

Immunizations July 2017 Look inside for...

- How Do Vaccines Work? (English/Spanish)
- 2017 Recommended Immunizations for Children and Adolescents
- Talking to Children About Flu (English/Spanish)
- Everyday Preventative Actions That Can Help Fight Germs, Like Flu
- Influenza is a Serious Disease... Make Sure Your Child is Protected (English/Spanish)
- Monthly Recipe: Banana French Toast
- No Spread Pledge & 5 Steps to Stop the Flu

For more information on how to lead a healthier lifestyle, visit our website <u>GetHealthyCT.org</u>





How do Vaccines Work?



Most of the vaccines your child receives are given by shots. One can be given in a nasal spray (a version of the influenza vaccine). In the past, the polio vaccine was placed on a sugar cube and given by mouth (this form of the polio vaccine is no longer available in the United States). But no matter how they are given, the general ideas of the vaccines are all the same. To help you understand how immunizations work, here's a little background on the body's immune system and the way it functions.

When your child becomes infected, his body relies on his immune system to fight the invading organism. White blood cells activate and begin making proteins called *antibodies* that locate the infectious agent and create a counter offensive. By this time, the germs may have already had time to cause a few symptoms. In some cases, the antibody response will be too late to be helpful and the invading organism can cause a severe or life threatening infection. Even so, by going on the attack, the immune system and its antibodies can eventually help stop many infections and help your child get well.

There's another important point to keep in mind about this process. Even after they've done their work, these antibodies don't disappear. They remain in the bloodstream, always on the lookout for the return of the same invaders. If these germs reappear, whether it's a few weeks or many years later, the antibodies are ready to protect. They can often prevent the infection altogether or stop the infection even before the first symptoms appear. That's why if you had the mumps or measles as a child, you never got it again, no matter how often you were exposed to the same infectious agent.

The antibodies are pretty specific. If they've been created in response to, for example, the measles virus, they're not going to work against chickenpox. There are some antibodies that are not so specific and can protect you from similar types of bacteria. So how does this scenario apply to childhood vaccines? The principle is very similar, even if the details are somewhat different. Immunizations rely on antibodies to fight off infections. But after a vaccination, antibodies go to work *before* a first infection develops. Here's how vaccines make that possible.

Live vaccines are made up of a weakened version of the bacteria or virus responsible for the disease. In some, vaccines are made from dead forms of the organism. These dead organisms were killed in a way to preserve their ability to provide immunity or protection. In other cases, an inactivated toxin that is made by the bacteria or a piece of the bacteria or virus is used. When the vaccine is given, the body's immune system detects this weakened or dead germ or germ part and reacts just as it would when a new full blown infection occurs. It begins making antibodies against the vaccine material. These antibodies remain in the body and are ready to react if an actual infectious organism attacks.

In a sense, the vaccine tricks the body into thinking it is under assault, and the immune system makes weapons that will provide a defense when a real infection becomes a threat.

Sometimes one dose of a vaccine is enough to protect a person, but often more than one dose is needed. Some antibodies protect for a lifetime, but others need boosting. For example, measles antibody lasts a lifetime, but antibody to tetanus can fall below a level that protects you, so booster doses are needed.

Some viruses such as the flu can change enough to make the existing antibodies ineffective. That's why influenza vaccine is needed every year.

To repeat, the vaccine-generated antibodies stay in your child's bloodstream and are prepared to fight off infections for months, years, and even a lifetime. If and when your child is exposed to the actual infectious disease, these antibodies will recognize and attack the germs, destroying them and preventing or greatly weakening the illness.

By the way, newborns are immune to some infections because they've received antibodies from their mothers. But that immunity begins to fade in the first months of life. For that reason, it's very important to follow the immunization schedule that your pediatrician will recommend.

Also, keep in mind that children do not gain *any* immunity from their mothers against some of the infectious diseases covered by childhood vaccines, including whooping cough and hepatitis. This is another important reason to follow the American Academy of Pediatrics immunization guidelines.

Last Updated 11/21/2015

Source: Immunizations & Infectious Diseases: An Informed Parent's Guide (Copyright © 2006 American Academy of Pediatrics)

The information contained on this Web site should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

¿Cómo funcionan las vacunas?



La mayoría de vacunas que recibe su hijo se administran mediante inyecciones. Una se puede administrar en un aerosol nasal (una versión de la vacuna contra la influenza). En el pasado, la vacuna contra la polio se colocaba en un terrón de azúcar y se administraba por vía oral (esta forma de vacuna contra la polio ya no está disponible en los Estados Unidos). Pero no importa cómo se administren, las ideas en general de las vacunas todas son iguales. Para ayudarlo a comprender cómo funcionan las vacunas, a continuación se encuentra un poco de información sobre el sistema inmunológico del cuerpo y la manera en la que funciona.

