



# Hot Chili Tips

August 2004

Millie Aproda R.N.

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## Nigerian Polio Outbreak

Nigeria's fast-growing polio outbreak now accounts for more than three quarters of the world's fresh cases of the crippling disease and threatens children across West Africa, health officials said.

The World Health Organization said that, by 23 June 2004, it had confirmed 257 new victims of polio in Nigeria—where some Islamic leaders are opposed to a bid to eradicate the virus through vaccination—and that the new figure represents 77 percent of known cases worldwide.

"Unfortunately, those are our figures," said Modamed Belhocine, the World Health Organization's representative in Nigeria, citing the outbreak, centered on the northern Nigerian city of Kano, as a cause of major concern to the international health care coalition battling to stamp out polio by the end of 2004, "We pay concern to the resumption of vaccination in Kano, because it is the only way to have protection for all children. It is from there that contamination spread to other children, and it is because of that we have new polio cases," he told AFP by telephone.

In March 2004, Nigeria saw the "highest ever-recorded" monthly incidence of wild polio virus, with 85 confirmed cases across the country, a WHO statement said.

As of April 2004, only 6 of the 36 states in Africa's most populous country—the mainly—Christian Southern states of Abia, Adamawa, Ebonyi, Edo, and Rivers, and the central state of Nasaraw—were polio-free, the state-

ment said, warning of worse to come as Nigeria's annual rains intensify. "Intense transmission of the polio disease in Nigeria continues despite the low transmission season. High transmission season of polio occurs during rainy season. High transmission season of polio occurs during the rainy season when children get contact with contaminated water and food," it said. Nigeria's rains begin in March and build up in August and September.

According to the United Nations children's fund (UNICEF) spokesman in Nigeria, Gerrit Beger, there have been 44 new cases of polio in West Africa outside Nigeria since 2003, when officials, in parts of Muslim northern Nigeria, began refusing to administer oral polio vaccine to children.

According to experts, for each confirmed polio case, there are between 200 and 300 children under 3 years old carrying the virus. "The number of cases is increasing, that is what we believe, and, certainly, this situation worries us," said Beger.

In March 2004, Kano's state government refused to take part in a United Nations -led campaign to vaccinate West African children against polio, following a campaign by Islamic clerics against the vaccine had been laced with

fertility hormones by western agents as apart of a US-led bid to sterilize African girls, International health experts dismissed the claims.

Kano suspended vaccination saying that it preferred to import "safe" vaccines produced in an Islamic country. On 27 May 2004 Kano said that it was testing polio vaccines made in Indonesia, and was waiting for the results.

"Progress is being made in negotiations with the state of Kano. We are in constant touch with Kano and the Federal Ministry of Health," Belhocine said. "There are indications that lead us to think that vaccination could resume next month in July," he said.

Kano spokeman, Sule Ya'u Sule, said that such a return to vaccination was a "possibility," but added that the government was still waiting for the outcome of the test on the Indonesian vaccines. "As soon as we find the result positive, we will begin the exercises," he said.

Information from ProMed which is a program of the International Society for Infectious Diseases -[Http://www.promedmail.org](http://www.promedmail.org).

- Next month watch for more reports on the Shots for Tots to Teens Events.
- Training for new Chili Trainers taking place for District I Aug. 18th
- CASA/AFIX training taking place in Albq. Aug. 31st.
- CHILI Training for District I Sept. 2nd in Albq. At Presbyterian Hospital
- Hobbs Shots for Tots Event combines with WIC Health Fair

# Vaccine Development & Safety

Millie Aprodá, R.N.

Ever wonder about how vaccine is developed and tested? I know a lot of questions come our way about this subject from parents and other providers. Here is some information on this subject that I gleaned from the CDC Web Site. Hope this helps you answer those questions.

Once the scientists identify the microorganism or toxin that causes an illness, they pursue a number of approaches to develop a vaccine. All approaches focus on the immune system and the body's natural defenses against foreign invaders. The purpose of the vaccine is to bring about immunity by provoking a response from a person's immune system so that exposure to the active disease agent will stimulate an already primed

immune system to fight the disease.

The goal of research and development of vaccines is not only to protect individuals from serious infections, but eventually to eradicate disease as we did with smallpox.

To develop a candidate vaccine, scientists first test the preparations in cell-culture or tissue-culture systems. If good results occur, then it is tested on laboratory animals such as mice or guinea pigs or monkeys. If the vaccine candidate performs well it can become an investigational vaccine for use in human volunteers in clinical trials.

