Academy of Pediatrics and the CDC recommend 2 doses of measles vaccine beginning at 12-15 months of age. Anyone who is not protected against the disease is at risk, especially if they travel internationally. The disease is still common in many parts of the world, including countries in Europe, Asia, the Pacific, and Africa. Worldwide an estimated 20 million people get measles every year.<sup>1,2</sup>

For more information about measles, visit [www.cdc.gov/measles](http://www.cdc.gov/measles). Click for [Vaccine Information Statement on measles](#) in various languages, or to [view on a mobile device](#).

To access complete immunization schedules for infants, children and adults: [www.immunize.org/handouts/vaccine-schedules.asp](http://www.immunize.org/handouts/vaccine-schedules.asp)

**What does "measles elimination" mean?** It is defined as the absence of continuous disease transmission for 12 months or more in a specific geographical area. In such areas, there may still be measles cases, but they are from infected people who bring the disease into the area. In 2000, the US declared measles eliminated from this country, meaning it is no longer native to the United States.

<sup>1</sup> Measles (rubeola), Centers for Disease Control and Prevention, <http://www.cdc.gov/measles>, accessed July 2014

<sup>2</sup> **Immu-News**, Report on Record-Breaking Year in Reported Measles Cases, Florida Department of Health, <http://www.floridahealth.gov/>, Summer 2014 issue

# Who needs a flu vaccine?



**Even healthy people can get the flu, and it can be serious.**

Everyone 6 months and older should get a flu vaccine. **This means you.**

This season, protect yourself—and those around you—by getting a flu vaccine.



U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention

[Use Flu Vaccine Finder](#)  
to locate a provider  
near you!

**What is influenza (also called flu) and who should be vaccinated?** The flu is a contagious respiratory illness caused by influenza viruses that infect the nose, throat, and lungs. It can cause mild to severe illness, and at times can lead to death. The best way to prevent the flu is by getting a flu vaccine each year. Everyone who is at least 6 months of age should get a flu vaccine this season.

**Signs and symptoms of flu:** People who have the flu often feel some or all of these signs and symptoms:

- Fever\* or feeling feverish/chills
- Cough
- Sore throat
- Runny or stuffy nose
- Muscle or body aches
- Headaches
- Fatigue (very tired)
- Some people may have vomiting and diarrhea, though this is more common in children than adults.

*\*It's important to note that not everyone with flu will have a fever.*

**When to get vaccinated against seasonal flu:** Yearly flu vaccination should begin soon after flu vaccine is available, and ideally by October. However, getting vaccinated even later can be protective, as long as flu viruses are circulating. While seasonal influenza outbreaks can happen as early as October, most of the time influenza activity peaks in January or later. Since it takes about two weeks after vaccination for antibodies to develop in the body that protect against influenza virus infection, it is best that people get vaccinated early so they are protected before influenza begins spreading in their community.



# Why did we go smoke-free?



“Going smoke-free was the RIGHT policy for health, safety and cost reasons - for ALL of our residents.”

Bill Russell, Sarasota Housing Authority, President & CEO

“We adopted a smoke-free policy in January 2013 for all of our Public Housing and Neighborhood Stabilization properties. Our focus and decision was quite simple:

1. Create a healthier living environment
2. Promote a healthier lifestyle
3. Cut the cost associated with smoking damage to units”



Sherri Campanale, Housing Authority of the City of Fort Myers  
Director of Housing & Maintenance Operations

For more information: [www.tobaccofreeflorida.com/smokefreehousing](http://www.tobaccofreeflorida.com/smokefreehousing)

Several residential properties in Hillsborough and Pinellas Counties have implemented smoke-free policies.

“There’s a fear of alienating resident smokers, but most communities that have taken the leap consider smoke-free housing an edge over the competition and have determined that there is a market for this product”, according to Chip Tatum, the former Government Affairs Director for the Florida Apartment Association.

Across the state, there are more than 500 smoke-free multi-unit housing properties and 73,000 smoke-free units.

For property managers and landlords, smoke-free policies can have economic benefits. More than 80 percent of Floridians are non-smokers. Many people who do smoke do not permit smoking in their homes. Given these numbers, many properties have very successfully marketed their smoke-free policy as an amenity, not a restriction. Smoke-free policies can save money by eliminating the need to repair or replace carpeting, floors, fixtures, countertops or appliances damaged by burns or nicotine stains. At the end of a lease, smoke-free units require less turnover time due to fewer preparation and repainting needs.

