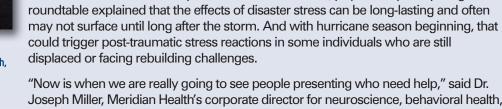




Commissioner O'Dowd with Dr Joseph Miller, Meridian Health and John K. Lloyd, President/CEO, Meridian Health, at a roundtable promoting physician awareness of post-Sandy stress in children and families.



"Now is when we are really going to see people presenting who need help," said Dr. Joseph Miller, Meridian Health's corporate director for neuroscience, behavioral health,

orthopedics, and rehabilitation medicine. He pointed out that many people started showing problems about 18 months after September 11, 2001.

Roundtable participants also noted that people experiencing behavioral health issues are more likely to seek care in a medical rather than mental health setting.

Dr. Cheryl Bettigole, Chief Medical Officer for CompleteCare, a community health center that serves low-income residents in Gloucester, Cumberland, and Cape May Counties, said often the

psychological consequences of the storm can't be separated from physical symptoms.

**Post Sandy Stress in Children** and Families

By Mary E. O'Dowd, MPH, Commissioner, New Jersey Department of Health

a panel discussion at Riverview Medical Center in Red Bank on May 28.

In an effort to raise awareness of the need for health care professionals to screen and refer children and families challenged by post-Sandy stress to appropriate resources, several physicians joined Children and Families Commissioner Allison Blake and me for

As we know from studies of previous natural disasters, physicians participating in the

Dr. Bettigole said her Center has treated a lot of individuals who did not report being depressed, yet tested positive for depression or other behavioral health issues on the universal screening tool for post traumatic stress.

Dr. Margaret Fisher, a pediatric infectious disease specialist with Monmouth Medical Center and president of the State Chapter of the American Academy of Pediatrics (AAP), said stress can be tolerable but sometimes becomes toxic in children as it can affect brain development and lead to developmental problems.

There is also evidence that child abuse may increase following a natural disaster. In the six months after Hurricane Floyd hit North Carolina, there was a five-fold increase in traumatic brain injuries in children under two years old in counties severely affected by the hurricane. Counties that were less affected or not affected at all didn't experience an increase, according to the World Health Organization.

Dr. Fisher, who serves on a national panel on Disaster Preparedness and Response for the American Academy of Pediatrics, commended the state for making the health consequences for children a priority from the first days after the storm. "We found out immediately that children were not going to be forgotten. I think that makes New Jersey a unique place."

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Commissioner O'Dowd addresses a physicians roundtable. Seated from the left are Meridian Health President/CEO John K. Lloyd; Commissioner Allison Blake; Dr. Ramon Solhkhah, Meridian Health; and Renee Burawski, director of Sandy Recovery, Division of Mental Health & Addiction Services for DHS.

### Inside this Edition

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New Jersey Prescription Monitoring Program

### Anyone Can Become Addicted to Drugs



National Institute on Drug Abuse Video: Anyone Can Become Addicted to Drugs



National Institute on Drug Abuse Video: Why Are Drugs So Hard to Quit

# **Doctors Can Fight Drug Abuse with Prescription Checks**

By Steve C. Lee, Acting Director of the New Jersey Division of Consumer Affairs

ast year, a Mercer County physician logged onto the New Jersey Prescription Monitoring Program (NJPMP) database to search prescriptions written in his name. The results shocked him. The doctor discovered his identity had been stolen in a massive prescription fraud scheme.

One or more criminals had illegally obtained his prescription pad and were using it to forge prescriptions for oxycodone, a widely abused narcotic painkiller. Within a month, 12 fraudulent patient names had been used to obtain 1,300 pills, sellable on the streets for \$25,000. If this physician hadn't searched NJPMP records, this illegal opiate distribution scheme might never have been detected.

