



CEHA

POINT SOURCE

SUMMER 2005

Colorado Environmental Health Association

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Packed Schedule for the 2005 Annual Education Conference



Submitted by Therese Pilonetti-Hall, CEHA Education Chair and President Elect

The Colorado Environmental Health Association's Annual Education Conference planning committee is busy planning CEHA's 50th Annual Education Conference in beautiful Estes Park, Colorado from September 21-23, 2005. September is the perfect time of year to visit Estes Park, take in the fall colors, and enjoy the incredible wildlife of Colorado, including bugling elk and big horn sheep you'll find hanging around town.

This year the planning committee is working very hard to bring a variety of topics and speakers with wide appeal and global importance to our field. CEHA has secured the acclaimed Epi-Ready Team Training, the collaborative training course presented by NEHA, CDC, and NACCHO. This excellent free training opportunity is designed to challenge teams of three to four to work together to investigate foodborne disease outbreaks. The training will include interactive group sessions paired with dynamic lectures. The Epi-Ready Team training will be held on September 19 & 20 at the Estes Park Conference Center. Visit cehaweb.com for information about applying.

New to this year's conference, CEHA will be offering an 8-hour OSHA refresher course on Tuesday, September 20. This refresher will be tailored to environmental health professionals. Registration is a steal at only \$40. Registration information can be found on CEHA's website.

Wednesday, September 21, opening day of the conference, will focus on emergency preparedness and children's environmental health. David L. Johnson, Ph.D. will deliver the opening keynote by detailing the important steps for preparing for a pandemic disease outbreak. Other highlights from Wednesday include first hand experiences from the tsunami relief effort and a demonstration of the state of the art Estes Park mobile decontamination unit.

Thursday's packed three-track schedule will include an onsite wastewater track, featuring Karen Mancl who will discuss the science behind soil's ability to treat wastewater. The food track will feature discussions on the implementation of no bare

hand contact policies, and beef and shellfish safety. Also offered on Thursday, a discussion on methamphetamine lab clean up, storm water controls, mosquito breeding abatement and the child care inspections.

Friday will also include three tracks. Choose from a mini workshop on funding sources, grant writing and grant administration, disease and epidemiology and more onsite wastewater topics. A first hand account of the devastating effects of West Nile Virus will highlight disease and epidemiology.

CEHA's exciting silent auction will conclude at the annual awards banquet. All proceeds benefit student scholarships. So show your dedication to the future of environmental public health by making a tax deductible donation representing your agency. And of course, we will have many networking activities such as the annual volleyball tournament and the environmental health knowledge bowl. Teams are already forming in anticipation of these exciting competitions.

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LETTER FROM THE CEHA PRESIDENT

On my recent trip to the NEHA Annual Education Conference in Providence, Rhode Island, I was able to enjoy delicious East Coast seafood and learn a lot about what NEHA is all about and get a better understanding of what it means to be an affiliate of NEHA.

As an affiliate president I was asked to attend various meetings throughout the conference. The Affiliate Presidents meeting was the first. Highlights from this meeting include:

- Discussion on the recent closing of an accredited environmental health program at Ferris State University
- Dilution of the REHS credential with the CFSP, and hiring of environmental health specialists without degrees
- Introduction of the student page on the NEHA website

An awareness campaign led by NEHA was requested by affiliates to bring environmental health into the limelight. The affiliates could take this campaign back to their regions and have a uniform message when trying to promote environmental health.

The NEHA Region 3 meeting included representatives from Wyoming, Montana, Colorado, Utah and of course our NEHA Region 3 Vice President, Tom Gonzales. At this informal meeting, the affiliates from Region 3 were able to share similarities and differences in how their associations operate and give updates on upcoming conferences. There was talk of a Region 3 conference in the future.

The NEHA Council of Delegates meeting included many reports on various topics and involved the affiliates by voting on policy positions and providing input on the focus group discussions where the topic this year was workforce development. During this meeting, the two candidates for the Second Vice President, Brian Collins (the current Region 5 Vice President) and Welford Roberts (a NEHA Technical Section Chair) were able to present themselves. Both candidates were very dedicated to the profession and would represent NEHA very well. Word is that Brian may visit Colorado during our AEC to campaign.

