



National HIV Testing Day, June 27, 2005

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National HIV Testing Day is observed each year on June 27th. In Kentucky the campaign runs for the entire month of June. The purpose of this campaign is to encourage as many Kentuckians as possible to be tested and to know their HIV status. The HIV/AIDS Branch of the Kentucky Department for Public Health encourages all agencies providing HIV antibody testing to discuss the topic of HIV antibody testing with all individuals and provide testing when appropriate.

All public health agencies and community based organizations are encouraged to increase awareness of HIV antibody testing and improve access to testing by developing local media campaigns for National HIV Testing Day/Month. Some sites work with local newspapers and radio or television stations to make people aware of the importance of HIV testing. Some agencies sponsor off-site testing events in order to increase access to HIV testing.

In the past private healthcare providers have not been targeted to participate in Kentucky's campaign. **Following the Centers for Disease Control and Prevention's initiative to incorporate HIV testing into primary care, we are encouraging hospitals, clinics, and private physicians to join this year's campaign.** We are encouraging doctors, nurses or intake personnel to address the subject of sexual health and substance use with their patients to determine if an HIV antibody test is appropriate and provide the service, if possible. When testing is not feasible in private healthcare settings due to cost or issues with insurance providers, we are asking private healthcare providers to refer patients to local health departments or other public health partners where testing can be pro-

vided free or at minimal cost.

HIV antibody testing is extremely important for anyone who has been sexually active or has used behavior-altering substances. In local health departments and participating community based organizations, persons testing negative for HIV will receive counseling to help them maintain their negative status. As healthcare providers, we can assist individuals with the development of a behavior change plan that will reduce their chances of becoming infected with HIV and other sexually transmitted diseases. Often we discover underlying issues such as substance use that place our patients/clients at risk for infection, thus affording the opportunity to assist them in receiving assistance to change these behaviors. Those individuals testing positive will receive the benefits of early detection of HIV and will have more options concerning their HIV status. Individuals who find out early often do not need to start taking medication right away, and can benefit from other changes such as a healthier diet and exercise, and changing unhealthy choices such as substance use and sexual practices. For those requiring immediate medical treatment, it is always best to find out as early as possible.

For more information about the National HIV Testing Day/Month Campaign, please contact the HIV/AIDS branch of the Kentucky Department for Public Health at 502-564-6539 or the National Association of People with AIDS (NAPWA) at: <http://www.napwa.org/hivtestinfo/>.

Get Moving Kentucky! Get Moving CHFS! Program Promotes Staff Wellness Through Walking

Barbara Fox, MS, Public Information Officer, Public Health Preparedness Branch, Dept for Public Health

April 11, 2005 was the official kick off day for the Get Moving Kentucky! Get Moving CHFS! workplace wellness program. First Lady Glenna Fletcher and Dr. James W. Holsinger, Jr., Secretary for the Kentucky Cabinet for Health and Family Services (CHFS), accompanied by wife Barbara, donned their walking shoes and led approximately 700 employees on a one-mile route outside the Cabinet for Human Resources Complex.

Get Moving Kentucky! Get Moving CHFS! is a pilot project for state government employees as part of Governor Ernie Fletcher's Get Healthy Kentucky! Initiative and the University of Kentucky's cooperative extension program. Employees of CHFS signed up as four-member teams and will be using pedometers to record their physical activity mileage (PAM) over an 8-week period. One PAM equals one mile covered by biking, walking or jogging (approximately 2,000 steps), or 15 minutes of sustained motion, such as doing aerobics, swimming or mowing the lawn. While all physical activity counts towards PAMs, aerobic activity that increases respiration and heart rate offers the most benefits and is strongly encouraged.

All program participants have a common goal: To reach 420 miles, which is the approximate distance it would take to cross Kentucky. The Cabinet's wellness and health promotion program goal is to inform and encourage CHFS staff to adopt healthy lifestyles that create a balance between mind, body and spirit, and prevent disease and illness.

"CHFS is leading by example. There is no more appropriate place for state government worksite wellness efforts to begin than at the Cabinet for Health and Family Services, whose mission is serving the health and quality of life needs for more than 4 million Kentuckians," said Dr. Holsinger. "It's one thing for us to tell everyone what they need to do, but quite another to actually walk the talk about physical activity, good nutrition, stress management, and tobacco cessation. CHFS employees are

literally taking a walk to reduce the cost of health care by improving their own health."

"Regular exercise is essential to a healthy lifestyle," First Lady Glenna Fletcher said. "It is a habit that should be developed in childhood and carried on throughout life. Just 30 minutes of exercise makes you a better person and allows you to have a more productive life. I am very excited to be here today and am delighted to see that this program will encourage regular exercise among state government employees."