Tobacco smoke can move along air ducts, through cracks in the walls and floors, through elevator shafts, and along plumbing and electrical lines affecting units that are nearby.<sup>1,2</sup> Therefore, there are also numerous benefits for residents as tobacco smoke contains more than 7,000 chemicals, hundreds of which are toxic and at least 70 known to cause cancer.<sup>3</sup> Exposure, even for short periods of time, can be dangerous.<sup>4</sup>

“A home should be a safe place for everyone, especially for children, people with existing health conditions, and the elderly who are more vulnerable to the effects of secondhand smoke,” said Nailah Ramsingh, Heath Educator at Florida Department of Health in Hillsborough County.

Secondhand smoke is not the only danger. Smoking-related fires are the leading cause of fire deaths in residential buildings.<sup>6</sup> These fires are eight times more likely to result in death than fires that start from another source. Smoking-related fires in residential buildings result in an average of approximately 365 deaths, 925 injuries, and \$326 million in property loss each year.<sup>5</sup> For more information about smoke-free properties in Hillsborough County, please visit Hillsborough County Anti-Drug Alliance at [www.hcada.com/tobacco](http://www.hcada.com/tobacco).

1 Office of the Surgeon General. The Surgeon General’s call to action to promote healthy homes. Washington, DC: Department of Health and Human Services, 2009.  
 2 Public Health Service, Office of the Surgeon General. Children and secondhand smoke exposure: excerpts from The Health Consequences of Involuntary Exposure to Tobacco Smoke: a report of the Surgeon General. 2007.  
 3 U.S. Department of Health and Human Services. How Tobacco Smoke Causes Disease: The Biology and Behavioral Basis for Smoking-Attributable Disease: A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2010.  
 4 U.S. Department of Health and Human Services. The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Coordinating Center for Health Promotion, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006  
 5 U.S. Fire Administration. (USFA) Smoke-Related Fires in Residential Buildings Report (2008-2010). <http://www.usfa.fema.gov/downloads/pdf/statistics/v13i6.pdf>.  
 6 2010 report by the U.S. Fire Administration (USFA)

**ABOUT TOBACCO FREE FLORIDA** - Tobacco Free Florida is a statewide cessation and prevention campaign funded by Florida’s tobacco settlement fund. Tobacco Free Florida is managed by the Florida Department of Health, specifically the Bureau of Tobacco Free Florida. Smokers and smokeless tobacco users interested in quitting are encouraged to call the Florida Quitline at 1-877-U-CAN-NOW to speak with a Quit Coach. To learn about Tobacco Free Florida and the state’s free quit smoking resources, visit [www.tobaccofreeflorida.com](http://www.tobaccofreeflorida.com) or follow

## BREAST AND CERVICAL CANCER EARLY DETECTION

The Florida Department of Health is funded by Centers for Disease Control and Prevention (CDC) to provide detection services to women 50-64 who are unfunded for breast and cervical cancer screenings.

Between July 2012 and June 2013, this program provided 35,315 breast screenings and diagnostic tests to 18,006 underserved women through a network of over 750 healthcare professional statewide. Three hundred sixteen women were diagnosed with breast cancer and 49 women were diagnosed with cervical cancer or pre-cancers. Of those, 100% of the women diagnosed were referred to treatment providers.

This valuable and successful program in Florida exceeded 100% of CDC's 11 core program performance quality indicator standards and exceeded 91% of these standards when all CDC-funded program results were combined.

In Hillsborough County, our team works as regional contract managers, community partners and service providers to ensure women receive quality service in the shortest possible time. We also provide education to the community to raise awareness of the importance of regular screenings for early detection of breast and cervical cancer.

Excerpts from *The Inside Scoop*, Florida Department of Health's Division of Community Health Promotion, accessed July 31, 2014



Breast cancer is the most common cancer among American women. Getting [mammograms](#) regularly can lower the risk of dying from breast cancer.

**If you are 50 to 74 years old, be sure to have a screening mammogram every two years.**

If you are 40 to 49 years old, talk to your doctor about when to start and how often to get a screening mammogram. **Are you worried about the cost?** CDC offers free or low-cost mammograms and education about breast cancer. [Find out if you qualify.](#) If you qualify, access more information about local services [BREAST AND CERVICAL CANCER SCREENINGS](#).

[HEALTHCARE PROVIDERS](#) who want more information about how to provide services under this program.

Our program staff are happy to assist!

Just call: 813-307-8071.