Cuando su hijo se infecta, su cuerpo utiliza su sistema inmunológico para combatir el organismo invasor. Los glóbulos blancos se activan y empiezan a crear proteínas denominadas *anticuerpos* que localizan el agente infeccioso y crean una contraofensiva. En este momento, los gérmenes posiblemente ya tuvieron tiempo de ocasionar unos cuantos síntomas. En algunos casos, la respuesta de los anticuerpos será muy demasiado tarde para ser útil y el organismo invasor puede ocasionar una infección severa o mortal. Incluso así, continuando con el ataque, el sistema inmunológico y sus anticuerpos pueden eventualmente ayudar a detener muchas infecciones y ayudar a su hijo a recuperarse.

Existe otro punto importante que debe recordar sobre este proceso. Incluso después de haber hecho su trabajo, estos anticuerpos no desaparecen. Permanecen en el flujo sanguíneo, siempre pendientes del regreso de algunos invasores. Si estos gérmenes vuelven a aparecer, ya sean unas cuantas semanas o muchos años después, los anticuerpos están listos para proteger. Con frecuencia pueden evitar la infección conjuntamente o detenerla aún antes de que aparezcan los primeros síntomas. Es por eso que si tuvo paperas o sarampión de niño, nunca más la vuelve a padecer, sin importar con que frecuencia se expuso al mismo agente infeccioso.

Los anticuerpos son bastante específicos. Por ejemplo, si se han creado en respuesta al virus del sarampión, no van a funcionar contra la varicela. Existen algunos anticuerpos que no son específicos y pueden protegerlo de los tipos similares de bacteria. Así que, ¿cómo aplica este escenario a las vacunas infantiles? El principio es muy similar, aún cuando los detalles son un poco diferentes. Las vacunas cuentan con los anticuerpos para combatir infecciones. Pero después de la vacunación, los anticuerpos empiezan a trabajar *antes* de que se desarrolle la primera infección. A continuación se muestra cómo las vacunas lo hacen posible.

Las vacunas de virus vivos están compuestas de una versión debilitada de la bacteria o del virus responsable de la enfermedad. En algunos, las vacunas están compuestas de formas muertas del organismo. Estos organismos muertos se mataron como una manera de preservar su capacidad de proporcionar inmunidad o protección. En otros casos, se usa una toxina inactivada que está compuesta por la bacteria o una parte de la bacteria o del virus. Cuando se administra la vacuna, el sistema inmunológico del cuerpo detecta este germen debilitado o muerto, o parte del germen, y reacciona así como lo haría cuando ocurre una nueva infección completa. Empieza formando anticuerpos contra el material de la vacuna. Estos anticuerpos permanecen en el cuerpo y están listos para reaccionar si ataca el organismo infeccioso real.

En cierto sentido, la vacuna engaña al cuerpo para que piense que está siendo atacado, y el sistema inmunológico crea armas que proporcionarán una defensa cuando una infección real se vuelva una amenaza.

Algunas veces una dosis de una vacuna es suficiente para proteger a una persona, pero con frecuencia más que una dosis es necesaria. Algunos anticuerpos protegen de por vida, pero otros necesitan refuerzo. Por ejemplo, el

anticuerpo contra el sarampión tienen una duración de por vida, pero el anticuerpo contra el tétanos puede caer debajo de un nivel que lo protege, así que las dosis de refuerzo son necesarias.

Algunos virus como la gripe pueden cambiar lo suficiente para volver inefectivos los anticuerpos existentes. Es por eso que la vacuna contra la influenza es necesaria cada año.

Para repetir, los anticuerpos generados por la vacuna permanecen el flujo sanguíneo de su hijo y está preparadas para combatir infecciones durante meses, años e incluso toda una vida. Si y cuando su hijo se expone a las enfermedades infecciosas reales, estos anticuerpos reconocerán y atacarán a los gérmenes, destruyéndolos y evitando o debilitando en gran medida la enfermedad.

Por cierto, los recién nacidos son inmunes a algunas infecciones debido a que han recibido anticuerpos de su madres. Pero esa inmunidad empieza a desvanecerse el primer mes de vida. Por esa razón, es muy importante seguir el programa de vacunación que su pediatra recomendará.