Needless to say, the week in Rhode Island was quite busy and very informative. I was recharged and ready to conduct business for CEHA. With only three months left in my term as President, I was glad that the Board of Directors allowed our President-Elect Therese Pilonetti-Hall to attend the conference as well. She will be way ahead having attended the meetings and understanding the relationship that we have with NEHA and will be able to take advantage of the many opportunities they have to offer.

Best,
Paul Klug
CEHA President

Child Care Health and Sanitation Seminar

Submitted by Therese Pilonetti-Hall, CDPHE

The Colorado Environmental Health Association presented a seminar on health and sanitation in child care centers on June 22 at a training facility generously offered by Ball Aerospace and Technology Group in Broomfield, Colorado. The course covered the recent changes to the child care regulations that became effective on May 30, 2005. New methods and tools for assessing children's immunization records during inspections were unveiled along with ideas for improving immunization rates in Colorado. Ensuring health and sanitation relative to the many unique circumstances involved with children's camps; including drinking water, wastewater, vector control and precarious outdoor activities such as horseback riding, target shooting and archery, were also discussed in detail. A representative from the Department of Human Services, Division of Child Care and nurse consultants from Qualistar Early Learning discussed their roles in ensuring healthy child care settings and shared ideas about how health department personnel can work collaboratively with them in this effort. Over 35 environmental health professionals representing eleven state and local health departments attended the course. Evaluations were very favorable and indicated a want and need for more training in this area. The course was digitally videotaped for later incorporation in a computer based training disc under development.



LETTER FROM THE NEHA REGIONAL VICE-PRESIDENT

Since my last update in March 2005, your NEHA Board of Directors met for the annual MAJOR meeting in Vail, CO. This two day meeting was jammed packed with lengthy discussions on REHS/RS credentialing, the Journal of Environmental Health, research and development programs, the 2003 audit, workforce development, H.R. 2699, the 2005 AEC, and several position papers.

Also since my last update, NEHA held its 69th Annual Educational Conference in Providence, RI. Over 1,500 Environmental Health Professionals and 103 exhibitors met for this annual event.

Your NEHA Board met on April 22-23 for its annual spring meeting in Vail, Colorado. There were a number of important items discussed that I want to convey to you.

We have signed a contract with Environmental Health Testing (EHT) to serve as our new testing partner for the professional REHS/RS credential, and the specialty CFSP credential beginning August 1, 2005. NEHA is even more excited to report that the examinations for these credentials will be updated, with new forms anticipated for March 2006!!

The Board approved a capital expenditure to purchase a new server and associated software to allow our accounting and membership databases to integrate with each other. The new system will allow the NEHA office to better facilitate budget reports and eliminate the need to manually re-enter data in each database.

The Workforce Development Committee submitted their report on strategies which the profession must concentrate on to develop the next generation of environmental health professionals. The Board unanimously approved the report. Implementation of the action items noted in this document will occur between now and the 2006 AEC, with updates to the Board on a regular basis.

House Resolution 2699, the "National Uniformity for Food Act," that was introduced in the US House last year has been re-introduced this year. However, there are several different versions of the bill, some of which do not contain the amended verbiage which protects state and local food protection programs from federal preemption of their regulatory authority. Upon request from AFDO, NEHA will participate in a coalition with AFDO to "discuss legislative language that would address [food]

Industry's concerns, while maintaining the States and Locals authority to take action against adulterated foods."

The Board approved a position paper written by NACCHO on "Basic Components of an Environmental Health Program." This paper was written in response to NACCHO's efforts to define the basic programs and services that would be expected from a local health department.

As always, remember your suggestions and involvement are important. Please feel free to email me at tgonzales@larimer.org

Kindest Regards,

Thomas R. Gonzales, R.E.H.S.
Region 3 Vice President
Representing Colorado, Utah,
Montana and Wyoming

Grant Writing for Environmental Professionals

Submitted by Mark McMillan, CDPHE

On Friday September 23rd, conference attendees will be treated to a half-day training on "Grant Writing for Environmental Professionals." This timely and very educational program will assist attendees in developing the best possible grant applications and in identifying various grant resources for the environmental health fields. The instructor, Sara Miller of the Colorado Department of Public Health and Environment, brings over 15 years of experience in grant development and management and has served on numerous state and national grant review committees. Please don't miss this rare opportunity to hone these important professional development skills.