## Florida Breast and Cervical Cancer Early Detection Program



*“For peace of mind”*

This educational presentation has been developed for groups of women in faith-based and community settings to increase their knowledge about:

- **Breast cancer**
- **Cervical cancer**
- **Human papillomavirus (HPV)**

*We can provide our FREE 45-minute presentation at your church, organization or community meeting.*



### *Participants will receive:*

- Information and assistance in locating breast and cervical cancer screening locations in your county (including Hardee, Highlands, Hillsborough and Polk)
- Mammograms and Pap Test applications for those participants who are eligible for the program

**Call (813) 307-8071 for more information or visit us at:**  
[www.hillscountyhealth.org](http://www.hillscountyhealth.org)

# WALKBIKE TO SCHOOL

## WEDNESDAY OCTOBER 8, 2014

### WHY WALK OR BIKE TO SCHOOL?

**It's Fun!** Walking and bicycling bring a sense of joy and independence.

**Healthier Habits** The trip to school is a chance for children and adults to get the physical activity they need.

**Cleaner Environment** Replacing car trips to school can reduce congestion and air-polluting emissions.

**Promoting Safety** Building sidewalks, providing education programs and adding traffic calming measures are some of the ways to improve safety. Encouraging walking and bicycling to school can help build support for infrastructure improvements in the broader community.

**Community Benefits** Reducing traffic congestion, boosting a sense of community, and improving neighborhood connections benefit the community.

### HELP KIDS DEVELOP HEALTHIER HABITS!

Walking and bicycling to school enables children to incorporate the regular physical activity they need each day while also forming healthy habits that can last a lifetime. There are many different ways to show students, families and communities that walking or bicycling to school is a fun and feasible way to travel. Your school can share information about activities they plan! Visit the website and share what you do to walk or bike to school.

<http://www.walkbiketoschool.org/ready>



### WALKABILITY DAY

Tampa Bay PARTNERS



**Check out the results!** While more in-depth information will be shared with our county leaders and planners, the short presentation provides some great information.

Didn't participate this year? Make sure your neighborhood is represented in the results next year! Contact your neighborhood association and ask them to coordinate resident participation in your area. Encourage your friends, family and neighbors to get involved. Feedback from residents is VALUABLE.

**If you live in a walkable neighborhood, enjoy it. Go walk, bike, skate, jog, and play. Be physically active!**

Open-ended responses to "What do you think would improve your neighborhood's walkability?"

- Better/more/wider sidewalks
- Improved/more lighting
- Ditches/water drainage
- Reduced traffic and vehicles
- Neighborhood maintenance
- Drinking fountains

sneak peek



**YOU STILL HAVE TIME TO SHARE YOUR THOUGHTS ABOUT THE FUTURE OF HILLSBOROUGH COUNTY!!**

Visit the website and let your Planning Commission know what Hillsborough County will look like in 2040.

**Help plan the future!**

<http://www.planhillsborough.org/plan2040/>

# Unlicensed Medical and Health Care Activity

The Florida Department of Health's Unlicensed Activity (ULA) program protects Florida residents and visitors from potentially serious and dangerous consequences of receiving medical and health care services from an unlicensed person. Receiving health care from unlicensed people is dangerous and could result in further injury, disease or even death and is illegal in the State of Florida ([Section 456.065, Florida Statutes](#)).

## Signs of Unlicensed Medical and Health Care Activity (including dentistry):

- ◆ Lack of posted license issued by the Florida Department of Health
- ◆ Medical/dental equipment and tools in residential locations
- ◆ Medical waste in residential locations (needles, bloody bandages, gauze or medical packaging)
- ◆ Heavy pedestrian traffic in residential locations
- ◆ Victims with visible injuries/surgeries/signs of recent medical procedures
- ◆ Suspects giving misleading or confusing information regarding their training or license background
- ◆ Suspects claiming to be a Doctor of Naturopathy (none are licensed in Florida)
- ◆ Unsanitary or unsafe office conditions
- ◆ Requiring cash-only payments
- ◆ Products not associated with legitimate health care practice (Fix-a-Flat®, silicone, Krazy Glue®, etc.)
- ◆ Any other illegal activity

## Remaining Anonymous:

Individuals who provide tips about potential unlicensed medical and health care activity may remain anonymous; however, please note that under Florida law, email addresses are public record. If you do not want your email address released in response to a public records request, do not send electronic mail. Instead, contact our office by phone or in writing. Written communication is also a matter of public record. Omit any information you do not wish to be disclosed.

## Verify a License:

To verify that a person or establishment is licensed to practice a health care profession regulated by the Department of Health, please use our "[License Verification](#)" search application.