Team motivation will play an important role in how well teams can contribute to the program over its 8-week duration. Teams have adopted names and even individual team member names such as Team Blackhawk of the CHFS Office of Communications. Team Blackhawk members have black t-shirts with buttons displaying their individual pilot code names along with a Blackhawk helicopter illustration. Lisa Wallace, a member of Team Blackhawk, has adopted the pilot code name "Ripcord". She has enlisted her dog, Hoss, who wears a black bandana around his neck, as the team's mascot. Lisa sends her team members inspirational quotes each morning to keep them motivated, and even developed a team cadence call. "I am taking this program very seriously as a way to keep fit," said Lisa.

Get Moving CHFS! is funded by Kentucky's Nutrition and Physical Activity Grant, provided through the National Centers for Disease Control and Prevention. The program's first activity is sponsored by the Physical Activity subcommittee with support from the entire Wellness Committee. For more information about Get Moving CHFS! visit <http://www.chfs.ky.gov/wh.htm> or about Get Moving Kentucky!, visit <http://www.ca.uky.edu/fcs/factshts/heel-lr.910.pdf>.

(Please refer to the back page of this edition to view a photo of the one-mile kick-off walk.)

Prevalence of Overweight Among Children and Adolescents: United States, 1999-2002

Reprinted from National Center for Health Statistics/Centers for Disease Control and Prevention (2004)

An estimated 16% of children and adolescents aged 6-19 years are overweight and another 15% were considered at risk of becoming overweight, according to the 1999-2002 National Health and Nutrition Examination Survey (NHANES). This represents a 45% increase from the overweight estimates of 11% obtained from NHANES III from 1988-94. In particular, the obesity rate among children aged 6-19 years has more than tripled since 1975, from approximately 5% to nearly 16% (Figure 1).

Body mass index (BMI), expressed as weight/height² (BMI=kg/m²) is commonly used to classify overweight and obesity among adults, and is also recommended to identify children who are overweight or at risk of becoming overweight. Cutoff criteria on the 2000 Centers for Disease Control and Prevention (CDC) BMI for age growth charts in the U.S. are based on current recommendations of expert committees. Children with BMI values at or above the 95th percentile of the sex-specific BMI growth charts are categorized as overweight.

To assess changes in overweight children, estimates for participants in the 1999-2002 NHANES were compared to estimates for those who participated in earlier surveys. The NHANES 1999-2002 and earlier surveys used a stratified, multistage probability sample of the civilian noninstitutionalized U.S. population. A household interview and a physical examination were conducted for each survey participant. During the physical examination, height and weight were measured by trained health technicians using standardized measuring procedures and equipment as part of a more comprehensive set of body measurements. Observations for persons missing a valid height and weight measurement were not included in the data analysis.

When the overweight definition (at or above the 95th percentile of the age- and sex-specific BMI) is applied to data from earlier national health examination surveys, it is apparent that overweight children and adolescents were relatively stable from the

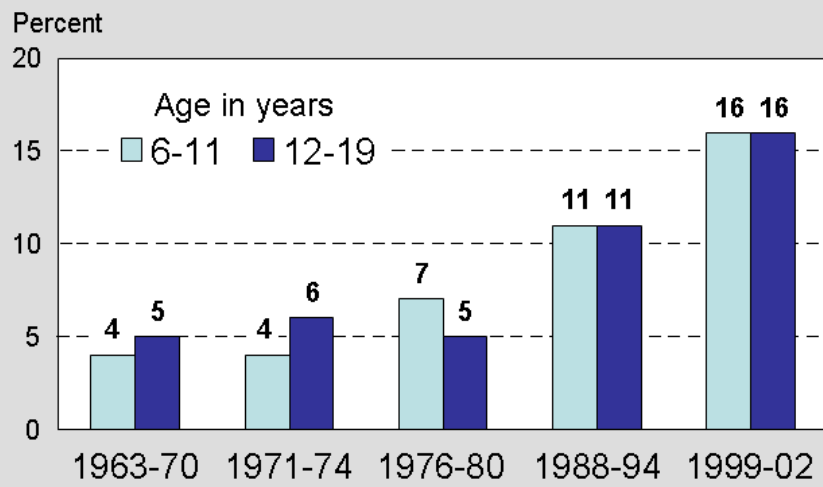
1960s to 1980 (Figure 1). However, in NHANES III (1988-94) the prevalence of overweight children increased to 11% for both children (aged 6-11) and adolescents (aged 12-19). The NHANES 1999-2002 overweight estimates suggest that since 1994, the overweight youth category has not leveled off or decreased, and is increasing to even higher levels. This is in spite of the national health objective for 2010 to reduce the prevalence of overweight from the NHANES III baseline of 11%. The data for adolescents are of notable concern because overweight adolescents are at increased risk for becoming overweight adults. The 1999-2002 findings for children and adolescents suggest the likelihood of another generation of overweight adults who may be at risk for subsequent overweight- and obesity-related health conditions.