A candidate vaccine undergoes three phases of clinical trials before it can be considered for approval.

The overall risk/benefit of a vaccine is critical in making a licensure decision.

No matter how extensive the testing, it is impossible to allow completely for the infinite variation among individuals, their immune systems, and their reactions to the introduction of a new substance into their bodies. Serious systemic reactions can occur, although they are very rare. The CDC and FDA monitor vaccine distribution and use, and collect information on adverse reactions to vaccines, even after they are licensed for use for the general public

Scientists are pursuing many promising new strategies in vaccine development.

## The Approval Process

The pathway of clinical development of biologics:

A sponsor who wishes to begin clinical trials with a vaccine submits an Investigational Drug Application to FDA

Clinical Trials are done in 3 stages:

A. Safety and immunogenicity studies done on a small number of closely monitored subjects.

B. Studies enroll up

to hundreds of subjects.

C. Enroll thousands of individuals and provide the critical documentation of effectiveness; the FDA may request additional information, studies or may halt studies.



**New Vaccines go through extensive trials to ensure safety.**

### The terms

“inoculation”,  
“immunization,”  
and “vaccination”  
are used to mean  
essentially the  
same thing.



# The Threat to the U.S. from Global Infectious Diseases

This information is taken from the unclassified version of a new National Intelligence Estimate on the reemergence of the threat from infectious disease worldwide and its implications for the U.S.

New and emerging infectious diseases will pose a rising global health threat and will complicate US and global security over the next 20 years.

Twenty well known diseases including TB, malaria and cholera have reemerged or spread geographically since 1973, often in more virulent and drug-resistant forms.

At least 30 previously unknown disease agents have been identified since 1973, including HIV, Ebola, Hepatitis C, and Nipah virus. Some of which there is no cure available.

Of the seven biggest killers worldwide, TB, Malaria, hepatitis, and in particular HIV/AIDS continue to surge. HIV/AIDS and TB are likely to account for the overwhelming majority of

deaths from infectious diseases in developing countries by 2020.

Although the infectious disease threat in the U.S. remains relatively modest as compared to that of noninfectious diseases, the trend is up. Annual infectious disease related death rates have doubled after reaching a historic low in 1980, up to 170,000 annually.

Many infectious diseases originate outside of US borders and are introduced by international travelers, immigrants, returning US military personnel, or imported animals and foodstuffs.

According to the US Institute of Medicine, the next major infectious disease treat to the US may be, like HIV, a previously unrecognized pathogen.

Development of an effective global surveillance and response system are probably at least a decade or more away, owing to inadequate coordination and funding at the international level and lack of capability, funds, and commitment in many developing and former communist states.

Implications for US Na-

tional security include:

- At least 170,000 Americans will die each year from infectious diseases.
- Many more could perish in an epidemic of influenza or yet-unknown disease
- Infectious diseases will account for more military deaths and hospitalizations than battle-field injuries.
- Infectious disease burden will weaken the military capabilities of some countries as well as international peace-keeping capabilities
- Infectious diseases are likely to slow socioeconomic development in developing countries which will challenge democratic development and transitions and possibly contribute to humanitarian emergencies and conflict.
- Infectious disease related embargos and restrictions on travel and immigration will cause friction between developed and developing
- The possibility of bio terrorist attack against US civilian and military personnel overseas or in the US are likely to grow as more states and groups develop a biological warfare capability.

Broad advances in controlling or eradicating a growing number of infectious diseases such as TB, malaria and smallpox in the decades following World War II fueled hope that the global infectious disease threat would be increasingly manageable. This optimism however led to complacency and overlooked the roles of such factors as expanded trade and travel and growing microbial resistance to existing antibiotics. Today infectious diseases remain a leading cause of death, of the estimated 54 million deaths worldwide in 1998, one-third were due to infectious diseases.

# WIC World Breast Feeding Month Kick Off Health Fair

Theresa Underwood NUT II, Hobbs New Mexico

On July 31st the WIC Department in Hobbs New Mexico had an outdoor health fair to kick off World Breast Feeding Month.

The outdoor event was a great success—seeing over 150 families. Some of the activities included booths with information on Breast Feeding and The WIC program, Families First, Lea County Pre Natal Program, Children's Medical Services, and The Shots for Tots to Teens Event.

The day was made special through several types of entertainment including clowns, face

painting, Free Balloons, A Spider Man Jumping Castle, A Dunking Booth, A Peter Built Truck automated ride for Kids, and a refreshment booth giving away fresh fruit, cheese and crackers, and ice water and fresh lemonade. It was a warm day so this was very appreciated by all.