During National Prevention Week, Acting Attorney General John J. Hoffman and I call upon New Jersey's health care community to make regular use of the NJPMP, as an everyday part of their practice. Prescribers who do so play a tremendous role in New Jersey's fight against the nationwide opiate abuse epidemic. As has been well-documented, abuse of prescription painkillers like oxycodone leads to addiction and death, and has become a gateway drug for heroin.

Maintained by the state Division of Consumer Affairs, the NJPMP collects detailed information on every prescription filled in New Jersey for controlled drugs or human growth hormone — more than 32 million prescriptions to date. Each record includes names of the patient, doctor and pharmacy; purchase date; type, dosage, and amount of medication; and the method of payment.

The NJPMP is available to all licensed health care practitioners authorized to prescribe or dispense medications. Physicians can search individual patients' prescribing patterns and learn, for example, whether a patient has engaged in "doctor shopping" — deceptively visiting multiple physicians, to obtain more narcotics than any one doctor would prescribe — or other patterns consistent with addiction or abuse.

Today, slightly more than 20 percent of New Jersey's eligible prescribers and pharmacists have registered to use the NJPMP. Given that the program is relatively new, that's an impressive adoption rate. It puts New Jersey on par with other states that make prescription-monitoring programs available to doctors for optional use.

But with the urgency of our drug-abuse crisis, New Jersey's health care community can and must do better. The NJPMP will not fulfill its potential to fight drug diversion until a significant majority of doctors register and consult it regularly when prescribing oxycodone and other controlled medications.

The Division of Consumer Affairs is doing everything it can to increase the rate at which prescribers and pharmacists bring the NJPMP into their daily practice. We are working to make it easier to enroll by permitting statelicensed practitioners to automatically register every year when they renew their authority to prescribe or dispense controlled drugs.

An upcoming step will be to expand the data available to doctors. Prescribers who use the NJPMP today can only find prescriptions filled in New Jersey;

continued on page 3









Click on the link above for Hurricane Health and Safety Tips.

### **Christie Administration Encourages** Readiness for Hurricane Season

Initial Administration officials are reminding New Jersey residents that the start of the Atlantic Hurricane Season begins on June 1 and runs through November 30. The awareness reminder coincides with the National Hurricane Center's announcement of National Hurricane Preparedness Week, which began on May 25. Key readiness actions are maintaining awareness of weather events, preparing a family disaster plan and disaster supplies kit, and urging others around you to do the same.

New Jersey State Police Superintendent and State Director of Emergency Management Colonel Rick Fuentes stressed the importance of connecting with information sources, and with other community members. "New Jersey's hurricane experiences inform the advice we give today - awareness and preparedness saves lives. We urge everyone to tune in, log-on, opt-in, 'like' or 'follow' state, county, local and federal agencies for credible disaster-related information such as alerts and warnings, situational awareness updates, and where to find help. Personal connections matter, too. After you've finished your household preparedness activities, lend a hand to someone who may need assistance, or join the 22,000 New Jerseyans who've completed Community Emergency Response Team (CERT) training."

This year, NJ Office of Emergency Management officials will be working closely with the National Hurricane Center and the National Weather Service to improve information sharing regarding the effects of storm surge which can affect coastal and inland areas. According to the National Hurricane Center, storm surge is one of the most deadly impacts of hurricanes.

New Jersey Health Commissioner Mary E. O'Dowd stressed the importance of family preparedness actions. "It's important to prepare for all emergencies before they occur, whether they are hurricanes or other events," O'Dowd said. "Now is the time to review emergency plans and update emergency kits." Emergency kits should contain contact information for doctors, spare eye glasses, extra batteries for hearing aids and an up-to-date list of medications and prescriptions. If possible, make sure you have enough medications that can last you up to two weeks. Preparing now can save lives later."

Read more: http://www.ready.nj.gov/media/pr052714.html

#### Prescription Checks, continued from page 2

they will not learn whether a patient engaged suspicious prescriptionbased activity across state lines. Through future partnerships with neighboring states, we'll soon be able to obtain data on prescriptions filled outside New Jersey.