## File a Complaint:

Visit the Florida Department of Health online to [file a complaint](#) or suspected unlicensed health care practice. You may also call 1-877-HALT-ULA (1-877-425-8852), email [HALTULA@doh.state.fl.us](mailto:HALTULA@doh.state.fl.us) or mail a complaint form to the following address:

Department of Health, Consumer Services Unit  
4052 Bald Cypress Way, Bin C-75  
Tallahassee, Florida 32399-3275

**LOCAL FIELD OFFICE FOR FLORIDA DEPARTMENT OF HEALTH - INVESTIGATIVE SERVICES in the Tampa area:**  
**6800 N. Dale Mabry Hwy., Suite 220**  
**Tampa, Florida 33614**  
**813-873-4777**

## PARKINSON'S DISEASE

### Hope for the Future of the “Shaking Palsy”

Communicable diseases are serious, usually unexpected and tend to make good fodder for movies and novels, for example the movie “Contagion” from a few years ago. Chronic disease - not so much. But diseases that are chronic in nature, developing over time and lasting for many years and often life, are the ones that are responsible for the greatest majority of deaths - diabetes, heart disease, cancer, and others. As our population ages, chronic disease prevention and control becomes even more critical.

*Parkinson's Disease (PD)* is the second most common neurodegenerative disease after Alzheimer's, with the population prevalence increasing from about 1% at age 60 to 4% at age 80. As with any disease, it can strike younger people (we all know that Michael J. Fox, the actor, is very vocal about his condition) but that is rare and it overwhelmingly strikes those in their senior years. The pathology or nature of PD is the inadequate production of dopamine or death of dopamine-generating cells in a part of the brain that controls movement. Dopamine is a substance made in the body that transmits nerve impulses through the body's central nervous system. Like other diseases, PD is thought to arise from complex interactions between our genes and environmental factors, which remain unknown.<sup>1</sup>  
<sup>2</sup> Specific genetic mutations appear to play a role, but these are uncommon except in rare cases where there are many family members affected by the disease.<sup>3</sup>



Historically, various cultures have reported PD-type symptoms as far back as 1000 BC in India. Perhaps the most accurate of the ancient observations was by Galen, a 2nd century physician and philosopher, who is

said to give the first definitive definition in his writing *On Tremor, Palpitation, Convulsion and Shivering*. The first definitive study and clear medical description was by James Parkinson, an English doctor, in his 1817 *Essay on The Shaking Palsy*.<sup>3,8</sup> It was not until the 1960s that the chemical differences in the brains of Parkinson's patients were identified. Since then, research has been progressing rapidly.

**Symptoms**<sup>3</sup> of Parkinson's disease may vary from one person to another and early signs may be mild and go unnoticed. Symptoms are progressive and usually develop gradually over time, often begin on one side of the body and usually remain worse on that side, even after symptoms

begin to affect both sides. In early stages of PD, the face may show little or no expression. Other signs and symptoms:

- \* Speech changes may include speaking softly, quickly, slurring, or hesitating before talking
- \* Tremor or shaking usually begin in a limb, but often a hand or fingers. There may be a “pill-rolling” tremor where the thumb and forefinger rub back and forth
- \* Impaired posture and balance.
- \* Slowed movement, making simple tasks difficult. Steps are shorter and feet may drag
- \* Muscle stiffness may occur in any part of the body, limiting movement and causing pain
- \* Loss of automatic movements, like blinking, smiling, swinging the arms when walking, gesturing when talking
- \* Writing many become more difficult and appear small

Other additional problems, which may be treatable, often accompany PD:

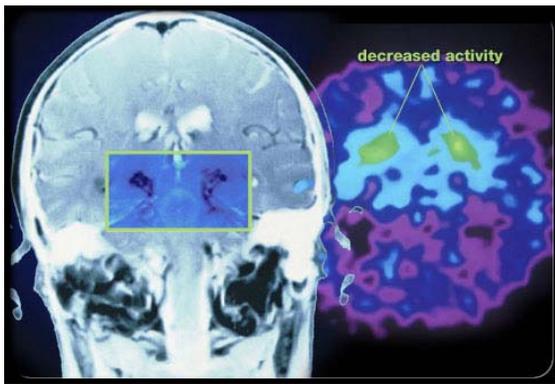
- Thinking difficulties - cognitive problems (dementia) usually in the later stages
- Depression and emotional changes
- Fatigue
- Swallowing
- Sleep problems
- Bladder problems and constipation
- Smell dysfunction, in which identifying smells or telling the difference between them is difficult or impossible
- Pain in specific areas or throughout the body
- Sexual dysfunction

#### Treatment:

So what's the good news on Parkinson's disease? Despite the fact that there is not yet a cure, the symptoms can now be effectively controlled and reduced in severity in most people.<sup>4</sup>

*Medications* are available that can help manage problems. Healthcare providers have a number of options and each person must be individually managed. There is no one “magic bullet”. Certain lifestyle changes may also make living with PD easier.