Environmental Public Health Tracking: Why Should You Be Interested?

Submitted by Thomas Dunlop, Dunlop Environmental Consulting

Some of you might be aware of the Centers for Disease Control and Prevention program entitled: Environmental Public Health Tracking. For those of you who are not familiar with the project, this article will hopefully convince you that you must take notice. If you know of the program, you realize how important it is that local and state health agencies work collaboratively to become successfully involved.

About five years ago, Congress authorized \$17.5 million to initiate a surveillance program intended to associate various forms of illness with environmental exposures. Subsequent funding has followed, although not at the level originally proposed. The project was initially designed to be fully implemented ten years post inception. The goal of the program was to provide start-up funding for all fifty states and US territories to build capacity within the states to develop a network that will identify trends and functional response strategies. Initially, and continuing today, selected states and some large local health agencies such as Houston, Washington DC, and New York City were chosen through grant competition to receive funds. To add an academic connection to this project, grants were also awarded to a number of schools of public health and were titled "Centers of Excellence." The Centers are Johns Hopkins, Tulane, and Berkeley. As of this writing the three cities mentioned above, twenty-one states, and three Centers of Excellence have been awarded grants. There is a possibility that this ratio of cities, states and Centers may change with the next round of grants taking place within the next few months.

In order to add focus to this very large project, diseases such as childhood asthma, various forms of cancer, and birth defects were identified as illness of immediate interest. Keeping in mind the intent of the program to identify trends in disease occurrence as the result of contact with elements in the environment, the Federal government can only do so much. Without the direct assistance from states and local health agencies, the program will not be successful. The ultimate result of this work is to create a sustainable network in America that will provide health data that is transparent to all users. The value of this collection/surveillance system to environmental public health practitioners will be the tremendous wealth of information generated from thousands of sources. Predicting an illness outcome or trend linked to an identified environmental source near the beginning of an investigation will enable an early warning and the development of an intervention strategy. As we all realize, timing in an illness investigation can sometimes mean the difference between life and death. This program is yet another example of how closely tied the disciplines of environmental health and public health have become in recent years.

Colorado has not yet been awarded funds for this project, but the hope is that the State will be successful in the future. In order to enter this network we must all be ready to participate with enthusiasm and purpose. As the guidelines are currently written, the State of Colorado must be the applicant. However, there is encouragement being applied to CDC from organizations such as the National Association of County and City Health Officials to require evidence of collaboration between local and state health agencies before future grant money will be awarded. So the message here is in order to be competitive with the remaining unfunded states it will be of great benefit if we in Colorado can start thinking of ways to uniformly march forward as one voice to enter this program. The environmental public health field stands to gain tremendously from this initiative, but the citizens of Colorado stand to gain more. It really does not matter if you work in one of Colorado's large metro health departments or in the smallest city or county health department; your voice is the one that will make or break this program. I urge each of you to visit the following web site for more information in preparation for Colorado becoming a part of this national effort for better health: www.cdc.gov/nceh/tracking or contact me directly at Dunlopenv@aol.com

AEC Food Track

Submitted by Carla Opp

This year's Food Track at the Annual Education Conference will focus on ideas for change and how the food industry meets food safety requirements. Ever wonder exactly how that cow in the pasture eventually became the hamburger in the meat case? Want ideas to share with restaurant managers on how to institute good hygienic practices among their staff?

Attend the AEC food track this year to get answers to these and more food safety questions. Speakers to look forward to include John Scanga, PhD, Extension Meat Specialist, Colorado State University, Chef Jeff Mahoney, McCormick & Schmick's Seafood Restaurant, and Mario Seminara, FDA, Regional Food Specialist.

Presentations promise to provide attendees with some unique perspectives from the food industry and practical applications of food safety practices.



Update on Weld County Green Program

Submitted by Phil Brewer

The Greeley/Weld County green, waste recycling program that was the subject of my last CEHA newsletter article featured in the Spring 2005 issue of Point Source, is to be expanded.