The search of a patient's prescription-drug history takes less than a minute, even on a laptop during a patient visit. But none of our efforts will have a substantial impact until the health care community fully commits to the program.

As the Mercer County example shows, this database can help doctors protect the integrity of their medical licenses. More importantly, it is a powerful, lifesaving tool in the fight against prescription drug abuse.



Does Not Discriminate

### Ny Health Matters New Jersey Department of Health

### Chronic Disease Prevention and Control Services



Melita Jordan, Senior Service Director, Chronic Disease Prevention and Control, welcomed participants to the 10th Annual Women's Caregiver Retreat.



Csilla Bischoff of Shining Health Holistic Nutrition Counseling provides a "Simple Cooking with Heart" demonstration during a morning breakout session.

### **10th Annual Women's Caregiver Retreat**

**Event Celebrates National Women's Health Week** 

Often women are the caregivers for family members or friends who are ill or disabled and need assistance. Providing this care is a huge responsibility, and too frequently caregivers put their own health last. Sometimes they need to be reminded that it's okay to take care of themselves, too. That was the message of the 10th Annual Women's Caregiver Retreat held on May 16th at the Robert Wood Johnson Fitness & Wellness Center in Hamilton.

More than 130 women attended the daylong event, an upbeat observance of National Women's Health Week (May 11-17, 2014). Hosted by the New Jersey Department of Health in concert with the Family Support Center of New Jersey, the American Heart Association and the American Stroke Association, the retreat featured speakers who encouraged participants to keep up with health news, follow a healthy lifestyle and "make time for you."

Melita Jordan, CNM, MSN, APRN C, CPM, Senior Service Director, Chronic Disease Prevention and Control, State Department of Health, welcomed participants and emphasized the shared experiences of women caring for loved ones, particularly older family members.

Nationally, caregivers are predominately unpaid and female (66%), according to a 2009 study conducted by the National Alliance for Caregiving in collaboration with AARP – the American Association of Retired Persons. Of the estimated 65.7 million people in the United States who provide care for loved ones, AARP reports that over 1.7 million caregivers live in New Jersey.

Dr. Mehmet Oz, renowned cardiologist and host of the *Dr. Oz Show*, launched the morning session with a personal video message about the importance of taking care of one's self.

Keynote speaker Dr. Gloria Bachmann, an award-winning physician specializing in women's issues, especially those of aging women, and Professor of Obstetrics, Gynecology and Medicine at Rutgers-Robert Wood Johnson Medical School, urged women to seek routine medical care and preventive health services to help them stay healthy. She pointed out that caregivers are more likely to develop chronic illnesses, and more likely to skip their own doctor and dental appointments as they devote time to caring for others.

#### National Women's Health Week

"It's your time" was the theme of National Women's Health Week 2014. The weeklong national observance, which began on Mother's Day, empowers women to put themselves first as this not only benefits them, but also strengthens their families and communities as well.

As the baby boom generation ages the numbers of people needing care will increase. The number of younger people available to provide care is likely to decrease. This suggests that in the future, caregivers will be older, on average, than today's caregivers and may have greater infirmity of their own.

It is important to recognize that caregivers are a critical extension of our health care system. Without their efforts, the responsibility of this care would shift to public programs such as Medicaid, and the quality of life and the health status of many would decline. Supporting caregivers through programs and services that make a real difference in their well-being is critically important to the quality of life in America.

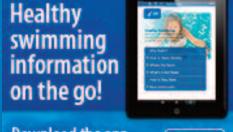


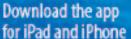




#### Pool Chemical Safety - Chlorine Institute

# Recreational Water Illness and Injury Prevention Week 2014







### **Keep the Pool Safe This Summer**

As the summer season approaches, residential pool owners and public pool operators should be sure to take safety precautions when using chemicals to treat the water to protect both themselves and swimmers from potential health hazards.

Nationally, nearly 5,000 people visited an emergency room for injuries associated with pool chemicals, according to the U.S. Centers for Disease Control and Prevention.

