HDHHS now requires immunization appointments

Children now need appointments to receive immunizations at Houston Department of Health and Human Services’ (HDHHS) health centers. Only parents of children age 3 and younger still have the option of making appointments or continuing immunizations on a walk-in basis. Parents can schedule immunization appointments by calling HDHHS at 713-794-9999.

Children who obtain preventive health services from one of the seven Houston Department of Health and Human Services health centers now need appointments to receive immunizations. Only parents of children age 3 and younger still have the option of making appointments or continuing immunizations on a walk-in basis.

HDHHS urges parents not to wait until the start of school to vaccinate their children, whether they obtain immunizations at the city health centers or from private medical providers. Parents who keep their children up to date with immunizations are less likely to encounter appointment delays or long lines at the end of summer.

HDHHS offers vaccines on a sliding scale basis to those who have no other source of medical care. The vaccines are free for some clients while others pay $5 or $15.

Preventive health services offered Acres Homes

In February, the Houston Department of Health and Human Services (HDHHS) began offering immunizations, pregnancy testing and health education at the Acres Homes Multi-Service Center, 8700 W. Montgomery.

HDHHS provides immunizations and pregnancy testing on Wednesdays from 5 p.m. to 7 p.m. and on Fridays from 12 p.m. to 4 p.m. in the center’s Women, Infants and Children (WIC) area.

Immunizations are free for some clients while others pay $5 or $15. Pregnancy tests cost $3.

Health education sessions targeting children are on Wednesdays from 3:15 p.m. to 5:15 p.m. Topics covered include personal hygiene, nutrition, exercise, safety and self-esteem.

HDHHS offers vaccines on a sliding scale basis to those who have no other source of medical care. The vaccines are free for some clients while others pay $5 or $15.

Health education for seniors, scheduled on Thursdays from 9 a.m. to 11:30 a.m., highlights information about nutrition, diabetes, blood pressure, cholesterol, cancer prevention, physical activity, safety and self-esteem. Health education sessions are free.

Five-year-old Sergio Martinez got an earful during his first dental clinic appointment at La Nueva Casa De Amigos Health Center.

Brush at least twice a day. Best to floss at bedtime. Sugary snacks between meals cause tooth decay. Children don’t need soft drinks. Drink plenty of tap water. Milk helps form stronger teeth.

Advice in short, simple and encouraging phrases from Dr. Johanna DeYoung, chief of the Bureau of Dental Services at the Houston Department of Health and Human Services, examines Sergio’s teeth and describes their condition so dental assistant Adelaida Avila can include the information on the 5-year-old’s dental chart at La Nueva Casa De Amigos dental clinic.

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Dental clinics stress good oral hygiene, nutrition

continued from Page 1

“We basically coach the children on cleanliness continuously,” DeYoung said. “That is an integral part of our dental visits.”

Oral hygiene instruction and nutritional education are the two most frequent procedures offered at the dental clinics. The goal is to prevent periodontal disease, a widespread problem today among adults, by teaching children how to brush, floss and adopt a diet rich in nutritious foods that will help them develop strong teeth and bone structures.

HDHHS provides comprehensive dental health services to low-income children 1 to 19 years of age who lack access to dental care and one preventive visit to pregnant women enrolled in the department’s maternity services. Children comprise roughly 92 percent of those receiving dental care at four of HDHHS’ seven health centers.

Dental clinics at La Nueva Casa De Amigos Health Center, Lyons Avenue Health Center, Northside Health Center and West End Health Center log about 13,000 client visits each year. A client’s care is deemed incomplete until every pit and fissure is sealed, said DeYoung, who provides dental care two mornings each week. Since there is a high demand for HDHHS dental services and because sealants are time consuming, DeYoung recently arranged for the bureau’s 14 dental assistants to train this spring in the application of sealants, which will eventually free up clinic dentists to perform other clinical procedures. She is also looking into establishing collaborations with community agencies and groups to launch school-based sealant projects.

“When we do a sealant, the cost is a quarter per tooth for the materials,” she said. “It is labor intensive, but if we can do them, children get to keep their teeth. There is a great need for sealants in our community.”

A 2001 needs assessment conducted by the Greater Houston Dental Health Task Force and the University of Texas Dental Branch at Houston found that in the Harris County area 52 percent of pre-kindergarten age children had untreated tooth decay; second graders, 46 percent; seventh graders, 31 percent and tenth graders, 27 percent. Another finding indicated that 22 percent of seventh graders and 26 percent of tenth graders reported difficulty eating due to oral health problems.

