

CenterLines

FRONT AND CENTER WITH USEFUL NEWS FOR FAMILIES!

Special Olympics and the Healthy Athletes® Screening Program



Athlete – the vision that comes to my mind is a person with a great body. They are in shape and competitive. Individuals who compete in organized sports look like they are healthy. In fact athletes probably have a high level of health care.

Special Olympics gives those with intellectual disabilities a place to participate in sports with their peers. This is very successful – at least in providing sporting events. But do Special Olympians have the same good health as other athletes?

In 1996 a group of people started talking about some of the health problems of some of the Special Olympians. These problems were affecting their performance at the Games. Some of the issues were:

- Improper support for feet
- Pain from untreated dental cavities
- Poor vision

Taking a proactive stand, these folks decided to do something. They started offering health-related screenings at Special Olympic events. Athletes were invited to have their vision and teeth checked in-between sporting events. After ten years, the types

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of health screenings have now grown to include six different areas:

- Fit Feet®
- Opening Eyes®
- Special Smiles®
- FUNfitness®
- Healthy Hearing®
- Health Promotion®

The wide held belief is that people with disabilities get great health care. However, the health providers in the Healthy Athlete Screening program found this wasn't always true. Many people with disabilities are either slipping through the cracks or the health care system doesn't provide the chance for routine health care.

Health providers often feel awkward treating people with intellectual disabilities. They don't get training or the experience they need with these folks. This is mostly true in rural states or states with lower populations, such as Iowa. One survey of doctors and dentists reported a general lack of training in disabilities. More than half of the medical and dental school deans said that graduates from their colleges were not skilled in treating people with intellectual disabilities.

This doesn't mean the schools aren't interested in training their doctors about disabilities. Most of the medical and dental schools said they would include people

with disabilities in their practice. Close to 100% of the schools said they would provide training

on the treatment of people with disabilities. They just need a good program.

Those working at Healthy Athletes got co-workers to come and help staff the free health screenings. Turns out, Healthy Athletes is great for training providers in every state. *Train the Trainer* programs are now held at Special Olympic Games throughout the country. Providers can learn about the health care needs and abilities of individuals with intellectual disabilities.

It's also important to get good health education. This doesn't always happen with people with disabilities. Health education materials are made for the general public. So, materials aren't at the right reading levels for people with disabilities. They don't always include photos of people with disabilities so it may not look like it applies to them.

The Healthy Athletes Program therefore has grown to provide:

- Free and welcoming environment for basic health screenings
- Health Education – interactive and hands-on
- Training opportunities for providers
- Data (from the "whole" not on individuals) on health conditions (*see table, next page*)



The First National Special Olympic Games is July 2-7, 2006, in Ames, Iowa. We are very lucky to be hosting this outstanding event. All six of the Healthy Athletes Disciplines will be present all week to conduct screenings and present health education. I am Clinical Director for Health Promotion in Iowa. We will be screening athletes for:

- Healthy weight
- Bone health
- Respiratory volumes
- Skin lesions

We will provide education on nutrition, tobacco avoidance, and sun safety. Plus, we have free gifts!

We are looking for volunteers to help Health Promotion, Healthy Athletes on any day from Monday July 3 through Friday July 7. No medical training is required for Health Promotion screenings.



Contact me, Anne Tabor (annetabor@uiowa.edu or 319-356-1322) or Barb Nidey (Barbaranidey@uiowa.edu or 319-356-1511) at the Center for Disabilities and Development, University of Iowa, Iowa City if you are interested in joining us this July!

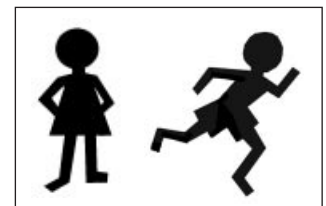
Anne Tabor, MPH, RD/LD
Nutritionist, CDD

**HEALTH PROFILE of Individuals participating
in 2003 Special Olympic World Games
in Dublin, Ireland (~3500 individuals)**

(Monograph Healthy Athletes Screening Data published Feb 2005 Special Olympics)

Hearing	Tooth Decay	Vision	Foot Health	Bone Health	Obesity
<p>30% failed hearing tests; this rate is 6 times that of the general population.</p> <p>Of those who failed the hearing test:</p> <p>8-17 yr = 25% 35-50 yr = 50% 51-70 yr = 70%</p>	<p>35% show signs of molar decay</p> <p>12% reported tooth pain</p>	<p>25% can't see far; 10% can't see near</p> <p>Vision worsens Ages 35-50</p> <p>1/3 athletes required eyeware and 1/2 of those got glasses for the 1st time</p>	<p>Half had one or more foot diseases</p>	<p>29% males and 13% females had below normal bone mineral density (high for young age)</p>	<p>30% adults obese; 23% overwt</p>

Questions and Answers about ADHD



Q: Should I give my child a break from his medication on weekends and summers?