The Department is advising residential pool owners and public pool operators to take the following steps to prevent injuries due to pool chemicals including:

- Read and follow directions on product labels
- · Check pool chemical levels before making an adjustment
- Use a new test kit each season and check the kit's expiration date
- Wear appropriate safety equipment such as goggles and masks, as directed
- · Keep young children away when handling chemicals
- · NEVER mix different pool chemicals with each other
- · No swimmers should be in the water while adding chemicals
- The pool area should not have a strong chlorine smell

More information is available at: <a href="http://goo.gl/18cBPa">http://goo.gl/18cBPa</a>

In New Jersey, the Department is reminding pool operators that employees also face health concerns, especially when manually adding chlorine-based chemicals to the water. Exposure to these chemicals may be associated with work-related asthma, the aggravation of existing asthma conditions or the onset of asthma symptoms, including: wheezing, coughing, shortness of breath and difficulty breathing.

Regulations require pool operators to add chemicals through an automated system; however, manual application of chlorine-based chemicals is sometimes unavoidable, increasing the risk of unsafe exposure levels to potential irritants. Studies that have examined exposure to chlorine have found that lifeguards and other pool employees have an increased risk of asthma.

In New Jersey, 14 cases of work-related asthma from chlorine-based products were identified from 1990-2011. The Department recently distributed more than 780 brochures to owners and operators of indoor and outdoor swimming pools, as well as local health departments alerting them to the risks of exposure. The flyer "Don't Get Sick When Applying Pool Chemicals," is available at: <a href="http://goo.gl/FJWDTu">http://goo.gl/FJWDTu</a>

As part of that same distribution, the Department provided a questionnaire to pool owners on the application of chlorine-based products. Results from the survey indicate that 78% of pool owners manually adjust pH and chlorine levels, 42% of employees directly applied chemicals into the pool, 31% of employees were not required to wear personal protective equipment and 21% of employees were not provided training on the manual application of chemicals.

The Department recommends that pool operators consider providing additional education to employees on the dangers of chemicals and pool maintenance.



#### **May 2014**



Video: Commissioner O'Dowd takes part in an elearning program educating pregnant women on pre-natal care at the Virtua Center for Women in Lumberton.



Commissioner O'Dowd speaks with attendees of the New Jersey Business and Industry Association's "Meet the Decision Makers — Healthcare" breakfast, in Monroe on May 21.



Commissioner O'Dowd with Nancy Kelly-Goodstein, Acting Director of Emergency Medical Services, at the EMS Week Recognition Breakfast at the Department of Health headquarters in Trenton on May 19.

# Community Events

### **May 2014**

- May 6 Commissioner O'Dowd delivered testimony before the Senate Budget Committee at the State House in Trenton.
- May 2 Dr. Onesia Bishop, Division Laboratory Director, hosted the Health and Agriculture Laboratory Science Career Day, in West Trenton.
- May 12 Commissioner O'Dowd and Cathy Bennett, Director of Policy and Strategic Planning, toured the Capital Health Institute for Neuroscience in Hopewell.
- May 16 Melita Jordan, CNM, MSN, APRN C, CPM, Director of the Department's Chronic Disease Prevention and Control Unit, gave remarks at the 10th Annual Caregiver Retreat for Women at the Robert Wood Johnson Health and Fitness Center in Hamilton.
- May 19 Commissioner O'Dowd toured the Virtua Center for Women, in Lumberton, where she took part in an e-learning program that educates pregnant women on prenatal care.
- May 28 Commissioner O'Dowd hosted a roundtable discussion at Riverview Medical Center in Red Bank to promote awareness of post Sandy stress in children and families among health providers.

### **Department of Health**

### **Staff Notes** /



### Congratulations to:

Abate Mammo, PhD, on being named as the Acting Director for the Center for Health Statistics. Dr. Mammo has recently served as a Program Manager in the Office of Health Care Quality Assessment where he supervised several projects in that unit.