In the last article, it was announced that Greeley and Weld County had cooperatively opened a “green” waste program that is similar to what is in Loveland and Cheyenne. The program is managed by a composting company that is using the “carbon” material to enhance the quality of the compost that it is preparing from manure stocks from feedlots and dairies. In the first three months of operations, the site has processed thousands of cubic yards of materials that otherwise would have been sent to the four privately owned landfills in Weld County or Denver, or been illegally deposited somewhere in the county or openly burned.

The operation of this recycling program should result in a diminished number of requests for open burning permits for disposing of this easily burned “waste” material.

The program, in conjunction with Waste Not Recycling of Kelim, CO, is arranging the installation of the necessary collection containers for recycling construction wastes, mixed paper products, plastics, cans, bottles and electronic equipment. The recycling of these additional materials will further reduce the need for space in our crowded landfills and result in the recovery of valued resources for manufacturing new products. This expanded program should result in less air pollution in the Weld County area.

My wife and I began, finally, to recycle all uncontaminated paper that she and I generate at home. We have a dedicated, wheeled Rubbermaid trash container into which we place junk mail, discarded bills, paper packing materials, paper food wrappers, waste paper from computer use, shredded personal papers, promotional booklets, luggage tags, used grocery lists, lists prepared of responsibilities to complete, and whatever else is paper. Between January 1 and May 23 of this year, we accumulated 206 pounds of this paper material that we recycled. Most of the material that was recycled was what we find in our mailbox each day. The amount of advertising/solicitation material that was sent through the post office was surprising to us. The 206 pounds did not include newspapers; we recycle

newspapers by a curbside service offered by Waste Management. We did not recycle any significant number of magazines in the first 5 months of the year.

That 206 pounds represents about 500 pounds per year!!! Just paper! Just one household of two adults!

“Resource” disposal is a tremendous problem for all of us. A Question: Is each member of CEHA doing all that is possible to properly conserve the resources that are represented in discarded materials? This is something we should think about during the hot summer days before the CEHA Annual Education Conference in Estes Park in September.

If CEHA has 300 plus members, and each member recycles 500 pounds of paper per year, 150,000 plus pounds (75 tons) of recycled paper could be gathered!

Presenters to Share Personal Experience, Methodology in Disease Outbreak Session

Submitted by Gina Masterson

The Colorado Disease Outbreak Update is scheduled for the morning of September 23 at this year’s Golden Anniversary Educational Conference in Estes Park. This session will inform attendees of the various disease outbreaks that have occurred throughout Colorado since the last conference. Some presenters and topics include:

- Monique Mull of Mesa County Health Department will present her personal experience with West Nile Virus.
- Katya Ledin will discuss the shellfish practices in Retail Food Establishments within the Tri-County Area.

The Colorado Department of Public Health and Environment will present the investigation of a multi-state Salmonella outbreak involving baby ducks.

The planning committee will also incorporate those unfortunate summer outbreaks, which have yet to occur, in this very informative agenda. Don’t miss this golden opportunity to learn from the experience and expertise of Colorado’s local health departments. It once again promises to be an educational session and one not to miss. Hope to see everyone there.



Investigating Environmental Influences of Asthma

Submitted by Mark Egbert, Arthur McFarlane and Mark McMillan, CDPHE

Introduction

Asthma is a serious, chronic condition that affects over 15 million people in the United States. This disease is characterized by lung inflammation and hypersensitivity to certain environmental “triggers” such as pollen, dust, humidity, temperature and various environmental pollutants (dust, ozone, etc.), among others. Colorado has a particular problem with the occurrence of this condition, but the reasons for this are not completely clear. Statewide there are an estimated 283,000 people with asthma, a figure that well exceeds national expectations.

Staff researchers at the Colorado Department of Public Health and Environment (CDPHE) have been working to bring clarity to any identifiable linkage between environmental conditions and asthma. The purpose of this project was mostly qualitative as the currently available data make it difficult to draw any broad scientific conclusions about cause-and-effect relationships between asthma and environmental triggers. Rather, the purpose of this project was 1) to examine available public health datasets pertaining to asthma; 2) to compile available data resources (health and environmental) to identify potential linkages between the two, if any, and data gaps; and 3) to meet with health professionals and members of the affected communities to identify their concerns and educate them about the effective treatment of asthma and asthma-related conditions.