*Surgery* may be used to control symptoms of [Parkinson's disease](#) and improve the quality of life when medication ceases to be effective or when medication side effects become intolerable. Not every Parkinson's patient is a good candidate for surgery. Every surgical procedure carries inherent risks. There are three surgical procedures for treating Parkinson's disease: ablative surgery (destroys some part of brain structure), stimulation surgery (deep brain stimulation or DBS), and transplantation or restorative surgery (considered experimental at this time), uses the patient's or donor cells.<sup>8</sup>



*Deep Brain Stimulation (DBS)*, now used worldwide to alleviate tremor, rigidity and difficulty of movement, uses high – frequency electrical stimulation of specific areas of the brain to deliver tiny electrical signals through implanted electrodes. In 1987, Professor Alim-Louis Benabid of France first used DBS and the US Food and Drug Administration gave its approval for use in 1997.<sup>5</sup> The advantage over other *surgical options* employed in managing Parkinson’s disease, is that stimulation is adjustable.<sup>6</sup> DBS is generally a well-tolerated procedure. As with all other forms of treatment, DBS is not appropriate for everyone with Parkinson’s disease and is riskier for people over age 70 and those with other underlying medical conditions like high blood pressure and diseases that affect blood vessels in the brain. A healthcare provider and the individual would weigh all the risks and benefits before making the decision to opt for DBS or one of various surgeries to treat PD. A final note on Deep Brain Stimulation, it is a procedure that can be reversed, if needed.<sup>7</sup>

Deep Brain Stimulation is just one of the treatments available to providers for management of Parkinson’s disease. There is some indication it could be employed prior to a patient reaching maximum medication benefit. DBS costs may be offset by reduced need for inpatient care in facilities, day-care, community nursing at home, occupational therapy and higher medication costs. [The total average reduction in PD medication](#) has been shown to be up to 30% to as much as 50% post-Deep Brain Stimulation within approximately five years (National Health Service, United Kingdom).

*Nutrition* is important, particularly when other disease states exist. Since constipation is common in Parkinson’s disease, a diet with plenty of fruits, vegetables and whole grains - all high in fiber, along with an adequate amount of fluids can help prevent this problem. A nutritionally balanced diet provides nutrients like omega-3 fatty acids, which may also be beneficial to people with PD.

*Physical exercise* may increase muscle strength, flexibility and balance, all of which can help prevent falls. It may also improve well-being and reduce depression and anxiety. Healthcare providers may suggest physical therapy, which can be tailored to the individual’s need and abilities.

**The Human Experience:** Statistics and study results are very important, but the patient and caregiver view-points add some valuable input into the conversation about Parkinson’s disease and treatments. Lisa and Pete have shared with us their personal story. When Pete’s symptoms were no longer controlled on the various medication options available, they experienced understandable fear and no small amount of anxiety about the future. Deep Brain Stimulation was offered to Pete in 2012. Lisa researched and sought out others with personal experience of Parkinson’s and DBS. Their ultimate decision was to move forward with DBS. They shared that Pete’s “control”, long lost, has returned to a considerable degree and, while they both understand DBS does not cure Parkinson’s disease, they hold on to the thought that, should a cure come, the DBS process has done no harm.<sup>6</sup>

Our thanks to Lisa and Pete for sharing their experience.

**Final thoughts:** Combined direct and indirect costs of Parkinson’s disease, including taxes, social security payments and lost income from inability to work, is estimated to be nearly \$25 billion per year in the US alone, according to the [Parkinson’s Disease Foundation](#). About a million Americans have Parkinson’s disease. It can affect people at a young age, but that’s rare. More often, people are diagnosed in their 60s. There is no lab or blood test for Parkinson’s.

<sup>1</sup> Marta Gwinn, MD, MPH, “HuGENet™ Case Study”, *Genetics, Coffee Consumption, and Parkinson’s Disease*, Centers for Disease Control and Prevention, [http://www.cdc.gov/enomnics/hugenet/CaseStudy/PARKINSON/PARKcoffee\\_view.htm](http://www.cdc.gov/enomnics/hugenet/CaseStudy/PARKINSON/PARKcoffee_view.htm) (accessed 31 Jul. 2014)

<sup>2</sup> US National Library of Medicine/National Institutes of Health, *Parkinson’s Disease*, Medline Plus®, <http://www.nlm.nih.gov/medlineplus/parkinsonsdisease.html> (accessed 31 Jul. 2014)

