



NURSE NETWORK

VOLUME VIII ISSUE II


SPRING 2000

Perinatal Social Work Network 1st Annual Conference

The Perinatal Social Work Network will hold its First Annual Conference on May 24th, 2000 at the NJ Department of Education, Gloucester County Office in Sewell, NJ from 8:30 am to 1:30 pm.

The effects of maternal substance abuse on the fetus, identifying a child appropriate for early intervention and behaviors warranting evaluation and intervention will be the subjects highlighted at *The Pathway of Social Services for the Drug Exposed Child*. The program will help social workers understand fetal drug exposure and to share resource information.

The presenters are Charlotte Furey, MSN, ANP, CNS-C, Nurse Practitioner - Psychotherapist from UMDNJ-SOM; Patty Green, LCSW, Clinical Coordinator of the Early Intervention Program from Our Lady of Lourdes Medical Center; and Linda F. Moore, MA, SAC, Substance Awareness Coordinator and Assistant Counselor from Evesham Township Public School District.

For more information call the Cooperative at (856) 665-6000 or visit us at www.snjpc.org. 

SNJPC's WIC Breastfeeding Initiative Brings Together Area Lactation Consultants



Betsy Corcoran and Dr. Benjamin Rosenblum listen in on the discussion at SNJPC's WIC Breastfeeding Initiatives breakfast.


The Southern New Jersey Perinatal Cooperative's WIC Breastfeeding Initiative sponsored a first time event on February 9, 2000 that brought together two influential groups with the mutual goal of supporting breastfeeding -- the region's hospital-based lactation consultants and the WIC Regional Breastfeeding Initiative staff.

The featured speaker was Lori Feldman-Winter, MD, NJ AAP Breastfeeding Coordinator, speaking on *Implementing the American Academy of Pediatrics Policy Statement on Breastfeeding in the Post-partum Setting*. Chris Mulford RN, IBCLC, the WIC Breastfeeding Initiative Coordinator, said "This topic was common ground for both the hospital based lactation consultants and the WIC Breastfeeding Initiative staff. It highlighted the opportunities for us to work together to reach the Healthy People 2010 goals regarding increasing breastfeeding rates."

As a follow up, the development of a more formal regional

breastfeeding coalition is planned, as well as plans to make the breakfast an annual event.

The Southern NJ Perinatal Cooperative and LaCTo (Lactation Consultants Together) used this opportunity to recognize Shirley Himeback, IBCLC for her efforts to mentor lactation consultants and her commitment to mothers and babies of southern New Jersey. As the first coordinator of SNJPC's WIC Breastfeeding Initiative, Shirley modeled the concept of WIC Breastfeeding Initiative staff serving as breastfeeding resource persons for other healthcare professionals. Shirley was "....totally surprised by this recognition" and thanked all those present for their "continuing efforts in supporting women in their choice to breastfeed."

The breakfast was made possible by the generous support of Medela, Inc. Thanks also to LaCTo, LLL of Vineland and the CADD program of Salem County Vo-Tech for their contributions. 

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New Team Chosen for Revised NJ Statewide Maternal Mortality Review Program

The New Jersey Department of Health and Senior Services (NJDHSS), announces a new team for the restructured New Jersey Statewide Maternal Mortality Review Program.

The NJDHSS is implementing a restructured statewide, maternal mortality case review process that will consist of a multidisciplinary team and a system which will ensure cohesive data collection and response. Although a rare event, maternal death can be indicative of problems regarding access and delivery of medical services.

This new process will expand the review team to include representatives from a variety of disciplines and evolves from a more traditional medical review to one that incorporates analysis of psychosocial, community and medical issues. Trend analysis of data gathered through the review process will be utilized for continuous quality improvement activities. This new process is modeled after a similar program in Florida called the Pregnancy Associated Mortality Review Program.

"The Statewide Maternal Mortality Review Program is using a new process that utilizes a multidisciplinary team to review cases. We are looking for trends in the collected data that will lead to quality improvement activities. It is an interesting and educational process. I look forward to representing Public Health Nursing and to working with all members of the review team," commented new team member Nancy Ivey, RN, BSN, Public Health Nurse Supervisor, Community Health Service of Vineland.

The Case Review Team,

coordinated by the Central New Jersey Maternal and Child Health Consortium, will meet 4-6 times a year. The key elements to be incorporated into the review process are:

- improved reporting of maternal deaths, including birth-death certificate matching strategies
- consistent methods of data

abstraction

- multidisciplinary case review team
- integration of the CDC's expanded definition
- trending of data from year to year
- integration of findings into quality improvement activities

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Reporter for Grossberg-Peterson Homicide Case Keynote Speaker for Teen Pregnancy Conference

New Jersey Press Association's Journalist of the Year 1998, Doug Most, will be the keynote speaker for the Network for Family Life Education, Rutgers University School of Social Work and SNJPC's Ninth Annual Teen Pregnancy Prevention Conference in October.

Doug Most covered the entire Amy Grossberg-Brian Peterson infant homicide case. He wrote 150 news articles and a book entitled, *Always in Our Hearts: The Story of Amy Grossberg, Brian Peterson and the Baby They Didn't Want*.