Methods

Cases Data. The hospital release records for the years 1999, 2000 and 2001 were selected as the asthma case dataset. The data were obtained from the Colorado Hospital Association (CHA) and were provided as record level data (one record for each hospital discharge). Only cases having an asthma or asthma-related diagnosis code (ICD-9 493.XX) were selected for use in this investigation. The data contained the zip code of the patient’s residence, diagnosis code, date of release, age, and gender. In the spirit of privacy, no other identifying information was requested nor used for this investigative work.

Demographics Data. The 2000 United States Census, aggregated by Zip Code Tabulation (ZCTA), provided population data for this project. While not true in every case, for the purposes of this project, the zip code of residence provided in the case dataset and the ZCTA designation were assumed to be the same geographic area. Basic, descriptive charts were prepared from the CHA data for this study area.

Environmental Facilities and Conditions Data. A number of Geographic Information Systems (GIS) data “layers” were assembled from a variety of sources for mapping and evaluation purposes. These datasets included environmentally-regulated

industrial facilities, air quality monitoring data (when available), land use patterns, precipitation models, soil models, surface topography, etc.

Statistical Analyses: To test our hypothesis, SatScan was used to test the CHA dataset for clusters of cases with an asthma-related diagnosis. Each of the three years was run separately for the state as a whole. SatScan was used to test for “purely spatial” clusters. The Poisson model was used for this analysis. As stated above, the 2000 Census ZCTA data were used as the population, or “denominator,” for this test. The CHA cases data were used as the numerator.

Results and Discussion

Due to limited space requirements, prepared GIS maps and corresponding data tables are not included here (but are available upon request). However, CDPHE researchers noted that many ZCTAs in the Arkansas River drainage (Fremont, Pueblo, Otero, Bent and Prowers counties) have higher rates of asthma hospitalizations than the mean value for the state as a whole. (The same findings were seen in the Denver metro area and have been previously published).

Furthermore, statewide SatScan cluster analyses of asthma cases aggregated by ZCTA and by year support statistically significant ($p < 0.05$) clusters in the data for each of the three years, for both the Denver metro area and the Arkansas Valley. Although the clusters somewhat changed shape and extent from year to year, the clusters were found in approximately the same geographical locations. Finally, the descriptive summaries done for the study area were not found to be inconsistent with the state as a whole for age or gender. Only the rates of asthma were found to be higher than the statewide data.

As the primary objectives of this project were mostly qualitative in nature, it was not deemed necessary to obtain more detailed case data. However, this project did identify datasets that could be made available and which would provide a more comprehensive picture of asthma in this study area. In the initial stages of the investigation, the project area was identified from trends seen in earlier statewide mapping investigations of asthma-related diagnoses using the CHA dataset. These visual “trends,” along with anecdotal evidence and the expressed concerns of certain communities, warranted further investigation. Mapping and spatial analysis tools played an important role in this project. These tools were used to present a picture of asthma and the environmental conditions in this study area. These tools were also used to analyze and to quantify the trend observed in the statewide CHA map.

Given the scope of this investigation, the project team did not expect to identify a specific “smoking gun” cause-and-effect relationship between asthma and air pollution and/or other



environmental conditions. Rather, through this initial effort the project team hoped to accomplish the following tasks: 1) Reach any reasonable conclusions that could be drawn from an analysis of existing data resources; 2) Identify methods that could be applied to this problem and retest the hypothesis once better data resources became available; 3) Identify geographical areas that may need further specific study, either due to environmental quality concerns, the number of asthma cases that require hospitalization, or both, and; 4) Prepare a series of maps that describe the environmental conditions and the locations of areas' industrial facilities.

