



Medical Supplies for Care at Home Since 1957

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In This Issue...

Page 2 Healthy at Home:
Preventing
Enteral Misconnections

Seasonal Tip:
Kick Candy Calories
to the Curb!

What's New at Shield
Caregiver Story Contest

Page 3 **Pediatric Corner:**
Cow's Milk Allergy

Test Your Knowledge

Featured Product:
Changes to Neocate®
Infant DHA/ARA

Page 4 **Ask the RD:**
Why is Gum Acacia
Added to Tube Feeding
Formula?

Success Stories
Meet Our RDs



Feature Article

October is National Down Syndrome Awareness Month



One in almost 700 U.S. babies is born with an extra copy of chromosome 21, the condition known as Down syndrome. This additional genetic material causes the physical traits characteristic of Down syndrome: low muscle tone, small stature and an upward slant to the eyes.

There are three types of Down Syndrome:

1. In Trisomy 21, the 21st chromosome of either the egg or sperm fails to separate before or during conception. The extra replication occurs in every cell of the body as the embryo develops. This type accounts for 95% of cases.
2. In Translocation, part of chromosome 21 splits off and attaches to another chromosome. This type accounts for 4% of cases.
3. In Mosaicism, the extra chromosome is replicated in only one cell division, resulting in fewer physical traits characteristic to Down syndrome. This type is responsible for 1% of cases.

Truths about Down syndrome

- Average life expectancy for people with Down syndrome is approaching that of peers without the condition.
- In 99% of cases, Down syndrome is completely random, rather than hereditary, and the only known factor that increases risk is maternal age.
- Most people with Down syndrome have only mild to moderate cognitive delays. Many participate in mainstream academic programs and earn regular high school diplomas and college degrees.

Down Syndrome Etiquette

- Down syndrome is a syndrome or condition, not a disease.
- People "have" Down syndrome. They do not "suffer" from it.
- Always refer to people with Down syndrome as people first, as in, "a child with Down syndrome." Avoid saying things like, "Down syndrome child" or "he has Down's."

We Still Believe There's No Place Like Home

Healthy At Home

Tips for Keeping Your Tube-fed Patients in the Home



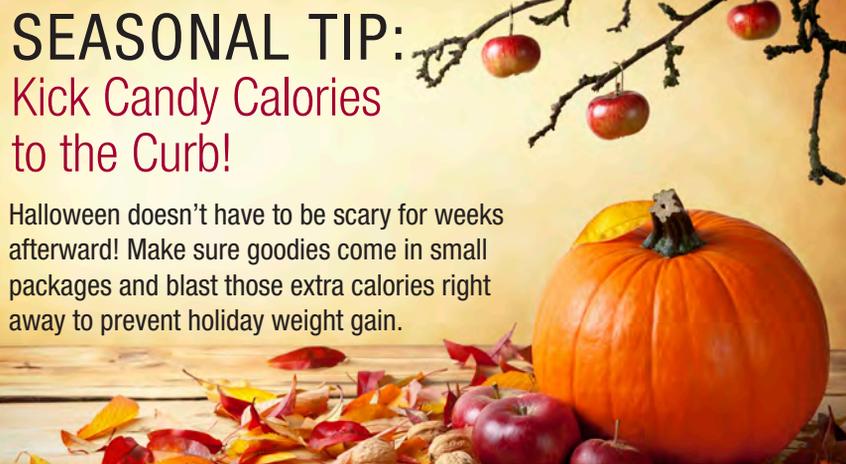
Preventing Enteral Misconnections

Avoid enteral misconnections by using enteral devices that are only compatible with other enteral devices.

For example, use oral or slip tip syringes to deliver medications and water via the feeding tube instead of luer lock syringes.

SEASONAL TIP: Kick Candy Calories to the Curb!

Halloween doesn't have to be scary for weeks afterward! Make sure goodies come in small packages and blast those extra calories right away to prevent holiday weight gain.