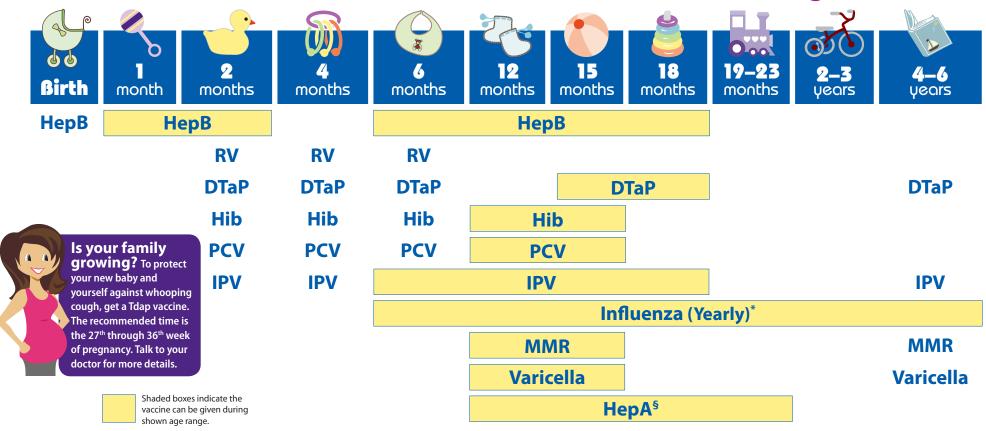
Así mismo, recuerde que los niños no obtienen *ninguna* inmunidad de sus madres contra algunas de las enfermedades infecciosas cubiertas por las vacunas de la infancia, incluyendo tos ferina y hepatitis. Esta es otra razón importante para seguir los lineamientos de vacunación de la American Academy of Pediatrics.

Última actualización 11/21/2015

Fuente: Immunizations & Infectious Diseases: An Informed Parent's Guide (Copyright © 2006 American Academy of Pediatrics)

La información contenida en este sitio web no debe usarse como sustituto al consejo y cuidado médico de su pediatra. Puede haber muchas variaciones en el tratamiento que su pediatra podría recomendar basado en hechos y circunstancias individuales.

2017 Recommended Immunizations for Children from Birth Through 6 Years Old



NOTE:

If your child misses a shot, you don't need to start over, just go back to your child's doctor for the next shot. Talk with your child's doctor if you have questions about vaccines.

FOOTNOTES:

* Two doses given at least four weeks apart are recommended for children aged 6 months through 8 years of age who are getting an influenza (flu) vaccine for the first time and for some other children in this age group.

⁵ Two doses of HepA vaccine are needed for lasting protection. The first dose of HepA vaccine should be given between 12 months and 23 months of age. The second dose should be given 6 to 18 months later. HepA vaccination may be given to any child 12 months and older to protect against HepA. Children and adolescents who did not receive the HepA vaccine and are at high-risk, should be vaccinated against HepA.

If your child has any medical conditions that put him at risk for infection or is traveling outside the United States, talk to your child's doctor about additional vaccines that he may need.

SEE BACK PAGE FOR MORE INFORMATION ON VACCINE-PREVENTABLE DISEASES AND THE VACCINES THAT PREVENT THEM.

For more information, call toll free **1-800-CDC-INFO** (1-800-232-4636) or visit www.cdc.gov/vaccines/parents



U.S. Department of Health and Human Services Centers for Disease Control and Prevention



American Academy of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN"

Disease	Vaccine	Disease spread by	Disease symptoms	Disease complications	
Chickenpox	Varicella vaccine protects against chickenpox.	Air, direct contact	Rash, tiredness, headache, fever	Infected blisters, bleeding disorders, encephalitis (brain swelling), pneumonia (infection in the lungs)	
Diphtheria	DTaP * vaccine protects against diphtheria.	Air, direct contact	Sore throat, mild fever, weakness, swollen glands in neck	Swelling of the heart muscle, heart failure, coma, paralysis, death	
Hib	Hib vaccine protects against <i>Haemophilus influenzae</i> type b.	Air, direct contact	May be no symptoms unless bacteria enter the blood	Meningitis (infection of the covering around the brair and spinal cord), intellectual disability, epiglottitis (life-threatening infection that can block the windpip and lead to serious breathing problems), pneumonia (infection in the lungs), death	
Hepatitis A	HepA vaccine protects against hepatitis A.	Direct contact, contaminated food or water	May be no symptoms, fever, stomach pain, loss of appetite, fatigue, vomiting, jaundice (yellowing of skin and eyes), dark urine	Liver failure, arthralgia (joint pain), kidney, pancreatic, and blood disorders	
Hepatitis B	HepB vaccine protects against hepatitis B.	Contact with blood or body fluids	May be no symptoms, fever, headache, weakness, vomiting, jaundice (yellowing of skin and eyes), joint pain	Chronic liver infection, liver failure, liver cancer	
Influenza (Flu)	Flu vaccine protects against influenza.	Air, direct contact	Fever, muscle pain, sore throat, cough, extreme fatigue	Pneumonia (infection in the lungs)	
Measles	MMR ** vaccine protects against measles.	Air, direct contact	Rash, fever, cough, runny nose, pinkeye	Encephalitis (brain swelling), pneumonia (infection in the lungs), death	
Mumps	MMR **vaccine protects against mumps.	Air, direct contact	Swollen salivary glands (under the jaw), fever, headache, tiredness, muscle pain	Meningitis (infection of the covering around the brain and spinal cord) , encephalitis (brain swelling), inflam- mation of testicles or ovaries, deafness	
Pertussis	DTaP * vaccine protects against pertussis (whooping cough).	Air, direct contact	ect contact Severe cough, runny nose, apnea (a pause in breathing in infants) Pneumonia (infection in th		
Polio	IPV vaccine protects against polio.	Air, direct contact, through the mouth	, through May be no symptoms, sore throat, fever, nausea, headache Paralysis, death		
Pneumococcal	PCV vaccine protects against pneumococcus.	Air, direct contact	May be no symptoms, pneumonia (infection in the lungs)	Bacteremia (blood infection), meningitis (infection of the covering around the brain and spinal cord), death	
Rotavirus	RV vaccine protects against rotavirus.	Through the mouth	Diarrhea, fever, vomiting	Severe diarrhea, dehydration	
Rubella	MMR** vaccine protects against rubella.	Air, direct contact	Children infected with rubella virus sometimes have a rash, fever, swollen lymph nodes	Very serious in pregnant women—can lead to miscar- riage, stillbirth, premature delivery, birth defects	
Tetanus	DTaP * vaccine protects against tetanus.	Exposure through cuts in skin	e through cuts in skin Stiffness in neck and abdominal muscles, difficulty swallowing, muscle spasms, fever		