While this analysis does not demonstrate a conclusive cause-and-effect relationship, the fact that this statistically significant trend occurs in each of these three consecutive years is intriguing. It is possible that the cluster in the study is a result of the same individuals being repeatedly admitted to area hospitals. It is possible too that this cluster is a result of regional differences in the way asthma is being diagnosed and/or due to communities' access to health care, an identified concern of the CHA data. CHA data do not represent all asthma cases, just those cases requiring hospitalization. Thus, it is possible that a much different picture of asthma in Colorado would emerge if all people with asthma were examined, using a different criteria data set (emergency department visits, pharmaceutical usage, missed school/work days, etc), regardless of their ability to access traditional health care modes. Furthermore, important unknowns within these identified communities (individual exposure to environmental tobacco smoke, socio-economic status of individual cases, etc.) remain. These issues will be significant considerations for further analyses/investigations.

Conclusion

Due to the scope of this investigation, this project was deemed successful and provided a number of very distinct opportunities to all parties involved.

Within CDPHE, the project was an opportunity to work across programs and to assemble a project team that included members of both health and environmental programs. As the project team worked together, a more complete picture of asthma emerged for the study area and although no specific connection could be made between asthma and specific environmental triggers, the team was able to identify very distinct and statistically significant clusters in the available asthma-related case data.

The communities in the study area received the best picture of asthma in their community that CDPHE could provide. They, in turn, were able to identify a number of very specific needs and concerns within their communities.

Finally, new data resources and research opportunities were identified by both CDPHE and by the communities during the course of this project. If these opportunities are fully explored, there is a very good chance that they will lead to a vastly improved understanding of asthma and asthma-related conditions in this area.

The next step is for CDPHE and these communities to expand on this cooperative, multifaceted approach to understanding and addressing asthma in the Arkansas River drainage.

This project was funded by the U.S. Environmental Protection Agency in order to examine the occurrence of asthma and the distribution of environmental triggers throughout Colorado.

OSWS Speakers to Discuss Model Performance Codes, Soil Treatment, Credentialing, and Performance Standards.

Submitted by Thomas Gonzales, Larimer County Dept. of Health & Environment

CEHA has partnered with the Colorado Professionals in Onsite Wastewater (CPOW) to organize a dynamite onsite wastewater systems workshop at this year's AEC. Topics to be covered in the sessions on Thursday, September 22 and Friday, September 23 include:

- NOWRA Model Performance Code Presented by Mike Corry, NOWRA Model Performance Code Committee Chairman, Madison WI (sponsored by CPOW)
- How Does Soil Treat Wastewater? Presented by Karen Mancl, Ph.D., Professor, Food, Agriculture, and Biological Engineering, The Ohio State University, Columbus OH
- New USEPA Handbook for Management of Onsite and Decentralized Wastewater Systems Presented by Douglas Minter, Team Leader, USEPA Region 8, Denver CO
- Wastewater Discussion: Policy #6 and Current Onsite Wastewater Issues Presented by Kent Kuster, Environmental Protection Specialist, Colorado Department of Public Health and Environment, Denver, CO.
- Promoting the Onsite Industry Through Credentialing and Certification Presented by Christl Pokorney, OSWS Project Coordinator, National Environmental Health Association, Denver CO
- Water Hydrology Model Presented by Dan Collins, REHS, Tri-County Health Department, Denver CO
- Colorado School of Mines – Research Presentation Presented by Kathryn Lowe, Senior Research Associate, Colorado School of Mines, Golden CO
- Local Case Studies Presented by local health departments.

Due to increased demand from members, the Annual Education Conference planning committee has invested more resources in developing an informative and relevant on-site wastewater track this year. This track is designed to provide up-to-date information on OSWS regulatory developments and industry technology.