Candy	Calories	Sugar (g)	Fat (g)	Activity to burn it off
10 Candy corn pieces	75	17	0	9 min, jogging
1 Fun-size candy bar	80	8.5	4	7 min, swimming
1 Peanut butter cup	105	10	6.5	16 min, cycling
1.7 oz Peanut M&Ms	144	14	7.5	16 min, jogging
1 mini Kit Kat bar	42	4	2	12 min, walking

What's New & Exciting?



13th Annual Story Contest

Featuring Celebrity Judge, Sandra Mitchell
CBS 2/KCAL 9 News Anchor

What Makes
CAREGIVING
REWARDING

SHARE YOUR STORY FOR A CHANCE TO WIN \$500

Shield HealthCare recognizes the demanding roles and responsibilities of today's caregivers. Whether you are a family caregiver or a home health professional, we would like to hear your story about "What Makes Caregiving Rewarding?" Submit your story by November 30, 2013 for a chance to win!

Top 3 Story Winner Prizes

- \$500 American Express Gift Card
- One-year subscription to Today's Caregiver Magazine
- Commemorative Wall Plaque

Top 5 Runner-up Prizes

- \$150 American Express Gift Card
- One-year subscription to Today's Caregiver Magazine

Visit shieldhealthcare.com/caring to enter!



Shield Enteral Nutrition Support Program A d v a n t a g e

- Pump setup within 4 hours of discharge in most cases
- Direct dietitian-physician communication
- Wellness checks and quarterly nutrition screenings
- Clinical and nutrition in-services for your staff
- Fewer hospital visits for your patients
- On-staff RDs available for questions and troubleshooting

PEDIATRIC CORNER

Cow's Milk Allergy

Cow's milk allergy is the most common food allergy in infants and involves an immune system response to proteins in cow's milk. Symptoms include facial angioedema, nausea and vomiting, atopic eczema, blood in the stool and respiratory problems. Diagnosis is difficult and often must include more than one modality, including skin prick or atopic patch testing, serum specific IgE and oral food challenge.

In the case of a true cow's milk allergy, the only way to prevent symptoms is to avoid all cow's milk protein ingredients. Care must be taken, however, to provide a nutritionally adequate diet once these foods are removed. An amino acid-based formula, such as Neocate[®] Infant DHA/ARA is indicated in infants with severe symptoms, failure to thrive, high risk of anaphylaxis, multiple food allergies or if symptoms persist despite milk protein avoidance.



Featured Product: NEW & IMPROVED NEOCATE[®] INFANT DHA/ARA

Neocate[®] Infant DHA/ARA is a hypoallergenic, amino acid-based, nutritionally complete infant formula. It is indicated for the dietary management of cow milk allergy and other food-allergy-associated conditions. Nutricia has recently updated this formula. Some of the changes are as follows:

Soy oil removed: Soy oil was replaced with canola oil.

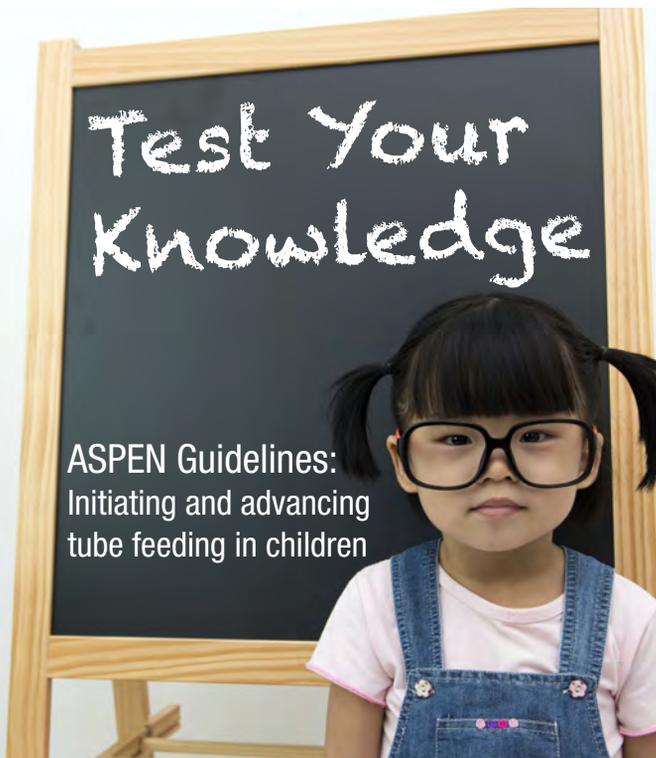
Optimized nutrient levels: For example, amounts of vitamin D as well as DHA and ARA were increased.