<sup>3</sup> Mayo Clinic Staff, “Diseases and Conditions”, *Parkinson’s Disease*, Mayo Clinic, <http://www.mayoclinic.org/disease/basics/definition/CON-2002848?p=1>, (accessed 31 Jul. 2014)

<sup>4</sup> Christopher G. Goetz, Rush University Medical Center, *The History of Parkinson’s Disease: Early Clinical Descriptions and Neurological Therapies*, Cold Spring Harbor Perspectives in Medicine, <http://perspectivesinmedicine.cshlp.org/content/1/1/a008862.full>, (accessed 1, Aug. 2014)

<sup>5</sup> Vittorio A. Sironi, National Center for Biotechnical Information, *Origin and Evolution of Deep Brain Stimulation*, National Library of Medicine, National Institutes of Health, <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3157831>, (accessed 2 Aug. 2014)

<sup>6</sup> Parkinson’s Appeal, Institute of Neurology University College London, *What is Deep Brain Stimulation*, Parkinson’s Appeal, <http://www.parkinsonsappeal.com>, (accessed 2 Aug. 2014)

<sup>7</sup> US National Library of Medicine/National Institutes of Health, *Deep Brain Stimulation*, Medline Plus®, <http://www.nlm.nih.gov/medlineplus/ency/article/007453.htm>. (accessed 31, Jul. 2014)

<sup>8</sup> Erlick A.C. Pereira and Tipu Z. Aziz, *Surgical Insights into Parkinson’s Disease*, Journal of Royal Society of Medicine, <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1457758/>, (accessed 8 Aug. 2014)

Images courtesy of MedicineNet, Inc., *Parkinson’s Disease: Symptoms, Stages, and Treatment*, [http://www.medicinenet.com/parkinsons\\_disease\\_pictures\\_slideshow/article.htm](http://www.medicinenet.com/parkinsons_disease_pictures_slideshow/article.htm), (accessed 5 Aug. 2014)

Disclaimer: The Florida Department of Health-Hillsborough County strives to make information as timely and accurate as possible. Any reference in this article to any specific commercial product, process, or service or the use of any trade, firm, or corporation name is for the information and convenience of the public and does not constitute endorsement, recommendation, or favoring by the Florida Department of Health.



## SAFETY TIPS



He's a killer.

### KIDS IN HOT CARS HEATSTROKE SAFETY TIPS FOR PARENTS AND CAREGIVERS

Kids in hot cars are a deadly combination. Whether intentional or accidental, these deaths are preventable, which makes it all the more tragic. Here are some helpful tips to make sure it doesn't happen to you.

Remember:

- Never leave a child alone in a parked car, even with the windows rolled down, or air conditioning on. Children's body temperature can heat up 3 to 5 times faster than adults. A core temperature of 107 is lethal.
- Always look in both the front and back of the vehicle before locking the door and walking away.
- Heatstroke can occur in temperatures as low as 57 degrees. On an 80-degree day, temperatures inside a vehicle can reach deadly levels in just 10 minutes.
- Never let children play in an unattended vehicle. Teach them a vehicle is not a play area.
- Always lock your vehicle doors and trunk and keep the keys out of a child's reach. If a child is missing, quickly check all vehicles, including the trunk.

Is dropping a child off not part of your normal routine? Come up with some ways to remind yourself that the child is in the car.

- Place an item that you keep on you, like a briefcase or purse, in the back seat next to the car seat, so that you'll always check the back seat before you leave the car.

- Call your spouse after you drop the child off to make sure you didn't forget.
- Have daycare call you if your child doesn't show up.
- Write a note and place it on the dashboard of the car. Or set a reminder on your cell phone or calendar. You can also download the Baby Reminder App for iPhones.

If you see a child alone in a hot vehicle:

- Call 911 or your local emergency number immediately.
- If they are in distress due to heat, get them out as quickly as possible. Cool the child rapidly, by spraying them with cool water or a garden hose. NEVER use an ice bath.