* DTaP combines protection against diphtheria, tetanus, and pertussis. ** MMR combines protection against measles, mumps, and rubella.

Talk to your child's doctor or nurse about the vaccines recommended for their age.

		Tdap	HPV Human papillomavirus	Meningococcal						MMR	
	Flu Influenza	Tetanus, diphtheria, pertussis		MenACWY	MenB	Pneumococcal	Hepatitis B	Hepatitis A	Inactivated Polio	Measles, mumps, rubella	Chickenpox Varicella
7-8 Years											
9-10 Years											
11-12 Years											
13-15 Years											
16-18 Years											
More information:		Preteens and teens should get one shot of Tdap at age 11 or 12 years.	All 11-12 year olds should get a 2-shot series of HPV vaccine at least 6 months apart. A 3-shot series is needed for those with weakened immune systems and those age 15 or older.	All 11-12 year olds should get a single shot of a quadrivalent meningococcal conjugate vaccine (MenACWY). A booster shot is recommended at age 16.	Teens, 16-18 years old, may be vaccinated with a MenB vaccine.						



These shaded boxes indicate when the vaccine is recommended for all children unless your doctor tells you that your child cannot safely receive the vaccine.



These shaded boxes indicate the vaccine is recommended for children with certain health or lifestyle conditions that put them at an increased risk for serious diseases. See vaccine-specific recommendations at www.cdc.gov/vaccines/pubs/ACIP-list.htm. These shaded boxes indicate the vaccine should be given if a child is catching-up on missed vaccines.

This shaded box indicates the vaccine is recommended for children not at increased risk but who wish to get the vaccine after speaking to a provider.



U.S. Department of Health and Human Services Centers for Disease Control and Prevention



AMERICAN ACADEMY OF FAMILY PHYSICIANS strong medicine for America

Vaccine-Preventable Diseases and the Vaccines that Prevent Them

Diphtheria (Can be prevented by Tdap vaccination)

Diphtheria is a very contagious bacterial disease that affects the respiratory system, including the lungs. Diphtheria bacteria can be passed from person to person by direct contact with droplets from an infected person's cough or sneeze. When people are infected, the bacteria can produce a toxin (poison) in the body that can cause a thick coating in the back of the nose or throat that makes it hard to breathe or swallow. Effects from this toxin can also lead to swelling of the heart muscle and, in some cases, heart failure. In serious cases, the illness can cause coma, paralysis, and even death.

Hepatitis A (Can be prevented by HepA vaccination)

Hepatitis A is an infection in the liver caused by hepatitis A virus. The virus is spread primarily person-to-person through the fecal-oral route. In other words, the virus is taken in by mouth from contact with objects, food, or drinks contaminated by the feces (stool) of an infected person. Symptoms can include fever, tiredness, poor appetite, vomiting, stomach pain, and sometimes jaundice (when skin and eyes turn yellow). An infected person may have no symptoms, may have mild illness for a week or two, may have severe illness for several months, or may rarely develop liver failure and die from the infection. In the U.S., about 100 people a year die from hepatitis A.

Hepatitis B (Can be prevented by HepB vaccination)

Hepatitis B causes a flu-like illness with loss of appetite, nausea, vomiting, rashes, joint pain, and jaundice. Symptoms of acute hepatitis B include fever, fatigue, loss of appetite, nausea, vomiting, pain in joints and stomach, dark urine, grey-colored stools, and jaundice (when skin and eyes turn yellow).