The office of Dr. Reddy, a local pediatrician, had a booth and presented the kids with free bicycle helmets. Many other community partners donated wonderful door prizes and these were given away every 15 minutes. These included such items as free pizza,

free haircuts, and one month memberships to local gymnasiums. We also took pictures of the children with their face paintings and participating in all the other fun events.



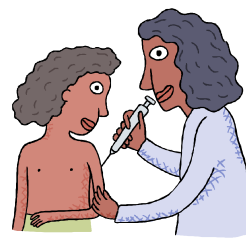
World Breast Feeding Month—WIC Celebrates!!

**Ruidoso Shots for Tots to Teens Event will be August 7th at the Ruidoso Convention Center. Look for report on this and other events in next issue of Hot Chili Tips.**

## Shots for Tots To Teens/Hobbs Event

According to Marisa Castillo, Immunization Clerk for the Hobbs Public Health Office, they combined with the WIC Health Fair on July 31st for their Shots for Tots to Teens Event this year.

This year the event pulled in 49 children who received a total of 128 immunizations; 22 of these children had no health insurance. The kids were almost equally divided in age range,



**Hobbs Public Health has 2nd Annual Shots for Tots to Teens Event!!!!**

11 being 0-2 years old, 17 being 3-6 years old, and 7 being 8-11 years old. Great Job Hobbs Staff!! Good Work Helen Hall, our Green Chili Girl from Hobbs.

# Infectious Diseases—Related Trade Disruptions—More to Come!!

Here are some examples of infectious disease disruptions to trade—these will continue to cause costly periodic disruptions in every region of the world.

1. Avian Flu in Hong Kong—cost hundreds of millions of dollars in lost poultry production, commerce, and tourism.
2. BSE and nvCJD ( Mad Cow ) in Britain prompted a mass slaughter of cattle, drastically cutting beef consumption and led to a three year embargo against British beef—losses estimated at 5.75 billion dollars
3. Cyclospora in Guatemalan rasp-

berries—a disease related to this in the US and Canada cost Guatemala several million in lost revenue.

4. Cholera in Peru—cost Peruvian industries \$775 million in lost tourism trade.
5. Foot and mouth disease in Taiwan devastated Taiwan's pork industry.



**Global Problems affect everyone these days—**

6. Nipah in Malaysia caused the shutdown of over half of the country's pig farms and an embargo against pork exports.
7. Plague in India sparked a sudden exodus of 1/2 million people from the region and led to abrupt shutdowns of entire industries including aviation, tourism as several countries froze trade, banned travel from India and sent some Indian migrants home. It is estimated this cost India some \$2 billion.

## Regional Trends of Infectious Diseases

### Sub-Saharan Africa—

Accounts for nearly 1/2 of infectious diseases globally—the poorest area in the world. Many disease problems including HIV and Malaria. Life expectancy in this area is reduced by as much as 30 years and as many as a quarter of their populations over a decade or less which will produce a huge orphan cohort. Nearly 42 million children in 27 countries will lose their

parents to AIDS by 2010 and 19 of these hardest hit will be in Sub-Saharan Africa.

Asia and the Pacific—Multi drug resistant TB, malaria and cholera are rampant. HIV and AIDS is spreading and by 2010 the region may surpass Africa in number of HIV infections

Former Soviet Union — Has had a sharp rise in diphtheria, dysentery, cholera, Hepatitis B&C and TB. HIV infection may exceed 2 million

Latin America—resurgence of cholera, malaria, TB and dengue. They are making progress in some areas of infectious disease control.

The Middle East and North Africa—substantial TB and Hepatitis B & C.

Western Europe—faces threats from HIV, TB, Hepatitis B & C. However, its highly developed health care system will limit the impact. They also have problems with zoonotic diseases, diseases transmitted from animals to humans. Most emerging new infectious diseases are zoonotic.

### **Nipah Virus**

**Belongs to a group of infectious diseases known as paramyxoviridae.**

**These viruses were identified in different species of bats, also called flying foxes found in India, SE Asia, and Australia. They act as the vector. Pigs may come in contact with the bats urine or saliva by eating contaminated fruit. As a result, many industrial pork workers have died. The disease causes an infectious brain disease in humans.**

# Report on Shot Nurse Project Anne Lutz, Santa Fe

## Shots on Time Demonstration Project

The New Mexico Immunization Program has initiated an exciting demonstration project as part of the Governor and First Lady's commitment to improving immunization rates.