**William Manley,** Environmental Scientist, attended the National Conference for Food Protection Biennial meeting, that addressed revisions to the Food and Drug Administration's Retail Food Code. Mr. Manley oversees the State's Retail Food Protection Project and served as New Jersey's voting delegate at the conference.

**Loreta Sepulveda,** Director, Human Resources and **Rose Ward,** Manager of Human Resources attended the 2014 Eastern Region Training & Development Forum of the International Public Management Association for Human Resources, that examined best practices and emerging trends in public sector human resource development.

**Diana Garzio,** Public Health Consultant — Nursing, attended the Association of Public Health Nurses (APHN) Annual Conference that provides programs for best practices and strategies to serve and protect the public. Diana is the state's appointed representative to APHN.







Click this graphic for the latest MERS information.

### **Health Professionals Attend MERS Workshop**

n May 12, more than 80 health care professionals from across New Jersey attended a workshop hosted by the New Jersey Office of Homeland Security and Preparedness on the Middle East Respiratory Syndrome (MERS) coronavirus.

At the workshop representatives from state and local health offices, hospitals, private physician offices and long-term care facilities discussed how best to share information relating to a hypothetical MERS case imported to New Jersey. Participants discussed processes for reporting of suspected cases, communicating information related to disease investigation, and creating an analysis report that will allow the Department to examine and improve upon current response practices.

Globally, as of May 28, 636 laboratory-confirmed cases of infection with MERS-CoV have officially been reported to WHO, including 193 deaths. There have been two imported cases of MERS reported in the United States one from a patient in Indiana and one from a patient in Florida.

More on MERS is available at: <a href="http://nj.gov/health/cd/mers/index.shtml">http://nj.gov/health/cd/mers/index.shtml</a>

#### Commissioner's Message, continued from page 1

All of the issues raised at the roundtable validate the approaches that the departments of Health, Children and Families, and Human Services have taken in their recovery initiatives and reinforce the need for continued efforts.

We recently announced \$4 million in federal Social Services Block Grant (SSBG) funds to provide grants to community health centers and hospitals to provide behavioral health screenings for depression, post-traumatic stress, alcohol and substance abuse, domestic violence, and child abuse.

The first 10 grantees, who are receiving \$2.2 million, are expected to screen 48,000 people over the next year. The largest of those grants, \$600,000, went to Meridian Health, which was particularly hard hit by the storm. Meridian expects to screen 15,000 residents for potential problems over the next year.

The other grantees are: Visiting Nurses Association of Central New Jersey; AtlantiCare Regional Medical Center; Ocean Health Initiative Inc.; Jewish Renaissance Medical Center in Middlesex and Essex counties; Southern Jersey Family Medical Center; Newark Community Health Center; CarePoint Health Foundation; North Hudson Community Action Center; and CompleteCare Health Center in Cape May County.

The AAP received \$1.2 million from the Department of Children and Families (DCF) for an initiative to train pediatricians on how to identify children who continue to suffer from storm-related stress.

Commissioner Allison Blake said DCF has spent \$4.3 million to expand domestic violence shelter services, counseling and prevention activities; dedicated funds for pediatric nurses for child protective services, and worked to make services for children's health more accessible.



This training video for pediatricians was developed by the NJ AAP Pediatric Partnership Initiative with funding from a Social Services Block Grant for Disaster Recovery. The funding was provided by the U.S. Administration for Children and Families to DCF and the New Jersey Chapter, American Academy of Pediatrics.

Sandy Recovery Resources:

Office of the Commissioner

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# **CDC Launches Start Talking. Stop HIV Campaign**

Start Talking. Stop HIV. – a new phase of CDC's Act Against AIDS initiative, seeks to reduce new HIV infections among gay, bisexual and other men by encouraging open discussion about a range of HIV prevention strategies and related sexual health issues between sex partners. Effective partner communication about HIV can reduce HIV transmission by supporting HIV testing, HIV status disclosure, condom use, and the use of medicines to prevent and treat HIV.