The story of college freshmen, Amy Grossberg and Brian Peterson is tragic and disturbing. An attractive couple from the affluent suburb of Wyckoff, NJ, Grossberg and Peterson were trying to hide Grossberg's pregnancy when they went to a Delaware motel where Grossberg gave birth and in a panic, the baby was disposed of in the motel dumpster.

The Grossberg-Peterson case is a useful example for the fall conference, *Breaking the Conspiracy of Silence: Communicating More Effectively with Teens About Sex and Pregnancy*, which focuses on the

communication failure Most attributes to the Grossberg-Peterson tragedy. Most describes the breakdown in communication between Amy Grossberg and her mother. Grossberg was so afraid of her mother finding out about her pregnancy that she just let it go on, hoping it would go away.

"This was hardly the first tragedy stemming from teenagers and parents failing to communicate... but perhaps it was the most extreme example of what can happen when the bond between parent and child breaks down," commented Most. "Amy and Brian's saga is a new variant to an old story. It's a story, it seems, that must be told over and over until parents and their children finally learn to talk to each other, not just about the easy subjects of school, friends and sports, but about the awkward topics such as sex." Adds Most, "I wrote it to start a dialogue, to help parents recognize the critical need for open, honest, supportive communication with their children."

The Network for Family Life Education seeks to decrease teen pregnancy by increasing education, networking and resources to both teens and parents.

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Cooperative Sponsors 1st Conference on Pediatric Oral Health

Good oral health has a major influence on a child's overall health. The importance of the need for frequent oral health assessments, anticipatory guidance, prevention and early intervention among childbearing women, infants and children can not be stressed enough. Health professionals are in a position to combine health promotion, preventative measures and early intervention.

On June 6th the Southern NJ Perinatal Cooperative will present a new program, *Protecting Oral Health from Pregnancy to Puberty* at the Coliseum in Voorhees, NJ.

"The problem of children with poor oral health is everyone's problem and the U.S. Surgeon General views the oral health of children as a significant public health issue," said Debra Asselta, RN, BS, Pediatric Education Coordinator of the Southern NJ Perinatal Cooperative. "Its important for all health care professionals to look for and recognize the signs of poor oral health and its impact on a child's overall health, especially if a child does not have a regular dental provider."

The program will focus on oral health protection, including vulnerable times for women -- the association of periodontal disease with the development of heart disease; premature, underweight babies; and how oral health is compromised by diabetes, respiratory diseases, stroke and bacteremia. Also highlighted will be the various dental specialties and the availability of insurance for children without coverage.

For more information on this program call (856) 665-6000. N

Government Revises Ruling on Dietary Supplement Use for Pregnant Women

The federal government is backing off a new regulation that would have allowed the use of dietary supplements to treat morning sickness and leg swelling without proof the products are safe for unborn babies.

The Food and Drug Administration told dietary supplement manufacturers they cannot claim that their products treat morning sickness or pregnancy-related leg swelling until the issue is settled.

"As herbal remedies and dietary supplements become more popular, we are seeing an increase in pregnancy exposure questions," comments Kathe Stepanuk, RN, MSN, Pregnancy Healthline Coordinator for the Southern NJ Perinatal Cooperative. "Few studies have tested the safety of using these products during pregnancy and their effects on the fetus are often unknown. We encourage avoiding use of these products during pregnancy, particularly during the first trimester."

Early this year, the FDA eased restrictions on the claims dietary supplement companies can make about how their products affect people's health. Birth defects experts were stunned to see those two pregnancy-related conditions on the list of claims that otherwise unregulated dietary supplements could now advertise.

That rule reversed current medical policy and "has the potential to put pregnant women and their offspring at serious risk," one prominent pregnancy expert told the FDA, as doctors and consumer advocates began a string of protests.

According to a 1994 law, dietary supplements do not

undergo government scrutiny and in most cases undergo little if any scientific study to ensure they're safe and effective before they are sold to millions of Americans.

That 1994 law does prohibit dietary supplements from claiming to treat or cure diseases, but it says they can advertise help for non-disease health conditions. The FDA's new rule attempted to draw the line between what was an acceptable and illegal claim for these products.

FDA officials have maintained that morning sickness and leg swelling are not a disease but are normal pregnancy conditions and thus dietary supplements, under the 1994 law, could claim to treat them.

But because so many chemicals, natural or synthetic, can hurt a fetus, the government, until now, had always required safety studies before allowing medical substances to be targeted for pregnant women.

For more information regarding exposures during pregnancy, contact the Pregnancy Healthline. The Pregnancy Healthline is a hotline service of the Southern New Jersey Perinatal Cooperative and can be reached in the Pennsauken area at (856) 665-6000 or call (888) 722-2903, Monday through Friday, 10:00 am to 3:00 pm. N

Published bi-monthly for maternal and child health care nurses by the: Southern New Jersey Perinatal Cooperative, 2500 McClellan Ave., Suite 110, Pennsauken, NJ 08109. ©1998

Comments and suggestions should be directed to Nurse Network Editors at the above address.