

News 4 A Healthy Shelby County



Talking Turkey...and Thanksgiving Leftovers

Thanksgiving is a fun time for friends and family to gather. It normally includes a huge dinner with lots of delicious food. Most of us like to linger for most of the day and maybe play games or watch football.

Just remember not to let your leftovers linger around too long! Here are some key recommendations to keep your Thanksgiving leftovers from making everyone sick:

1. Leftovers should be refrigerated within 2 hours to prevent bacterial growth.
2. Leftovers should be stored in shallow pans or containers to decrease the time it takes for them to cool. This keeps them out of the temperature danger zone: 40°F to 140°F.
3. Cooking stuffing in the turkey is not recommended. However, if

you do, stuffing should be removed from turkey before storing and stored separately.

4. Leftovers that have been in the fridge for more than 3 to 4 days should be discarded. For longer storage, put them in the freezer instead of the refrigerator.
5. If leftovers are traveling home with a guest that lives more than 2 hours away, put them in a cooler with ice or frozen gel packs.

Having a safe and healthy Thanksgiving meal begins with a properly cooked turkey! Be sure to follow these cooking tips:

Roast your turkey in a 325°. Roast turkey until internal temperature is 165°. The list at the right tells basic rules of thumb for cooking times for an unstuffed turkey.

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Unstuffed	
4 to 8 pounds (breast)	1½ to 3¼ hours
8 to 12 pounds	2¾ to 3 hours
12 to 14 pounds	3 to 3¾ hours
14 to 18 pounds	3¾ to 4¼ hours
18 to 20 pounds	4¼ to 4½ hours
20 to 24 pounds	4½ to 5 hours

Special points of interest:

- Remember to clean all utensils, sink, counters and hands after handling a raw turkey to stop the spread of bacteria, including Salmonella.

An Itchy Situation



Do not use a combination shampoo/conditioner, or conditioner before using lice medicine. Do not re-wash the hair for 1 to 2 days after the lice medicine is removed.

Lice and eggs are killed by exposure for 5 minutes to temperatures greater than 128.3 degrees. Washing and drying items such as hats, pillow cases, bedding, and clothing can help stop the infestation.



Nit (head lice egg) combs, often found in lice medicine packages, should be used to comb nits and lice from the hair shaft after treatment.

Reliable data on how many people get head lice each year in the United States are not available; however, an estimated 6 million to 12 million infestations occur each year in the United States among children 3 to 11 years of age. Some studies suggest that girls get head lice more often than boys, probably due to more frequent head-to-head contact.

Treatment:

Treatment for head lice is recommended for people who are diagnosed with an active infestation. All household members and other close contacts should be checked. Some experts believe prophylactic treatment is prudent for persons who share the same bed with actively-infested individuals. All infested people and bedmates should be treated at the same time.

Some pediculicides (medicines that kill lice) have an ovicidal effect (kill eggs). For pediculicides that are only weakly ovicidal or not ovicidal, routine retreatment is recommended. For those that are more strongly ovicidal, retreatment is recommended only if live (crawling) lice are still present several days after treatment. To be most effective, retreatment should occur after all eggs have hatched but before new eggs are produced.

When treating head lice, supplemental measure should be combined with recommended medicine. For example, hats, scarves, pillow cases, bedding, clothing, and towels worn or used by infested person in the 2-day period before treatment is started can be machine washed and dried using the hot water and hot air cycles because lice and eggs are killed by exposure for 5 minutes to temperatures greater than 128.3 degrees. Items that cannot be laundered may be dry-cleaned or sealed in a plastic bag for two weeks. Items such as hats, grooming aids, and towels that come in contact with the hair of an infested person should not be shared. Vacuuming furniture and floors can remove an infested person's hairs that might have viable nits attached.

You can find step by step direction for treating the infested person at: www.cdc.gov/parasites/lice/head/index.html

Prevention and Control:

Avoid head-to-head (hair-to-hair) contact during play and other activities at home, school, and elsewhere. (sports activities, playground, slumber parties, camp)

Do not share clothing such as hats, scarves, coats, sports uniforms, hair ribbons, or barrettes.

Do not share combs, brushes, or towels. Disinfect combs and brushes used by an infested person by soaking them in hot water of at least 130 degrees for 5-10 minutes.

Do not lie on beds, couches, pillows, carpets, or stuffed animals that have recently been in contact with an infested person.

Do not use fumigant sprays or fogs; they are not necessary to control head lice and can be toxic if inhaled or absorbed through the skin.

Do's and Don'ts

DO check everyone in the household, and when you're done recheck. Use a good nit comb that will separate strands of hair easily.

DO notify others who have been in contact with the infested person. This is an important step in cutting down on the spread of head lice.

DO tell your children to place their coats in their backpacks at school instead of placing on rack with everyone else's.