A: We used to think that children needed a break from stimulants over the summer in order to grow well. There have been lots of studies, and now we know that we do not need to give the children a break. They will still grow well.

Some children might not need to take medicine on the week-

end and summer. They might not pay attention. They might be very active but they are not impulsive or careless. And, if their parents don't mind the activity level then it's okay.

Other children might be too impulsive or active to be safe without the medicine. They should keep taking it.

If your child has activities during the evening or on weekends, they might need to take medi-

cine for that, too. I have seen some children who had ADHD and were not taking medicine in the evening. The other children in the group got angry or made fun of them because of their bad behavior.

Remember that some ADHD medicines, like Strattera, Clonidine or Tenex do need to be taken every day.

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Q: I am afraid that my child will become addicted to drugs if I start them on medicine for ADHD.

A: Research studies have looked at this. ADHD medicine helps children with ADHD be less impulsive. As a group, children with ADHD who are treated are LESS likely to start using drugs. They are also less likely to get into car accidents and less likely to have behavior problems.

If you have had a drug problem and you are afraid you might be tempted to use your child's medicine, tell the person who is writing the prescriptions. There might be other medicines your child can use to control their symptoms that you cannot use.

Joni Bosch, PhD, ARNP
CDD Family Nurse Practitioner

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The role of the information in this newsletter is not to provide diagnosis or treatment of any illness or condition. We strongly encourage you to discuss the information you find here with your health care and other service providers.

CenterLines for families, the newsletter of the Center for Disabilities and Development at the University of Iowa Hospitals and Clinics, is published three times a year. It provides families with current information on child and adult development, issues affecting people with disabilities, and CDD resources available to them and their families. The newsletter is available in print, and also online at www.uihealthcare.com/cdd. Click on Centerlines for Families.

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HEADS UP!

Sports Participation Checklist



Head for the gym or playing field:

These conditions are no problem for an athlete as long as you and your doctor have them under control:

- Asthma
- Congenital heart disease
- Convulsive disorder
- Diabetes
- Hernia, inguinal
- HIV (take precautions with body fluids)
- Seizure disorder



Have your doc call the plays:

If you have any of the conditions below, talk to your doc before you join the team:

- Anorexia, bulimia, other eating disorders
- Atlantoaxial instability, a problem with the bones in the neck
- Bone disease, a broken bone
- Cancer
- Cerebral palsy
- Cystic fibrosis
- Eye injury, recent eye surgery, vision loss in one eye
- Head injury, now or in the past; surgery involving the skull
- Heart, blood vessel, or bleeding disorders; high blood pressure
- Heat-related illness like sunstroke, now or in the past
- Illness with fever or other symptoms; contagious disease
- Kidney, loss of one
- Liver disease
- Lung disease, breathing problems
- Menstrual cycle concerns (a doctor should monitor growth, nutrition, menstrual cycle, and weight of any female athlete)
- Muscle sprain, disease
- Obesity
- Organ transplant
- Seizures you can't control very well
- Sickle cell disease
- Spine injury
- Spleen disorders



Stay on the bench:

See your doctor if you have any of these concerns. Do NOT participate in ANY sport until your doctor gives you the OK.

- Acute illness that is contagious or that will get worse if you play sports
- Carditis (inflammation of the heart)
- Diarrhea, moderate to severe
- Fever
- Liver, sudden enlargement
- Shortness of breath
- Sickle cell disease
- Skin disorders that are catching, like boils, herpes, impetigo, scabies
- Spleen, acute enlargement

SPORTS PHYSICALS

Many schools require a physical before a child can participate in sports. Some schools even offer free group sports physicals. The question is, should you take your child to your local provider (doctor, nurse practitioner, or PA), or to a free screening?

Some group screenings are free, which is important to many people. Good group screenings have many stations. Trainers test strength and flexibility. Nurses check blood pressure and review the history. Doctors, PA's, or nurse practitioners do a physical exam. It is important to understand that group physicals are only a screening.

Your child should still go to your own provider for regular well child exams.

Your local provider already knows your child and any of his/her health concerns that might cause problems with sports. While there, they can update any immunizations. Your local doctor can also talk to your child about common problems for their age, including drugs, sex, and smoking.



Your child's physical development can make a difference on which sports are safe. Physical development is often checked by looking at pubic hair. It is much easier to check that in the privacy of an office. It is also easier to see and hear (hearts for instance) in a quiet office. A noisy gym full of lots of kids does not offer much privacy. Your child may be more honest about health questions in a private place than in front of a lot of his/her friends. Be sure to call early so that you can get into your doctor in plenty of time.

The physical should pay attention to the child's:

- Size
- Strength
- Endurance
- Agility
- Chronic illness history (asthma or diabetes)

Be sure to be complete when you fill out the history. It is very important to report any head injuries, concussions, or times when your child has been unconscious. Tell them about any muscle, bone, or joint injuries. Any problems in a girl's periods should be checked. Being thorough will help avoid any serious or unexpected injuries or health problems brought on by sports-related activity.



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