Decreased osmolality: Fewer particles in solution may improve gastrointestinal tolerance.

Increased calorie and can yield: Each 400-gram can now yields 1932 calories and 97 fluid ounces.

Updated mixing instructions: Caregivers will now add water first, then powder.

Altered scoop size and color: Caregivers should discard the old scoop to avoid mixing errors.



1. In general for children, bolus and gravity-controlled feedings may be started at what percent of the goal volume?

- a. 25%
- b. 50%
- c. 100%

2. In general for children, pump feeding with a full strength, isotonic formula may be started at which rate?

- a. 1-2ml/kg/hour
- b. 10-20ml/kg/hour
- c. Goal rate

3. In general for children, pump feeding with a full strength, isotonic formula may be advanced by which of the following?

- a. Advance by 0.5-1ml/kg/hour every 6-24 hours as tolerated
- b. Advance by 10-20ml/kg/hour every 8-12 hours as tolerated
- c. Advance by 0.4-1ml/kg/hour every 2 days as tolerated

Answers on the back cover

Meet Your Local RDs...



Trina Boland
MS, RD, LD



Amy Long Carrera
MS, RD, CNSC, CWCMS



Rachel Davis
MS, RD, CSP, LD, CWCMS



Mary Kuehl
MS, RD, CNSC



Lisa Osowski
MS, RD, LD, CWCMS



Lisa Zaccaro
RD, CWCMS

Ask the RD

Q. What is “gum acacia” and why is it in my tube feeding formula?

A. Gum acacia is derived from the sap of acacia trees. It’s used as a thickening agent and an emulsifier to keep ingredients together. It’s also a source of prebiotic fiber, which provides fuel for the good bacteria that reside in your colon. You may also find it in ice cream, pudding, candy and cereal.

RD Success Stories

Shield HealthCare RDs actively support the local healthcare community!



Lisa Osowski, our Illinois RD, presenting
“Innovative Concepts in Nutrition”
 at Ingalls Memorial Hospital/
 Ingalls Health System

Test Your Knowledge ANSWERS

1. a.) In general for children, bolus and gravity-controlled feedings may be started at 25% of the goal volume divided into the desired number of daily feedings. For example, if the goal volume is 50 ounces per day to be given in 6 feedings, start with 2 ounces 6 times daily ($50 \times 0.25 = 12.5$ ounces per day divided by 6 feedings = 2 oz/feeding). Increase the volume by 25% per day as tolerated, divided equally between feedings. Using the example above, increase each feeding by 2 ounces (12.5 oz divided by 6 feedings) until the child is taking 50 ounces per day.

2. a.) In general for children, pump feeding with a full strength, isotonic formula may be started at 1-2ml/kg/hour. Preterm, critically ill or malnourished children at risk of refeeding syndrome may require a lower initial volume of 0.5-1ml/kg/hour.

3. a.) In general for children, pump feeding with a full strength, isotonic formula may be advanced by 0.5-1ml/kg/hour every 6-24 hours as tolerated until the goal volume is achieved.



References:

National Down Syndrome Society <http://www.ndss.org>
 Bankhead R, et al. A.S.P.E.N. Enteral Nutrition Practice Guidelines. J Parenter Enteral Nutr. 2009
 Merck Medicus: Cow’s Milk Allergy: Common but Often Missed <http://www.merckmedicus.com/e-learning/Cows-Milk-Allergy-CMA-Common-but-often-missed>

Call us today, we’re here to help!

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