

Adult Down Syndrome Center of Lutheran General Hospital

Newsletter

November 1997

New phone numbers

During the past year we have enjoyed our new home at 1255 Milwaukee Ave., Glenview, IL 60025. In September we had a new phone system installed. Please note our new numbers:
phone: 847-795-2303 and
fax: 847-795-2377.

Staff Changes

We are very happy to welcome **Laura Iatropoulos**, CMA, to our Center staff. Laura is providing our nursing services and helps organize the clinical services. (Donna Mirro left us in September to take a job closer to home).

Ann Jonaitis started working for the National Association for Down Syndrome (NADS) this fall. She is a program coordinator for NADS and she works out of the NADS office located at the Adult Down Syndrome Center. The new programs Ann is working on will help adults and teens with Down Syndrome to stay healthy.

Dr. Steffi Gratigny will be leaving us sometime this winter or spring. She and her family are moving to Colorado. We are sorry to see her go but wish her well in the land of thin air and thick snow.

New Office Hours

Starting in mid-December, Brian Chicoine, MD and Dennis McGuire, Ph.D., will see patients for full evaluations on Monday, Thursday and Friday mornings. They will see patients for routine or follow-up care on Monday, Thursday, and Friday afternoons as well as Tuesday mornings. In addition, Dr. Gratigny will continue to see patients on Thursdays from 9 AM to 5 PM until she leaves. Nancy Halligan (Reception) and Laura Iatropoulos are available Monday through Friday 9 AM to 5 PM.

Programs

A Mentoring program facilitated by the Center and NADS is now up and going. A teen or adult with Down Syndrome is linked for a one-on-one match with a trained volunteer, often a parent of someone with Down Syndrome. Matches are based on where the participants live, common interests and personalities. The goal is for friendship to develop through conversations and shared activities. Mentors or protégés share activities such as going out to eat or attending shows or sporting events. Those who are already participating are enthusiastic about their new friends. Ann Jonaitis is now making matches in collaboration with Karen Cornell, or Family Advocate.

Influenza shots

Influenza (flu) shots are recommended for all persons over age 65 and people with chronic diseases such as heart disease, lung disease, diabetes mellitus and other metabolic diseases. It is also indicated for people who live with someone with a chronic illness. People who live in a group home or a chronic care facility should also get the flu shot as should the staffs of these facilities. In addition, we recommend it for anyone who works in a workshop and the staffs of these facilities. The best time to get the flu shot is in October or November but you can get it as late as February or even March.

Allergies to eggs or to a previous flu shot are reasons not to get it. If you have a temperature greater than 100 F than you should delay the shot. However, it is all right to get the shot if you only have a minor infection as an upper respiratory infection ("a cold"). If you haven't had your shot, now is the time. Ask your doctor if it is for you.

Additional Immunizations

It is recommended that all adults receive a **Diphtheria-Tetanus** shot every ten years.

The pneumonia vaccine (**Pneumovax**) is recommended for all persons over age 65 (once in a lifetime) and persons who have chronic diseases (every 5 years). It is also recommended for those who live in a group home or work in a workshop. It is not recommended for those who are less than 65 or don't have a chronic illness.

We recommend **Hepatitis B** vaccine for all of our patients who live in a group facility or who work in a workshop. Hepatitis B vaccine is a three shot series (the second shot is given 1 month after the first and the third shot is given 6 months after the first). We recommend drawing a blood test 4 to 6 weeks after the third shot to test for Hepatitis B surface antibody to confirm immunity (evidence that the immunizations have worked appropriately).

Health Recommendations

We recommend annual blood tests for thyroid function. Symptoms of hypothyroidism include: constipation, dry skin, coarse hair, weight gain and general slowing of body functions. These symptoms may be difficult to detect as signs of hypothyroidism because many of our patients have these symptoms even without hypothyroidism. Therefore, the annual blood test helps find a problem that may be easily missed if we rely on symptoms alone. Untreated hypothyroidism can cause depression and dementia as well as many other health problems. Nearly one-third of our patients have hypothyroidism (which is being corrected with a thyroid tablet). Hyperthyroidism (overactive thyroid) is also more common in persons with DS, although not near as common as hypothyroidism. One percent of our patients have been diagnosed with hyperthyroidism. This can also be detected with the thyroid blood tests.

We will discuss more of our health promotion recommendations in future issues.