* * * * *

The Commonwealth of Kentucky is taking steps toward fighting childhood obesity with the March 22, 2005 signing of Senate Bill (SB) 172 by Governor Ernie Fletcher. SB 172 takes steps to improve the health of adolescents by providing oversight and management of school food service programs and the development of a wellness policy at elementary schools that includes increased physical activity. The bill also establishes guidelines for vending machines and soft drink sales. The final version of the bill was actively supported by the Get Healthy Kentucky! Board, appointed by Governor Fletcher last year to focus on solutions to Kentucky's health problems. The percentage of Kentucky's children and young people (ages 6 to 19) who are overweight has tripled in the past 30 years.

More information on the study is available on the CDC/NCHS Web site at:
<http://www.cdc.gov/nchs/products/pubs/pubd/hestats/overwght99.htm>.

Figure 1. Prevalence of overweight among children and adolescents ages 6-19 years



NOTE: Excludes pregnant women starting with 1971-74. Pregnancy status not available for 1963-65 and 1966-70. Data for 1963-65 are for children 6-11 years of age; data for 1966-70 are for adolescents 12-17 years of age, not 12-19 years.
SOURCE: CDC/NCHS, NHES and NHANES

Dr. Stephanie Mayfield Named New Director of State Public Health Laboratory

Reprinted from April 4, 2005 CHFS News Release

In April of 2005, The Cabinet for Health and Family Services announced the appointment of Dr. Stephanie Kay Mayfield as director of the state public health laboratory in Frankfort.

“I am very pleased to be able to announce that Dr. Mayfield will serve as our state lab director,” said Dr. James W. Holsinger, Jr., Secretary of the Cabinet for Health and Family Services. “She brings a wealth of expertise and knowledge to this position that will be of great service to the Commonwealth.”

Mayfield comes to state government from the Veterans Administration Medical Center in Louisville, where she served as staff pathologist and blood bank director. She also served as associate professor in the Department of Pathology at the University of Louisville School of Medicine. Dr. Mayfield also has worked as a teaching fellow in the Department of Biochemistry at Tennessee State University, as a chemist for CIBA GEIGY Corporation in Greensboro, North Carolina, and as associate chief of staff for education and special programs at the Louisville Veterans Administration Medical Center.

Dr. Mayfield received her medical education at Meharry Medical College in Nashville, Tennessee, the University of Medicine and Dentistry at New Jersey Medical School, Newark Hospital, and at the Robert Wood Johnson Hospital. She was the recipient of the William B. Settle Award for Outstanding Proficiency in Pediatrics in 1989. She completed her undergraduate degree in chemistry from Johnson C. Smith University in Charlotte, North Carolina.

“Thank you for the opportunity to serve as the Director of the Kentucky State Health Laboratory,” Mayfield said. “I hope to further enhance the laboratory’s internal and external customer relations through enhanced technology, quality improvement programs and education. The state laboratory’s overall objective is to assist our public health department in building healthy communities.”

Celebrate National Men's Health Week June 13-19, 2005!

The 2005 National Men's Health Week (NMHW) will be observed the week of June 13-19 across the country with health screenings, health fairs, media appearances, and other health education and outreach activities. This year's theme focuses on the increasing problem of male obesity and was selected because obesity is now recognized to be a major public health concern. Being overweight or obese poses serious dangers to men's health, increasing the risk of developing heart disease and diabetes. According to a 2004 report by the U.S. Department of Health and Human Services, an estimated 129.6 million Americans, or 64%, are overweight or obese. Little work has been done to address the problem of male obesity, and men often lack the knowledge and confidence to seek advice on this subject.

Since its establishment on May 31, 1994 by President Clinton, the response to NMHW has been overwhelming with numerous awareness activities scheduled in the U.S. and worldwide. It is held each year in mid-June to coincide with the week that ends with Father's Day. Observance of NMHW heightens the awareness of preventable health problems and encourages early detection and treatment of disease among men and boys. This week allows health care providers, public policy makers, and individuals an opportunity to encourage males to seek early treatment and regular medical advice for disease and injury.

Men's health is more than a gender concern. "Recognizing and preventing men's health problems is not just a man's issue. Because of its impact on wives, mothers, daughters, and sisters, men's health is truly a family issue," said Congressman Bill Richardson (Congressional Record, H3905-H3906, May 2, 1994).

For more information, please contact Men's Health Week at (202) 543-6461 x 101 or at <http://www.menshealthweek.org>.



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RETURN SERVICE REQUESTED

Gather your thoughts, comments and ideas for next month's edition of Kentucky Epidemiologic Notes & Reports, which will feature a Reader's Survey. Results of the survey will be used to enhance the quality of the publication.



First Lady Glenna Fletcher (left, behind banner) and Dr. James W. Holsinger, Jr., right, lead employees on the kick-off one-mile walk for Get Moving Kentucky! Get Moving CHFS! outside the CHR Complex in Frankfort on April 11, 2005 (Photo by Robert Martin, CHFS Communications).