Human Papillomavirus (Can be prevented by HPV vaccination)

Human papillomavirus is a common virus. HPV is most common in people in their teens and early 20s. It is the major cause of cervical cancer in women and genital warts in women and men. The strains of HPV that cause cervical cancer and genital warts are spread during sex.

Influenza (Can be prevented by annual flu vaccination)

Influenza is a highly contagious viral infection of the nose, throat, and lungs. The virus spreads easily through droplets when an infected person coughs or sneezes and can cause mild to severe illness. Typical symptoms include a sudden high fever, chills, a dry cough, headache, runny nose, sore throat, and muscle and joint pain. Extreme fatigue can last from several days to weeks. Influenza may lead to hospitalization or even death, even among previously healthy children.

Measles (Can be prevented by MMR vaccination)

Measles is one of the most contagious viral diseases. Measles virus is spread by direct contact with the airborne respiratory droplets of an infected person. Measles is so contagious that just

being in the same room after a person who has measles has already left can result in infection. Symptoms usually include a rash, fever, cough, and red, watery eyes. Fever can persist, rash can last for up to a week, and coughing can last about 10 days. Measles can also cause pneumonia, seizures, brain damage, or death.

Meningococcal Disease (Can be prevented by meningococcal vaccination)

Meningococcal disease is caused by bacteria and is a leading cause of bacterial meningitis (infection around the brain and spinal cord) in children. The bacteria are spread through the exchange of nose and throat droplets, such as when coughing, sneezing or kissing. Symptoms include sudden onset of fever, headache, and stiff neck. Meningococcal bacteria also cause blood infections. About one of every ten people who get the disease dies from it. Survivors of meningococcal disease may lose their arms or legs, become deaf, have problems with their nervous systems, become developmentally disabled, or suffer seizures or strokes.

Mumps (Can be prevented by MMR vaccination)

Mumps is an infectious disease caused by the mumps virus, which is spread in the air by a cough or sneeze from an infected person. A child can also get infected with mumps by coming in contact with a contaminated object, like a toy. The mumps virus causes swollen salivary glands under the ears or jaw, fever, muscle aches, tiredness, abdominal pain, and loss of appetite. Severe complications for children who get mumps are uncommon, but can include meningitis (infection of the covering of the brain and spinal cord), encephalitis (inflammation of the brain), permanent hearing loss, or swelling of the testes, which rarely results in decreased fertility.

Pertussis (Whooping Cough) (Can be prevented by Tdap vaccination)

Pertussis is caused by bacteria spread through direct contact with respiratory droplets when an infected person coughs or sneezes. In the beginning, symptoms of pertussis are similar to the common cold, including runny nose, sneezing, and cough. After 1-2 weeks, pertussis can cause spells of violent coughing and choking, making it hard to breathe, drink, or eat. This cough can last for weeks. Pertussis is most serious for babies, who can get pneumonia, have seizures, become brain damaged, or even die. About half of children under 1 year of age who get pertussis must be hospitalized.

Pneumococcal Disease (Can be prevented by pneumococcal vaccination)

Pneumonia is an infection of the lungs that can be caused by the bacteria called pneumococcus. This bacteria can cause other types of infections too, such as ear infections, sinus infections, meningitis (infection of the covering around the brain and spinal cord), and bacteremia (bloodstream infection). Sinus and ear infections are usually mild and are much more common than the

more serious forms of pneumococcal disease. However, in some cases pneumococcal disease can be fatal or result in long-term problems, like brain damage and hearing loss. Pneumococcal disease spreads when people cough or sneeze. Many people have the bacteria in their nose or throat at one time or another without being ill—this is known as being a carrier.

Polio (Can be prevented by IPV vaccination)

Polio is caused by a virus that lives in an infected person's throat and intestines. It spreads through contact with the stool of an infected person and through droplets from a sneeze or cough. Symptoms typically include sore throat, fever, tiredness, nausea, headache, or stomach pain. In about 1% of cases, polio can cause paralysis. Among those who are paralyzed, About 2 to 10 children out of 100 die because the virus affects the muscles that help them breathe.

Rubella (German Measles) (Can be prevented by MMR vaccination)

Rubella is caused by a virus that is spread through coughing and sneezing. In children rubella usually causes a mild illness with fever, swollen glands, and a rash that lasts about 3 days. Rubella rarely causes serious illness or complications in children, but can be very serious to a baby in the womb. If a pregnant woman is infected, the result to the baby can be devastating, including miscarriage, serious heart defects, mental retardation and loss of hearing and eye sight.