**Remember: kids in hot cars are a deadly combination. Don't take the chance. Look before you lock.**

**Additional Resources:**

- National Highway Traffic Safety Administration - [www.safercar.gov/heatstroke](http://www.safercar.gov/heatstroke)
- San Francisco State University, Department of Earth & Climate Studies - [www.gweather.com/heat/](http://www.gweather.com/heat/)
- Safe Kids - [www.safekids.org](http://www.safekids.org)
- Children's Hospital of Philadelphia - [www.chop.edu](http://www.chop.edu)



**FACT SHEETS:** [English](#), [Español](#)

[Note: This study has now been published in *Pediatrics*. Click [here](#) to download ]

So far in [2014](#) there have been at least 19 heatstroke (hyperthermia) deaths of children in vehicles; 4 have been confirmed as heatstroke and 5 are still pending official findings by the medical examiner. Last year, 2013, there were at least 44 deaths of children in vehicles; 39 which have been confirmed as heatstroke and 5 which, based upon the known circumstances, are most likely heatstroke ([2013 list](#)). In 2012 there were 34 deaths of children due to heatstroke after being left in or having gained access to hot cars, trucks, vans and SUV's. Since 1998, there have been at least 625 documented cases of heatstroke deaths of children in vehicles.

### STATISTICS

- Total number of U.S. heatstroke deaths of children left in cars, 2014: **19**
- Total number of U.S. heatstroke deaths of children left in cars, 2013: **44**
- Total number of U.S. heatstroke deaths of children left in cars, 1998-present: **625**
- **Average number of U.S. child heatstroke fatalities per year 6 since 1998: 38**

**That's 38 too many.**

<http://www.safercar.gov/parents/heatstroke.htm>

# Car Seat Inspections



**St. Joseph's Children's Advocacy Center**  
(813)615-0589

**FREE - Car Seat Inspections**

Hosted at various Hillsborough County locations:

- AAA- Brandon
- AAA- Westshore
- AAA- New Tampa
- AAA- Carrollwood
- South Tampa (Rinaldo Law Group)

*Is your car seat installed correctly? Make an appointment to have your car seat inspected by a certified technician.*

To make an appointment call (813)443-3074 or visit [Baycareevents.org](http://Baycareevents.org) to register online.

**FREE - Car Seat Classes**

at Children's Board Family Resource Centers:

- Brandon (813) 740-4634
- East County (813) 752-8700
- North Tampa (813) 558-1877
- South County (813) 641-5600
- Central Tampa (813) 204-1741
- Town 'N Country (813) 356-1703

*In need of a car seat? Call your local center for more information about registering for a free car seat class.*

 **St. Joseph's Children's Hospital**  
BayCare Health System

FC152894 10/13

Get to YOUR

# Healthiest Weight



we can help!

[www.GetIntoFitnessToday](http://www.GetIntoFitnessToday)



Registered Dietitians, Registered Nurses and Health Educators are all available to help you identify problem areas in your journey to getting healthier. Join others today who are reaching their healthiest weight and improving their nutrition and fitness levels. No Fees!

[www.GetIntoFitnessToday.net](http://www.GetIntoFitnessToday.net)

**LOCAL RESOURCES** (support groups, etc.) for Alzheimer's, Cancer, Parkinson's, and other conditions:

[www.caregiver.com/regionalresources/states/FL/support/hillsborough.htm](http://www.caregiver.com/regionalresources/states/FL/support/hillsborough.htm)



<http://www.floridadisaster.org/index.asp>

## ON-GOING COMMUNITY ACTIVITIES

**ALZHEIMER'S SUPPORT GROUPS:** Alzheimer's Association of Florida support groups for family members, caregivers and others interested in learning more about the disease. Many groups throughout Hillsborough County, including Hispanic groups. Call 1-800-272-3900 for all the locations and more details. <http://www.alz.org/flgulfcoast/>

**LOCAL COMMUNITY MARKETS:** ..... [www.tampabaymarkets.com](http://www.tampabaymarkets.com)

**PARKS AND RECREATION:**

- Hillsborough County Parks, Recreation, and Conservation: [www.hillsboroughcounty.org/](http://www.hillsboroughcounty.org/)
- Plant City Parks and Recreation: ..... <http://plantcitygov.com/>
- Tampa Parks and Recreation: ..... [www.tampagov.net/dept\\_parks\\_and\\_recreation/](http://www.tampagov.net/dept_parks_and_recreation/)
- Temple Terrace Parks and Recreation: ..... [www.templeterrace.com/](http://www.templeterrace.com/)

**ST. JOSEPH'S CHILDREN'S MOBILE CLINIC:** FREE exams & immunizations. Appointments required. [Contact Family Support and Resource centers for appointments.](#)

**TANGO IN THE PARK:** Free tango lessons. Thursdays 6—7 pm through March 2015. No partner, no experience, no special shoes required. (non-rubber soled shoes recommended. NO flip-flops). Curtis Hixon Park, 600 N. Ashley Street, Tampa

**YOGA IN THE PARK:** Curtis Hixon Park, every Sunday of the month 6 pm to 7 pm, weather permitting. Free but donations are accepted. Yoga as you watch the sunset! Bring mat & water. Call (813)-944-2291 for more information.