Tooth decay can result in needless pain and suffering, problems chewing and swallowing, underweight and poor appearance. It is not unusual for dentists at HDHHS to tend to 2-year-olds who need to have one or two of their front teeth extracted or crowns applied due to severe cavities.

City’s new tuberculosis cases totaled 345 in 2004

New tuberculosis cases in Houston totaled 345 during 2004, preliminary figures from the Houston Department of Health and Human Services (HDHHS) indicate.

Cases totaled 145 among African-Americans and 118, Hispanics; 42, whites, and 40, other ethnicities. Since 1998 new tuberculosis cases reported to HDHHS have ranged under 400. They ranged from 375 in 1999 to 311 in 2000, the lowest number of cases ever in a single year.

Each week HDHHS provides about 1,200 supervised doses of directly observed therapy, or DOT, an intervention in which staff members deliver medication several times a week to a patient’s home, work, school or other agreed location.

Tuberculosis, or TB, is an airborne disease caused by the Mycobacterium tuberculosis bacteria, which can attack any part of the human body but usually accumulates in the lungs. It is transmitted from one person to another when someone with TB disease of the lungs or throat either coughs or sneezes and people nearby inhale the bacteria and become infected.

People with TB infection have no symptoms, don’t feel sick and can’t spread TB to others because the bacteria remain inactive. However, they may develop the disease later in life. With preventive therapy, they are unlikely to develop the disease.

TB disease develops when the infected person’s immune system can’t contain the bacteria’s growth. Although the initial infection is usually in the lungs, the bacteria can move through the blood to different parts of the body such as the kidney, spine and brain.

The disease can almost always be cured with medicine, but the bacteria die slowly. To ensure all are killed, the treatment calls for taking several different drugs for at least six months.

People who don’t take the medicine regularly or who stop taking it when they begin feeling better after a few weeks put themselves and family and friends in a dangerous situation. The bacteria may begin to grow again, causing people with the disease to become infectious once more, making them sick for an even longer time period and vulnerable to multi-drug resistant TB disease. It is more difficult to treat multi-drug resistant TB because patients may need new, different drugs to kill the bacteria if the old drugs no longer work. These new drugs have to be taken for a longer time and usually have more serious side effects.

TB symptoms depend on where in the body the bacteria are growing. TB in the lungs may cause a bad cough that lasts longer than two weeks, pain in the chest and coughing up blood or sputum (phlegm from deep inside the lungs). Other symptoms of TB disease include weakness or fatigue, weight loss, loss of appetite, chills, fever and night sweats.

People with TB disease are most likely to infect others they are in close contact with every day in confined spaces. They include family members, friends and occasionally coworkers.

It is from birth to 2 years of age when children are most susceptible to diseases; therefore, they also run a higher risk that the bacteria may become active and cause TB disease.

People with HIV, the virus that causes AIDS, also are at a higher risk because they have extremely weak immune systems. Others are people who are sick with other diseases that weaken the immune system.

April

National Child Abuse Prevention Month

Administration for Children and Families
nnccanch.acf.hhs.gov/topics/prevention/index.cfm

13 Kick Butts Day
Campaign for Tobacco-Free Kids
www.kickbuttsday.org

National Autism Awareness Month

Autism Society of America
www.autism-society.org
1-800-326-8476

4-10 National Public Health Week
American Public Health Association
www.apha.org

National Infant Immunization Week

Centers for Disease Control and Prevention
www.cdc.gov/nip/events/niw

7 World Health Day
World Health Organization
www.who.int/world-health-day/2005/en

World Health Organization

Annual Summary

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World Health Organization
www.who.int/world-health-day/2005/en