Latex Reactions in the Modification Industry: Understanding Why They Occur and How Best to Prevent Them

*Submitted by David Vidra and Derek Lowe, Health Educators, Inc;
Reprinted by permission from the Association of Professional Piercers
quarterly publication, The Point, Issue 17, February 2001*

As within the medical community, the piercing and tattooing industries have seen a large increase in the number of practitioners who are either sensitive or allergic to latex gloves and other products. This increase in latex allergies can be attributed to several factors. One of the primary reasons for the increase in the number of individuals allergic to latex is the institution of Universal Precautions. Universal Precautions has resulted in the increase in the number of latex gloves being used and being manufactured. A secondary factor is the manufacturing process itself and the quality of latex used in the manufacturing process. There are several different types of reactions that can occur. It is important to understand the types of reactions in order to determine if the reaction is truly a reaction to latex or if the reaction is due to some other factor. Determining the cause of the reaction makes it possible to determine what course of action will prove to be most beneficial. The following are the most common types of reactions:

A. Irritant Contact Dermatitis

Typical symptoms of Irritant Contact Dermatitis are dry, flaky, irritated areas of skin, most commonly the hands. This condition can be caused by frequent hand washing and drying as well as not properly drying hands after hand-washing. In addition, exposure to powders used on latex gloves can also contribute to this type of reaction. It is important to realize that this type of reaction is not a true allergic reaction.

B. Allergic Contact Dermatitis (delayed hypersensitivity)

Symptoms for this type of reaction often resemble a reaction to poison ivy. The skin will often develop oozing skin blisters. This condition often appears 24-48 hours after exposure and may spread to areas that do not come in contact with latex. This condition is most commonly caused by chemicals added to the latex during harvesting, processing or the manufacturing process. It is important to realize that some of the same chemicals used in processing natural rubber latex gloves may also be used in processing synthetic rubber gloves such as Nitrile.

C. Latex Allergy (immediate hyper-sensitivity)

The types of symptoms that appear due to this kind of reaction vary depending upon the level of sensitivity. Reactions may vary from mild (severe skin red-ness, development of hives and/or itching) to more severe (difficulty breathing, coughing, wheezing, sneezing, runny nose, and/or scratchy throat). In some severe cases, a life-threatening shock may develop. Immediate hypersensitivity reactions typically occur within minutes of

exposure to latex. This type of reaction occurs as a result of a direct allergy to latex proteins. It is often difficult to determine what level of exposure will cause this type of reaction. In addition, this type of reaction is something that often develops over time, as the individual is frequently exposed to latex. The issue of reactions to latex gloves in our industry has become an issue which can no longer be ignored. Reactions of this nature have the potential to affect our ability to work safely or to work at all. It is important to be able to recognize these types of reactions and to be able to prevent the likelihood of such reactions occurring.

One of the most effective ways to prevent allergic reactions to latex is to minimize the use of latex products, especially gloves. One common and very effective substitute for latex gloves are gloves made of Nitrile. Nitrile is a synthetic rubber that contains no natural rubber latex. Nitrile provides a barrier protection equal, if not better, than that of latex. However, as was mentioned previously, keep in mind that Nitrile is still a form of rubber, and as such, may still be processed using some of the same chemicals used to process latex gloves. If latex gloves are used, the following precautions can be taken to reduce the occurrence of various reactions:

- Use latex gloves which are powder-free. The powder can be absorbed into the skin, carrying with it latex proteins. While powdered-free latex gloves may be slightly more expensive, they can greatly reduce the potential for reactions. In addition, if hands are dried thoroughly after washing, donning of powder-free latex gloves is no more difficult than donning latex gloves that are powdered.
- Wash your hands both before and after the procedure. This will help remove latex proteins that become embedded in the skin.
- Wash your hands using a mild soap and dry them thoroughly.
- Keep your skin in good condition using lotions and/or creams. There are many different products available which are designed specifically for the purpose of maintaining the health of the skin on the hands. Be sure that any hand lotions used are not oil-based, as the oil will break down the latex, increasing your potential for exposure to pathogens as well as increasing the amount of latex absorbed into your skin.



2005 Annual Education Conference

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The conference would not be possible without the presence of CEHA's generous sustaining members, many of whom will be on hand with exhibitor booths. Be sure to show your support for these organizations, as well as learn more about the innovative products and the services they offer.

Expect a jam-packed agenda, with excellent networking potential and, of course, tons of fun. Visit cehaweb.com for the latest and greatest on conference information and to volunteer on the planning committee.

