

WINTER 2015



Maryland State Child Fatality Review Team (SCFRT)



From Our State Team Chairperson, Rich Lichenstein, MD:

Flu Season is Among Us Once Again

Hopefully you have not caught it but chances are if you haven't caught it, you know somebody who has. Children represent a unique population at risk for death. Last season, we had a relatively mild season; the rate of outpatient visits, hospitalizations and deaths in children was lower than the preceding year. This year's vaccine contains the same strains as last year, as these strains were predicted to be in circulation again. However, after the strain of influenza A/H3N2 was selected for this year's vaccine a mutation emerged that did not match the strain present in the vaccination. Since 2004, influenza-associated deaths in children have been collected in the CDC's National Notifiable Diseases Surveillance System. A pediatric influenza-associated death is defined for surveillance purposes as a death resulting from a clinically compatible illness that was confirmed to be influenza by an appropriate laboratory or rapid diagnostic test in all persons aged <18 years of age. There should be no period of complete recovery between the illness and death. This data has allowed us to identify high-risk groups that can be found in the CDC's website Fluview:



<http://www.cdc.gov/flu/weekly/index.htm>

Risk factors pertinent to children include:

1. Age less than 2 years,
2. Chronic lung disease, including asthma, and other chronic diseases
3. Metabolic disorders, including diabetes,
4. Neurologic and neurodevelopmental disorders,
5. Immunosuppression,
6. Pregnant or post-partum within 2 weeks (includes teen pregnancies),

Of note some deaths occur in children who do not have these risk factors. Last season, the CDC reported that 105 children died from influenza of which, 47% had no underlying high-risk medical condition.

What can we do? Encourage vaccine use! Children can receive the vaccine as early as 6 months of age. The majority of children who died from the flu in 2013 did not receive flu vaccine. Even when the flu has mutated, such as this season's A/H3N2, the benefit of the vaccine to prevent complications and death exceed any risk of the actual flu vaccine. There are antiviral agents such as Oseltamivir (Tamiflu), and Zanamivir (Relenza) that can be prescribed that are most effective when given within 48 hours of the disease. Although many children can be managed at home with the flu if their symptoms are minor, seek care for children with risk factors as described above, or who are ill with the flu (respiratory, hydration or neurological problems) since children who die from influenza can do so rapidly, within a few days of the onset of symptoms. If you are your child are not so ill, many flu illnesses can be managed at home. Prevent the spread of flu by keeping children out of school and away from others when they are sick and washing hands frequently to prevent transmission of flu. In addition, it is important to try and prevent airborne transmission of the flu by coughing into your sleeve.

I hope these tips are helpful for you as we strive to decrease mortality and morbidity for Maryland's children!

References: 1. Committee on Infectious Diseases. Recommendations for Prevention and Control of Influenza in Children, 2014-2015. Pediatrics; 2014(5);134. 2. Wong KK, Jain S, Blanton L, et al. Influenza-Associated Pediatric Deaths in the United States, 2004-2012. Pediatrics 2013;132:796

Maryland SCFRT Members

A. LaToya Bates, LCSW-C
Vice Chair

Mary Gentile, LCSW-C

Judith Kandel, PNP, MPH

Wendy G. Lane, MD, MPH

Roger J. Lerner, Esq.

Richard Lichenstein, MD
Chairperson

Ling Li, MD

Jennifer Maehr, MD

Ilise Marrazzo, RN, BSN, MPH

Vernice McKee, MSW

Laurel Moody, MS, MSN, RN

Deanee' Moran, MA

Lynne E. Muller, PhD, NCC, LCPC

Ernest Reitz, JD

John Rusinko, MSW

Hal Sommers, MA

Martha Tuthill

Antinnette Williams, LICSW

Albert Zachik, MD

DHMH Advisors

Joyce Dantzler, MS, MCHES

S. Lee Woods, MD, PhD

DHMH Staff Support

Joan Patterson, LCSW-C

(410-767-6727)

NEXT SCFT MEETING

Tuesday, March 17, 2015

10:00 am-12:00 pm

MDOT

7201 Corporate Center Drive

Hanover, MD 21076

A Few Fire Safety Tips from Anne Arundel County:

So far this year, Anne Arundel has had 9 fire fatalities (5 of them children) and as we now know, all of these deaths were preventable. Most fire prevention and safety is common sense, but for some reason, we just don't do it. According to Anne Arundel County PIO Lt. Russ Davies, "People have accidental fires, but when we see injuries or worse, an unfortunate fatality, it is usually a sequence of events that make fire happen. For example, the statistics on home fires in the U.S. have remain unchanged for over 25 years: The No. 1 cause of house fires is unattended cooking and – STILL – the No. 1 cause of fatal fires is smoking – often in bed."



The 1st step to ensure you and your home's safety is to perform a Home Safety Survey. The Anne Arundel County Fire Department's Public Education site has one you can download: <http://www.aacounty.org/Fire/PublicEd/index.cfm>.

The 2nd step is to make and practice a fire escape plan. Draw a simple outline of each level of your home, showing exits from each room (doors and windows) and indicate where the smoke detectors are located. This drawing should be a family project.

The 3rd step is to agree on a "safe meeting place." This place should be a designated location in the front of the house - like the end of the driveway or a mailbox.

The 4th step is to practice exiting the house and heading to your safe meeting spot. "Make sure the escape plan works, run through it," Davies said. "Imagine in the middle of the night, the alarm goes off, you're asleep, your room or house might be smoky already. You will benefit if you have practiced your escape plan before it is needed."

Most fires happen at night when you are sleeping. This is why having a working smoke alarm is so important. Fire doubles in size every 30 seconds so a smoke alarm gives you a crucial 2 to 3 minutes to get out of the house. In the case of an actual fire, remember these 3 things: **Get out. Stay out. Call 911.** Never, ever return go back inside the home.

Some additional links with more helpful information are:

<http://www.aacounty.org/Fire/PublicEd> , www.usfa.fema.gov, www.nfpa.org



Contributor: Sharon New, MS, Education Specialist

Office of Fire Safety and Injury Prevention Anne Arundel Co. Fire Marshal's Office.

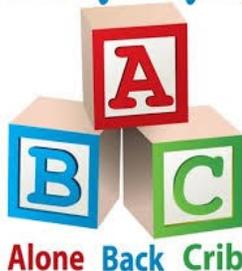


Did You Know - That State CFR Team Members are available to help or consult with your local CFR Teams on-site at your local team meetings? Call 410-767-6727 to schedule a visit!

New Safe Sleep Video- -Check It Out!

The Center for Infant & Child Loss has produced a new 9 minute safe sleep video that speaks directly to the issues surrounding safe sleep and what it can mean for the health of a baby. Several of our CFR Team Members are a part of this very important project. The video is used Statewide by birth hospitals as part of the post partum education of new moms and is accessible by visiting bit.ly/CICL.SafeSleep on YouTube.

Where does your baby sleep?



If you have news to share, contact the newsletter editor

Laurel Moody at lmood@stevenson.edu

Visit Our State Child Fatality Review website:

<http://phpa.dhmh.maryland.gov/mch/SitePages/cfr-home.aspx>

For more information contact
Joan Patterson

(410) 767-6727

joan.patterson@maryland.gov