**SEPTEMBER 2014**

**9/1 HEALTH DEPARTMENT IS CLOSED.**

**9/11 & 9/25 Free presentations on Sexually Transmitted Diseases FL Blue Center, 201 N. Westshore, Tampa 33609, 10:00 am to 11:00 am (across from Westshore Mall just south of I-275)**

9/29 SENIOR GAMES 2014: Enrollment is now live! September 29 through October 18. Hillsborough County Parks, Recreation & Conservations and Family and Aging Services, City of Tampa Parks and Rec, Temple Terrace Leisure Services sponsor these 37 events with activities including table tennis, bowling, swimming, tennis, basketball shooting, and more. Register now to participate! website: [Hillsborough County Parks, Recreation, & Conservation](http://HillsboroughCountyParksRecreation.com).

9/19 Byrd Alzheimer's Center at University of South Florida: Free tours of the facility. Reservations required. Please call 813-396-0675 or email: [sjeffer1@health.usf.edu](mailto:sjeffer1@health.usf.edu). Tours 2:00 pm — 4:00 pm

**OCTOBER 2014**

10/4 Family Abilities Information Rally: 10 am - 3 pm, All Peoples Life Center, 6105 E. Sligh Avenue, Tampa 33617. Have fun, learn something new, make friends. Free community event. <http://www.yesunited.org/>

**10/9 PARTNERS IN OBESITY PREVENTION Coalition meeting: 8:30 am—10:30 am, The Children's Board, 1002 Palm Avenue, Tampa 33605. Community members, organizations, and businesses invited. Coalition website: [PartnersinObesityPrevention.com](http://PartnersinObesityPrevention.com)**

**10/24 National Food Day!**

10/31 Byrd Alzheimer's Center at University of South Florida: Free tours of the facility. Reservations required. Please call 813-396-0675 or email: [sjeffer1@health.usf.edu](mailto:sjeffer1@health.usf.edu). Tours 2:00 pm — 4:00 pm

**DIABETES PREVENTION:** Are you at risk for developing diabetes? Here's a FREE opportunity to prevent Type 2 diabetes. Weekly education & support. Call 813-307-8071 to register. \*\* **Healthcare Provider Referrals accepted.**

**DIABETES SELF-MANAGEMENT EDUCATION:** Learn to better manage your diabetes in small group settings by a healthcare professional. Free 6-week sessions offered through out the county. Call 813-307-8071 to register.

\*\* **Healthcare Provider Referrals accepted.**

**BREASTFEEDING SUPPORT GROUPS:** Share concerns & receive professional breastfeeding guidance from a Certified Lactation Counselor (CLC). No fee to participate. Community locations. 813-307-8074 for more information.

**MAIN OPERATOR**

**and Director's Office ..... 307-8000**

**COMMUNITY HEALTH**

- Community Health Director .... **307-8071**
- Epidemiology ..... 307-8010
- Health Education ..... 307-8071
- Breast/Cervical Cancer... X3502, X7112
- Community Health Advisors ..... X7103
- Diabetes ..... X7104
- Family Reunion Program ..... X7102
- Florida KidCare ..... X3502
- Weight Management ..... X7103
- Health Literacy ..... X7106
- Insulin Program ..... X3502
- Lead Poisoning Prevention ..... X7108
- School Health ..... X8502
- Sterilizations ..... X3502

Office of Health Equity ..... 307-8066

\* **All numbers are area code (813).**

**DISEASE CONTROL**

- HIV/AIDS Specialty Center ..... 307-8064
- Immunizations ..... 307-8077
- Sexually Transmitted Diseases .. 307-8064
- Anonymous Testing ..... 307-8064
- Tuberculosis (TB) ..... 307-8047

**ENVIRONMENTAL HEALTH..... 307-8059**

**HUMAN RESOURCES..... 307-8015  
X3100**

**NUTRITION/WIC ..... 307-8074**

**PHARMACY**

**(HIV/AIDS care clients only)..... 307-8072**

**PUBLIC HEALTH**

**PREPAREDNESS ..... 307-8015  
X4405**

**PUBLIC**

**INFORMATION OFFICER..... 307-8015  
X4404**

**VITAL STATISTICS ..... 307-8002**  
(birth & death records)



**MISSION:**

To protect, promote, and improve the health of all people in Florida through integrated state, county, and community efforts.

Florida Department of  
Health Hillsborough County  
Health Education (71)  
Post Office Box 5135  
Tampa, Florida 33675-5135

[www.hillscountyhealth.org](http://www.hillscountyhealth.org)