CEHA CSU Scholarship Awarded to Amanda Draine

Each year, CEHA awards a scholarship or scholarships to student(s) pursuing a degree in the field of Environmental Health. In April, this year's scholarship of \$1000 was awarded to Amanda Draine, a rising junior at Colorado State University who is pursuing a degree in Environmental Health at the College of Veterinary Medicine and Biomedical Sciences. Ms. Draine is interested in pursuing a career in Public Health and Epidemiology.

Ms. Draine graduated from high school in 1996 from Jackson Senior High School in Jackson, Minnesota. She has been a resident of Colorado for over three years. Her expected graduation date is May 2007.



Visit www.cehawe.com for information on our
Sustaining Members



Auto-Chlor System
 5650 Pecos Street
 Denver, CO 80221



Orengo Systems, Inc
 814 Airway Ave.
 Sutherlin, Oregon 97479



Biological Mediation Systems, Inc.
 PO Box 8248
 Fort Collins, CO 80526



OtterTail Environmental, Inc
 1045 N Ford Street
 Golden, CO 80403



Front Range Precast Concrete, Inc.
 5439 N. Foothills Hwy
 Boulder, CO 80302



Peak to Peak Sales
 7126 S. Willow
 Englewood, CO 80112



Garrison Enterprises, Inc.
 PO Box 690426
 Charlotte, NC 28227



Regional Institute for Health and Environmental Leadership
 2211 South Josephine Street
 Denver, CO 80208



Geoflow, Inc
 506 Tamal Plaza
 Corte Maders, CA 94925



Rocky Mountain Water Env. Association, Inc
 3401 Quebec Street, Suite 4050
 Denver, CO 80207



Glo Germ
 P.O. Box 186
 Moab, UT 84532



SCG Enterprises, Inc.
 4420-B Allison Street
 Wheat Ridge, CO 80033



Infiltrator Systems, Inc
 5311 Blue Bonnet Ct.
 Castle Rock, CO 80109



Valley Precast, Inc.
 P.O. Box 925
 Buena Vista, CO 81211



Integrated Water Services, Inc.
 636 Cheyenne Drive,
 Suite 10
 Fort Collins, CO 80525



Weston Solutions, Inc.
 143 Union Blvd, Suite 810
 Lakewood, CO 80228



National Swimming Pool Foundation
 224 E. Cheyenne Mt. Blvd
 CO Springs, CO 80906



CEHA MEMBERSHIP APPLICATION 2005

Classes of membership

Active: Any person who is employed in any environmental health field, any registered environmental health specialist or any individual with a general interest in the objectives of CEHA is eligible to become an active member **\$25**

Student: Any full time college or university student working toward a degree with an interest in the association and its objectives is eligible for student membership **\$10**

Life: Any person who is an active member for at least one year is eligible for life membership. A life member pays a prescribed membership fee which will entitle them to all the rights of membership for life without paying any further dues. A life member shall receive a certificate recognizing their life membership **\$250**

Retired: Any person who has been an active member of CEHA for five or more consecutive years, and who has retired is eligible for retired membership **\$0**

Sustaining: Any business, company, corporation or association of such firms with a general interest in CEHA and its objectives, and which has a desire to contribute to its success shall be eligible for sustaining membership. **\$225**

Please complete the bottom portion of this form and return with payment to:

**Colorado Environmental Health Association
P.O. Box 460726
Glendale, CO 80246**

Thank you for your interest in being a CEHA member. Membership will assure that you receive the CEHA Point Source Newsletter; membership registration rate to all CEHA training and CEHABroadcast email messages with timely information. If you have any questions concerning membership, please contact Paul Klug at (303) 692-3633.

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- | | | | |
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| <input type="checkbox"/> New Membership | <input type="checkbox"/> Renewal | <input type="checkbox"/> Active | \$25 |
| | | <input type="checkbox"/> Student | \$10 |
| | | <input type="checkbox"/> Life | \$250 |
| | | <input type="checkbox"/> Retired | \$0 |
| | | <input type="checkbox"/> Sustaining | \$225 |

I would like to make a tax deductible contribution to the CEHA Scholarship fund \$ _____

Total enclosed \$ _____

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COLORADO ENVIRONMENTAL HEALTH ASSOCIATION



Our Mission:
"To promote environmental health as a profession which strives for continual improvement in environmental health quality and the growth of individual professionalism."