Though they only represent 2% of the overall population, gay and bisexual men-including those who inject drugs-account for over half of the 1.1 million people living with HIV in the United States (57% or an estimated 657,800 people), and two-thirds of all new HIV infections each year. A 2011 study in 20 U.S. cities with high AIDS prevalence found that 18% of gay or bisexual men had HIV. That's about 1 in 6 men. Of those men, 33% did not know they had HIV.

Communication on this topic is important. *Start talking. Stop HIV.* 

# **1in2**



Nearly half of adults with disabilities get no aerobic physical activity.

**50%** 

And they are 50 percent more likely to report at least one chronic disease than active adults with disabilties.

## **Inactivity Related to Chronic Disease in Adults with Disabilities**

Working age adults with disabilities who do not get any aerobic physical activity are 50 percent more likely than their active peers to have a chronic disease such as cancer, diabetes, stroke, or heart disease, according to a Vital Signs report recently released by the Centers for Disease Control and Prevention (CDC).

Nearly half (47 percent) of adults with disabilities who are able to do aerobic physical activity do not get any and an additional 22 percent are not active enough. Yet only about 44 percent of adults with disabilities who saw a doctor in the past year got a recommendation for physical activity.

"Physical activity is the closest thing we have to a wonder drug," said CDC Director Tom Frieden, M.D., M.P.H. "Unfortunately, many adults with disabilities don't get regular physical activity. That can change if doctors and other health care providers take a more active role helping their patients with disabilities develop a physical fitness plan that's right for them."

Most adults with disabilities are able to participate in some aerobic physical activity which has benefits for everyone by reducing the risk of serious chronic diseases. Some of the benefits from regular aerobic physical activity include increased heart and lung function; better performance in daily living activities; greater independence; decreased chances of developing chronic diseases; and improved mental health.

#### Read More:

http://www.cdc.gov/media/releases/2014/p0506-disability-activity.html



'Cancer Matters' Brought To You By:

### RUTGERS

Cancer Institute of New Jersey



Janet Lasin, MLS, BS, is the medical librarian at the Resource and Learning Center at Rutgers Cancer Institute of New Jersey.





### **Exploring Health Information** on the Internet

By Janet Lasin, MLS, BS

magine that you just had a doctor's visit and learned that you have a medical condition with which you are unfamiliar. Your doctor explained your diagnosis and most likely gave you a handout, but you want to learn more and turn to the Internet. Well, you are not alone. According to a 2013 national survey by the Pew Research Center's Internet & American Life Project, 59 percent of adults look for health information on the Internet.

You should always strive to find trustworthy information on the Internet, but this is especially important when looking for health information, as the wrong information could end up compromising your care. How do you know if a website is a credible source for health information? When searching the Internet, here are a few guidelines that you can use to help with your evaluation:

- In general, good sources for health information include sites from the government (.gov), educational institutes (.edu), and organizations (.org).
- Look for an "about us" link on the site that provides information on who runs the site. This may also include a mission statement.
- Check who reviews the information that you are reading. Is there
  a Medical Advisory Board? If you are looking at cancer
  information, there should be medical professionals on the board
  that specialize in oncology.
- Is there a date listed as to when the page was last updated?

  Health information changes rapidly and you want to make sure
  the information you are reading is current and up-to-date.
- Do you see typographical errors on the page? Are there dead links? Does the page look sloppy? If so, you may want to try another website.
- Is the information that is being claimed too good to be true? If there is any doubt with what you are reading, try to verify the information on another website.
- Be cautious since anyone can put information on the Internet.

If you are being treated at a facility that has a patient library, there is a good chance a medical librarian is on staff. Medical librarians use evidence-based research and practice when evaluating health information, either in print or online, and are the perfect professionals to help you find reliable, relevant, and current information. If a medical librarian is not available to you, a reference librarian at your public library will be able to assist you with your search.