Tetanus (Lockjaw) (Can be prevented by Tdap vaccination)

Tetanus is caused by bacteria found in soil, dust, and manure. The bacteria enters the body through a puncture, cut, or sore on the skin. When people are infected, the bacteria produce a toxin (poison) that causes muscles to become tight, which is very painful. Tetanus mainly affects the neck and belly. This can lead to "locking" of the jaw so a person cannot open his or her mouth, swallow, or breathe. Complete recovery from tetanus can take months. One to two out of 10 people people who get tetanus die from the disease.

Varicella (Chickenpox) (Can be prevented by varicella vaccination)

Chickenpox is caused by the varicella zoster virus. Chickenpox is very contagious and spreads very easily from infected people. The virus can spread from either a cough, sneeze. It can also spread from the blisters on the skin, either by touching them or by breathing in these viral particles. Typical symptoms of chickenpox include an itchy rash with blisters, tiredness, headache and fever. Chickenpox is usually mild, but it can lead to severe skin infections, pneumonia, encephalitis (brain swelling), or even death.

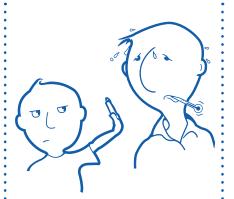
INFLUENZA (FLU) Talking to Children About Flu

Advice for Parents on Talking to Children About the Flu

Focus on what your child can do to fight the flu and to not spread flu to others:



Have your child get a flu vaccine. The flu shot may pinch, but it will help protect them from getting sick later. A flu vaccine given as a nasal spray may also be available.



Encourage them to try to stay away from people who are sick.



Encourage them to cough and sneeze into a tissue when they are sick. Throw the tissue in the trash right away. If they do not have a tissue, they should cover their mouth and nose with their arm.



Encourage them to wash hands often with soap and warm water for 15-20 seconds. Set a good example by doing this yourself.



Encourage them to stay home from work and school if they are sick, and stay away from people until they are better.



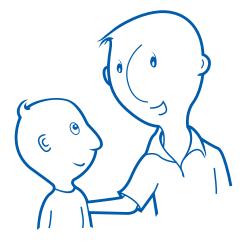
U.S. Department of Health and Human Services Centers for Disease Control and Prevention

INFLUENZA (FLU) Talking to Children About Flu

Encourage healthy habits: eating healthy foods, getting enough sleep, and getting exercise.



Use their questions as a chance to tell them how to avoid the flu and how to not spread flu and other germs.



For more information call CDC info at 1-800-CDC-INFO (232-4636) or go to www.cdc.gov/flu.

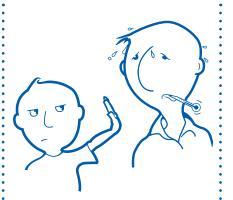
INFLUENZA (GRIPE) Hable con sus hijos sobre la influenza

Consejos para que los padres hablen con sus hijos sobre la influenza

Destaque lo que sus hijos pueden hacer para combatir la influenza y no contagiar a otras personas:



Vacune a su hijo contra la influenza. La vacuna inyectable contra la influenza puede sentirse como un pinchazo pero evita que se enfermen más adelante. Es posible que la vacuna contra la influenza también esté disponible en atomizador nasal.



Pídales que se mantengan alejados de personas enfermas.



Dígales que tosan y estornuden usando un pañuelo desechable cuando estén enfermos. Que arrojen el pañuelo a la basura de inmediato. Y que si no tienen pañuelos desechables, se cubran la boca y la nariz con el brazo.



Pídales que se laven frecuentemente las manos con agua tibia y jabón durante 15 a 20 segundos. Hágalo usted también para que sigan su ejemplo.



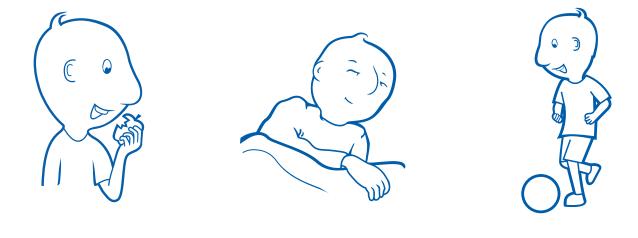
No permita que vayan a la escuela o al trabajo si están enfermos y pídales que se mantengan alejados de otras personas hasta que se sientan mejor.



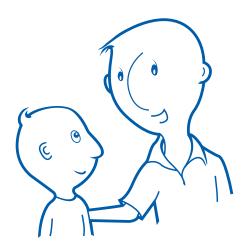
U.S. Department of Health and Human Services Centers for Disease Control and Prevention

INFLUENZA (GRIPE) Hable con sus hijos sobre la influenza

Fomente hábitos saludables: comer alimentos saludables, dormir lo suficiente y hacer actividad física.