DON'T panic. In order to keep your peace of mind, it's important to try to stay calm. Head lice can cause a great deal of anxiety for children, so treating the situation calmly will help the entire family.

DON'T send a child with head lice to school. Most schools have a no-nit policy, and it's important that they complete an effective treatment before returning to school. This will help cut down on the spread of lice.

DON'T cut your hair or pour olive oil, mayonnaise, Listerine, tea tree oil, vinegar, Vaseline, or gasoline on it. These methods don't work and some are dangerous.

DON'T treat family members who don't have head lice. Treat for head lice **ONLY** when a person has them.

DON'T treat family pets for lice with insecticidal shampoo. Its pointless and potentially harmful to humans and pets both. Lice cannot live on pets, so there is no reason to fear that lice may be hiding on your dog, cat or guinea pig.

Confused about the pneumonia shot?

If your doctor has told you to get a pneumonia shot and you are confused about which shot to get and when to get it, you are not alone! Recently you may have heard of a new vaccine for pneumonia called Prevnar 13 on your television.

There are two different kinds of pneumococcal vaccines: Prevnar 13 (PCV13) and Pneumovax 23 (PPSV23). These two vaccines are given to protect against infection from pneumococcal bacteria.

Prevnar 13– This vaccine is routinely given to infants as part of their recommended vaccines. It is also recommended for children and adults age 2 to 64, and for all adults age 65 years of age or older. If you are unsure of when to get the vaccine, contact your doctor for more details.

Pneumovax 23– This vaccine protects against 23 strains of pneumonia. It is recommended for all adults age 65 years of age or older. Anyone 2 to 64 with certain health problems or a weakened immune system.

How often do I need these vaccines?

Under 65

If you are under the age of 65, then you should consult with your healthcare provider to see if these vaccines are recommended for you. The pneumonia shot is usually only recommended for

those under 65 if they have certain illnesses that put them at higher risk of getting pneumonia

Over 65

Anyone over the age of 65 should receive both of these vaccines, starting with PCV13 (if previously unvaccinated) and then followed 1 year later by the PPSV23.

CDC recommendations based on health conditions:

People younger than age 65 yrs should receive :

- 1-time dose of PCV13 and 1st dose of PPSV23 if they have functional or anatomic asplenia, immunocompromising condition (see below), CSF leak, or are a candidate for or recipient of a cochlear implant,

2nd dose of PPSV23 if at highest risk of serious pneumococcal infection, including those who:

- Have anatomic or functional asplenia, including sickle cell disease.
- Have an immunocompromising condition, including HIV infection, leukemia, lymphoma, Hodgkin's disease, multiple myeloma, generalized malignancy, chronic renal failure, or nephrotic syndrome.
- Are receiving immunosuppressive chemotherapy (including high-dose corticosteroids).
- Have received an organ or bone marrow transplant.
- PPSV23 only (not PCV13) if younger than 65 yrs and they have chronic cardiac or pulmonary disease (including asthma), chronic liver disease, alcoholism, diabetes, smoke cigarettes.



Knowing when and what kind of pneumonia shot you need can be confusing!

Anyone over 65 should receive both pneumonia vaccinations— PCV13 and PPSV23.



Patients under 65 with any type of health problems should talk to their doctor about getting a pneumonia vaccination.

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We have your best interest at heart.

November Blood Pressure Clinic

15 Shelbyville Nutrition Site 11am—12pm

Due to low numbers, we have been forced to decrease the number of Blood Pressure Clinics we do each month. If you have a monthly group that meets in Shelby County during a weekday and you would be interested in having someone come take blood pressures for your group, please give us a call!

For more info go to:

www.cdc.gov

www.butterball.com

www.fda.gov

www.immunize.org

Recipe of the Month

Parmesan Butternut Squash Casserole

Ingredients:

- 2 Tbsp olive oil
- 2 Tbsp dried onion flakes
- 1 butternut squash—peeled, seeded, and cubed
- 1 garlic clove, crushed
- 1/4 tsp salt
- 1 Tbsp water, as needed (optional)
- 3 eggs
- 3/4 cup sour cream
- 1 cup grated Parmesan cheese
- 1/3 cup chopped fresh basil
- 1/4 tsp ground pepper
- 8 oz shredded mozzarella cheese

Directions:

Preheat oven to 425°F. Grease a 9x13 casserole dish. Heat olive oil in skillet over medium heat; cook and stir squash, onion flakes, garlic and salt. Cook squash mixture until tender, about 10 minutes. Add water if mixture gets too dry. Transfer mixture to prepared casserole dish. Lightly whisk eggs in a bowl; stir in sour cream, Parmesan cheese, basil, and black pepper. Pour egg mixture over squash mixture; top with mozzarella cheese. Bake in preheated oven until squash is tender and mozzarella cheese is bubbling. About 30 minutes.