World Health Organization

Calendar
teeth pulled out because of baby bottle tooth decay. Fre-
quently, the dentists also see children between the ages of 5
and 7 who must have their first – and recently erupted –
permanent molar taken out because it is rotten to the gum,
a problem that could have been easily prevented with a
relatively quick filling or, better yet, a sealant. Other
common problems affecting dental clients due to poor oral
hygiene are cavities, rampant tooth decay, abscessed
molars and gingivitis—gum inflammation accompanied by
redness, swelling and frequent bleeding.
Good oral hygiene consists of brushing after meals or
at least twice each day with fluoride toothpaste and
flossing daily, which helps get rid of plaque and food
particles trapped between teeth and under the gum line.
DeYoung stresses flossing right before bedtime.
“‘The idea behind flossing before going to sleep is that
for the next six to eight hours you are not going to be
eating or drinking so you get rid of all the plaque in your
mouth,’” she said. “‘You won’t have bacteria ruining your
teeth throughout the night.’”
Good dental habits also include regular visits to a
dentist for cleanings and oral exams starting by age 1,
eating a well-balanced diet and limiting between-meal
snacks, especially those containing refined carbohydrates
such as sugar, which has no nutritional value – only caloric
value – and strips away the enamel that protects the teeth.
The dental health force also identified problems
with local children’s eating and drinking habits. It found
that the children were drinking much more canned sodas
than milk and that seventh graders, for example, had an
average of five sugar exposures each day. Each can of
soda contains about eight tablespoons of sugar while milk
provides the calcium needed for stronger teeth.
“That is a lot of sugar; people don’t need that much
sugar,” De Young said. “On top of that every time you
have a sugar exposure, for the next 15 minutes there is
enough acid produced in your mouth to decay the teeth.
The more exposures you have, the more likely you are to
have cavities.”
As part of oral hygiene instruction, HDHHS dentists
routinely warn parents about the tooth decay caused by
prolonged exposure to sugar when putting babies and
infants to sleep at night with a baby bottle or placing them
on a stroller for long periods of time and letting them sip on
a baby bottle.
DeYoung said the importance of oral hygiene is best
established early in a child’s life since it’s harder to instill
in adolescent years. That is one of the major reasons why
the bureau provides its maternity clients one free preven-
tive dental health visit, typically a dental cleaning, and of
course, lots of advice. The objective is to get maternity
clients to teach their families the good oral hygiene habits
they’ve learned and take their children to the clinics for
dental care.
The dental visit offered to maternity clients can be an
emergency visit. Fever, pain or swelling are conditions
that the dental bureau qualifies as emergencies for its clients.
The clinics see anywhere from 40 to 50 clients on an
emergency basis each month, tending to them in between
regular appointment slots on the same they show up to a
clinic.
Although the emphasis is on preventive services, the
dental clinics do provide restorative care, mostly fillings,
pulpotomies – the removal of the infected part of a nerve
(pulp) – stainless-steel crowns and extractions of primary
teeth, or baby teeth, and permanent molars.

Most clients who show up at the clinics with an abscessed permanent
molar, a back tooth with a pocket of infection at its base, can’t afford a root
channel, which preserves the molar after removal of its pulp cavity but costs
anywhere from $300 to $1,000 in today’s market. The only option for HDHHS
dentists is to extract the abscessed molar.
DeYoung said that clients who have a permanent molar extracted lose a
sense of balance in their jaws. That’s because the tooth behind the extracted
molar slides forward, the tooth in front of it goes backward, the tooth above it
comes down or if it is an upper tooth, the one below goes up.
“It is very unfortunate because the extraction offsets the bite and it becomes
a lifelong problem,” she said. “It can be corrected with a bridge, but that is an
even more expensive procedure.”
The dental bureau not only lacks the
budget to do root canals, but DeYoung estimates that in the time it takes to
perform one, dentists could seal the teeth of 20 children.
One of those children that might benefit from tooth sealants is Martinez,
the boy who recently had his first dental appointment at La Nueva Casa De
Amigos Health Center. At the end of
Martinez’ appointment, DeYoung
advises his mother Raquel Torres that he
has rampant caries—widespread tooth
decay affecting most of the teeth.
Torres explains that her son is not
flossing regularly at night. She said she
heads off to work early and suspects that
he is not brushing his teeth after break-
fast and before rushing to school. Before
Torres and her son leave DeYoung
shows them the proper way to brush and
floss and tells them they need to return to the clinic in two
weeks to prevent abscesses from forming in the 5-year-
old’s teeth. Undoubtedly, once the boy returns to the
dental chair, he is in store for countless other dental health
pointers. Perhaps one will be another of DeYoung’s
frequent tips, “A healthy mouth is a clean mouth.”
New HDHHS clinic focuses on adult immunizations

The Houston Department of Health and Human Services (HDHHS) recently opened an adult immunization clinic at the Third Ward Multi-Service Center, 3611 Ennis.