Aproveche sus preguntas para explicarles cómo pueden prevenir la influenza y evitar la propagación de la influenza y otros gérmenes.



Para obtener información, llame a los CDC al 1-800-CDC-INFO (232-4636) o visite www.cdc.gov/flu.

Everyday Preventive Actions That Can Help Fight Germs, Like Flu



CDC recommends a three-step approach to fighting the flu.

CDC recommends a three-step approach to fighting influenza (flu). The first and most important step is to get a flu vaccination each year. But if you get the flu, there are prescription antiviral drugs that can treat your illness. Early treatment is especially important for the elderly, the very young, people with certain chronic health conditions, and pregnant women. Finally, everyday preventive actions may slow the spread of germs that cause respiratory (nose, throat, and lungs) illnesses, like flu. This flyer contains information about everyday preventive actions.

How does the flu spread?

Flu viruses are thought to spread mainly from person to person through droplets made when people with flu cough, sneeze, or talk. Flu viruses also may spread when people touch something with flu virus on it and then touch their mouth, eyes, or nose. Many other viruses spread these ways too.People infected with flu may be able to infect others beginning 1 day before symptoms develop and up to 5-7 days after becoming sick. That means you may be able to spread the flu to someone else before you know you are sick as well as while you are sick. Young children, those who are severely ill, and those who have severely weakened immune systems may be able to infect others for longer than 5-7 days.

What are everyday preventive actions?

- Try to avoid close contact with sick people.
- If you or your child gets sick with flu-like illness, CDC recommends that you (or your child) stay home for at least 24 hours after the fever is gone except to get medical care or for other necessities. The fever should be gone without the use of a fever-reducing medicine.
- While sick, limit contact with others as much as possible to keep from infecting them.
- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
- Wash your hands often with soap and water. If soap and water are not available, use an alcohol-based hand rub.
- Avoid touching your eyes, nose and mouth. Germs spread this way.
- Clean and disinfect surfaces and objects that may be contaminated with germs like the flu.
- If an outbreak of flu or another illness occurs, follow public health advice. This may include information about how to increase distance between people and other measures.



FIGHT FLU

For more information, visit: www.cdc.gov/flu or call 1-800-CDC-INFO



U.S. Department of Health and Human Services Centers for Disease Control and Prevention

What additional steps can I take at work to help stop the spread of germs that can cause respiratory illness, like flu?

- Find out about your employer's plans if an outbreak of flu or another illness occurs and whether flu vaccinations are offered on-site.
- Routinely clean frequently touched objects and surfaces, including doorknobs, keyboards, and phones, to help remove germs.
- Make sure your workplace has an adequate supply of tissues, soap, paper towels, alcohol-based hand rubs, and disposable wipes.
- Train others on how to do your job so they can cover for you in case you or a family member gets sick and you have to stay home.
- If you begin to feel sick while at work, go home as soon as possible.



What additional preventive actions can I take to protect my child from germs that can cause respiratory illness, like flu?

- Find out about plans your child's school, child care program, or college has if an outbreak of flu or another illness occurs and whether flu vaccinations are offered on-site.
- Make sure your child's school, child care program, or college routinely cleans frequently touched objects and surfaces, and that they have a good supply of tissues, soap, paper towels, alcohol-based hand rubs, and disposable wipes on-site.
- Ask how sick students and staff are separated from others and who will care for them until they can go home.

Everyday preventive actions can help slow the spread of germs that can cause many different illnesses and may offer some protection against the flu.

Influenza is a serious disease... Make sure your child is protected!

What is influenza?	Influenza (flu) is a serious disease caused by a virus.				
	Influenza can make your child feel miserable. Fever, cough, shaking chills, body aches, and extreme weakness are common symptoms.				
How do you catch influenza?	Your child can catch influenza from people who cough, sneeze, or even just talk around him or her. It is very contagious.				
Is influenza serious?	Yes. Tragically, every year infants, children, teens, and adults die from influenza.				
Ask your child's healthcare provider if your child is	Influenza is dangerous for children as well as for people of all ages. Children younger than 2 years of age are at particularly high risk for hospitalization due to complications of influenza.				
up to date for all vaccines!	Influenza is not only serious for your child, but it can be serious for others, such as babies and grandparents, if your child passes the virus on to them.				
Is my child at risk?	Yes. Anyone can become seriously sick from influenza – even healthy children.				
How can I protect my child from	/accination is the best way to protect your child from getting nfluenza.				
influenza?	Everyone 6 months of age and older should get vaccinated against influenza every year.				
	Vaccination not only protects people who get immunized, it also protects others who are around them.				
	► For more information, visit www.vaccineinformation.org				
	immunization action coalition				

For other vaccine handouts in this series, visit www.immunize.org/vaccine-summaries



Technical content reviewed by the Centers for Disease Control and Prevention Saint Paul, Minnesota • www.immunize.org www.immunize.org/catg.d/p4312.pdf • Item #P4312 (6/13)

La gripe (influenza) es una enfermedad grave... ¡Proteja a su hijo!

¿Qué es la gripe?	La gripe (influenza) es una enfermedad grave causada por un virus.				
	La gripe puede hacer que su hijo se sienta horrible. Los síntomas usuales son: fiebre, tos, escalofríos, dolores de cuerpo y debilidad extrema.				
¿Cómo se contagia la gripe?	Su hijo se puede contagiar la influenza de otras personas cuando tosen, estornudan o simplemente hablan. Es muy contagiosa.				
¿Es grave la gripe?	Sí. Lo trágico es que cada año bebés, niños, adolescentes y adultos mueren por la gripe.				
Pregunte al proveedor de atención médica de su hijo si está al día con sus vacunas.	La gripe es peligrosa para los niños, y también para personas de cualquier edad. Los niños menores de 2 años de edad corren un riesgo sumamente alto de hospitalización debido a las complicaciones de la gripe. La gripe no solo es grave para su hijo y también para otras personas a quien la puede transmitir, como bebés y abuelos.				
¿Corre riesgo mi hijo?	Sí. Cualquiera se puede enfermar mucho con la gripe, hasta los niños saludables.				
¿Cómo puedo proteger a mi hijo de la gripe?	La vacunación es la mejor manera de proteger a su hijo de la infección con la gripe.				
	Todos a partir de los 6 meses en adelante deben vacunarse contra la gripe cada año.				
	La vacunación no solo protege a las personas que reciben la vacuna, sino que también protege a los que las rodean. Si desea más información, visite www.vaccineinformation.org				
	immunization				

Si desea otros folletos de esta serie, visite www.immunize.org/vaccine-summaries



Technical content reviewed by the Centers for Disease Control and Prevention Saint Paul, Minnesota • www.immunize.org www.immunize.org/catg.d/p4312-01.pdf • Item #P4312-01 (6/13)

SERVES

BANANA FRENCH TOAST

- cooking spray
- 2 eggs, beaten
- 1/2 teaspoon vanilla extract
- 1/2 teaspoon cinnamon
- 1/4 cup lowfat milk
- 4 slices whole wheat bread
- 2 bananas, sliced
- 1. Spray medium skillet with cooking spray. Heat over medium-low heat.
- In a shallow bowl, mix together eggs, vanilla, cinnamon, and milk.
- Oip bread into mixture for a few seconds, turn to coat.
- 4. Cook until golden brown on both sides. Cut into fun shapes if desired.
- **(5)** Top with sliced bananas.

NUTRITIONAL INFORMATION (per serving) CALORIES 172; FAT 3.8g; PROTEIN 8g; CARB 29g; FIBER 4g; CALCIUM 35mg; IRON 1mg; VITAMIN A (RE) 70mcg; VITAMIN C 5mg; FOLATE 12mcg

DID YOU KNOW?...

Using an egg slicer to cut bananas is a fun and safe tool for your kids to use.

SABÍA USTED QUE?...

Usar el rebanador de huevos para cortar los plátanos es entretenido y seguro para los niños.

16 BREAKFAST DESAYUNO

TOSTADA FRANCESA CON PLÁTANOS

- aceite vegetal en rociador
- 2 huevos batidos
- 1/2 cucharadita de extracto de vainilla
- 1/2 cucharadita de canela
- 1⁄4 taza de leche baja en grasa
- 4 rebanadas de pan de trigo integral
- 2 plátanos, rebanados
- 1. Rocíe una sartén mediana con aceite vegetal. Caliente a fuego medio.
- En un tazón poco profundo, mezcle los huevos, la vainilla, la canela y la leche.
- Remoje el pan en la mezcla durante varios segundos, voltee para cubrir el otro lado.
- 4. Cocine hasta que esté dorado por ambos lados. Si lo desea, córtelo en figuras graciosas.
- (6) Adorne con plátanos rebanados.

INFORMACIÓN DE NUTRICIÓN (en cada porción) CALORÍAS 172; GRASA 3.8g; PROTEÍNA 8g; CARB. 29g; FIBRA 4g; CALCIO 35mg; HIERRO 1mg; VITAMINA A (RE) 70mcg; VITAMINA C 5mg; FOLATO 12mcg



No Spread Pledge

Rufus says, "take the pledge!"

- **Get a flu shot every 12 months.**
- **Wash your hands often**.
- **Cough into your elbow or a tissue.**
- **Throw tissues in the trash.**
- **Stay home when you are sick.**

My Name

5 Steps to **5** Stop the Flu



Get a flu vaccine every 12 Months



Wash your hands often



Cough into your elbow or a tissue



Throw tissues in the garbage



Stay home when you are sick