Adults, 19 years of age and older, can receive tetanus and diphtheria, hepatitis A, hepatitis B, polio, varicella, measles, mumps and rubella (MMR), meningococcal and pneumococcal vaccines at the clinic. International travel vaccines for typhoid and yellow fever and tuberculosis skin tests are also available.

Adults from any area of Houston are eligible to receive vaccinations at the clinic, open Mondays from 8:30 a.m. to 5:30 p.m. and Tuesdays through Fridays from 7:30 a.m. to 4:30 p.m. No appointments are necessary. Costs for the vaccines range from $37 to $81. A tuberculosis test is $20.

Adults require the combined tetanus and diphtheria immunization every 10 years throughout their lives. Adults born after 1956 need the combined vaccine against measles, mumps and rubella. Adults aged 65 or older, as well as people aged 19 to 64 with diabetes or chronic heart, lung, liver or kidney disorders, need protection against pneumococcal disease.

Hepatitis B vaccine is recommended for adults in certain high-risk groups, such as health care workers, household and sexcontacts of people with chronic hepatitis B virus infection, people with multiple sex partners, those with a recently acquired sexually-transmitted disease, men who have sex with men and users of injection and non-injection illegal drugs.

For more information about the clinic, call 713-527-4040.

Services return to Riverside

The Houston Department of Health and Human Services (HDHHS) has reopened Riverside Health Center, a facility providing preventive health services to residents of the Third Ward area.

The health center, located at 3315 Delano, provides child immunizations, family planning and maternity care. Clients may call 713-831-9600 for more information or 713-794-9999 to schedule an appointment.

HDHHS provided health services out of its nearby Third Ward Multi-Service Center for more than two years while crews repaired Riverside’s foundation and replaced a leaking roof.

Antoinette Briscoe, a licensed vocational nurse, vaccinates Teresa Seck at the new Adult Immunization Clinic, located within the Third Ward Multi-Service Center.

Guide to children’s oral health

Good oral hygiene needs to begin even before a child’s first tooth erupts. Without it, children could develop tooth decay as soon as their teeth erupt. On the other hand, it could mean natural teeth that last 100 years for those who start following the recommendations of their dentists or dental hygienists from an early age.

Poor oral health can lead to bad breath, cavities, gingivitis — gum inflammation accompanied by redness, swelling and frequent bleeding — and periodontal disease, infections resulting in inflammation and destruction of the soft tissues and bone that supports the teeth.

Baby teeth help children learn to speak clearly, chew naturally and hold the place for permanent teeth until they are ready to erupt. Below are questions and answers about oral hygiene habits that will give children a good start to a lifetime of healthy smiles.

When should caring for teeth begin?

“When it comes to infant care, you clean from the get go,” says Dr. Johanna DeYoung, chief of the Bureau of Dental Services at Houston Department of Health and Human Services (HDHHS). “Wipe the gums with a clean, damp cloth and then with a clean, damp cloth and then with a clean, damp cloth.”

What should be used to clean a baby’s teeth?

Use a child-sized, soft-bristled toothbrush and a pea-sized amount of fluoride toothpaste to clean a baby’s teeth. Don’t let children swallow fluoride toothpaste.

At what age do infants need to go for their first check-up?

Schedule a dental appointment within six months of the eruption of a child’s first tooth and no later than the first birthday. The dentist will check for early tooth decay or other problems and show parents how to properly clean their child’s teeth.

How often do children need to visit a dentist?

Check-ups every six months ensure children get regular dental cleanings and fluoride treatments. They help prevent cavities and detect unusual tooth growth or poor oral hygiene. A dentist may recommend more frequent visits based on a child’s oral health.

How soon can children begin brushing their teeth by themselves?

Parents can begin teaching their children proper brushing techniques at about age 2 or 3. However, children will generally need supervision and help until 7 or 8 years of age. Good hygiene consists of brushing — the outer tooth surfaces, the inner tooth surfaces and the chewing sides — after every meal or at least twice a day.

When does rinsing become important to a child’s oral health?

Flossing removes plaque and food particles trapped between the teeth, areas that a toothbrush can’t reach. “Begin daily flossing as soon as it can be introduced,” DeYoung said. Teaching children to floss can begin as early as age 2 or 3. They should be flossing by themselves by the time they are 8 or 9, when they have the dexterity to do it alone. A flossing routine is best if established at bedtime to prevent plaque from damaging the teeth throughout the night.

Children need to be reminded to floss behind the last molars where there are no adjacent teeth.