The Governor has committed the funding to support the special **SHots On Time** Nurse Project that began in March of 2004 and will run through July 2005. This effort places immunization nurses in private practices to assist the providers and staff assess and improve their immunization systems. The contract nurses are working across the state, spending 2-4 weeks per site. They provide hands-on technical assistance with improving immunization record-keeping, implementing reminder-recall systems, and giving shots to kids who are recalled. All of the providers who have participated have rated the project as beneficial. Providers who are interested in participating can contract Anne Lutz at the NM Immunization Program at 827-0219 or email [anne.lutz@doh.state.nm.us](mailto:anne.lutz@doh.state.nm.us).

## Tucumcari Health Office uses Grant Monies Dee Reed, R.N.

The Tucumcari Public Health office applied for a grant from the Immunization Coalition and received \$2500 to use for Immunization Initiatives.

What we will be using it for is to present gift certificates to parents who bring their children in for their immunizations.

Mothers will receive a form when they leave the hospital, and if they present their infant for immunizations within one month of turning 2 months of age, they will receive one of these gift certificates. Also any other mother coming to the health department for immunizations can

qualify for a monthly drawing for free gifts. This year we also partnered with PMS for our Shots for Tots to Teens Event on July 31st and had two locations, one in Tucumcari and one in Logan. We want to thank the New Mexico Immunization Coalition for helping us with this wonderful Grant.

### **Quickies with chiles**

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**Heat and pour a green chile sauce over a baked potato, eggs, chicken, steak, pork chops, burger grilled tofu or pizza!**

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**Add green chile sauce or chiles to your favorite soup or stew.**

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**Green chile sauce, with red beans and rice—YUM**

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**Pasta-bilities never end when you combine green chile sauce with pasta.**

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**Use it for a hot dip for quesadillas or chips.**

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**“Chili ( as in the dish ) is the jazz of food, It is born in the USA as a mixture of influences from different places and is heavily influenced by local traditions”.**

**says Jennifer English, the host of syndicated “Food and Wine Radio Network”**

# Chili Recipe for August

## Green Chile Enchiladas

Ingredients:

1 lb. Grilled chicken, pork, ground beef or carne adovada.

12 corn tortillas, 6"

1 lb. Monterey Jack cheese and or cheddar cheese-grated

1 onion, chopped

24 oz Green chile

Sauce

8 oz diced lettuce and tomatoes

3/4 cup vegetable oil.

Directions:

Tortillas need to be heated. You can either steam them or quick fry them. To



quick fry, heat oil in deep pan on the stove top set high. Dip each tortilla in oil for 5 seconds. Drain tortillas on plate on paper towels, place tortilla on place, cover with 2 oz. Of meat, 1 oz of cheese, 1 oz of sauce, sprinkle with chopped onion. Cover this first layer with 2nd tortilla. Repeat filling, cover with 3rd tortilla. Then smother with 4 oz of sauce. Place in oven at 300 degrees until cheese melts. Remove from oven and garnish with lettuce and tomatoes, a dollop of sour cream & guacamole. Serve with Spanish rice and beans. Place a fried egg on top for a real traditional New Mexican dish.

## Guacamole

Ingredients:

8 lg. Ripe avocados

1/4 cup diced jalapenos

1/2 medium tomato-diced small

1 cup southwestern salsa

1/4 med. Red onion-

diced small

1 tsp. Garlic salt

1 time-juiced

Directions:

Cut avocados in half and remove pit. Scoop avocado with a spoon from the skin into a mixing

bowl, Mash avocados using a fork. Add remaining ingredients and mix well. Serve chilled. Garnish with shredded lettuce, black olives, tomato slices etc.

## Spanish Rice

Ingredients:

1 1/2 cup rice

1/2 cup onion-diced

1 1/2 cup bell pepper—diced

1 clove garlic-minced

16 oz chunky chile salsa

1 tsp. Black pepper

3 cups water

3 tbsp. Shortening

1 tbsp. Chicken bouillon

Directions:

Melt shortening in large skillet. Add rice and brown. When rice is golden brown, reduce heat and add onion, bell pepper, chunky salsa,

bouillon, garlic, and pepper. Mix well and add 1 cup warm water or enough to just cover rice. Cover and let simmer until almost dry ( about 25 min.). Add remaining cold water, a little at a time, cooking over low heat until fluffy. This is the secret to fluffy rice!

**To ripen avocados quickly—place them in your flour canister on top of your flour and shut the top. They will ripen perfectly in just a day or so—just don't forget they are there!!**

**Send Chile Recipes!**

# The Story of Paprika and The Culture That Invented It

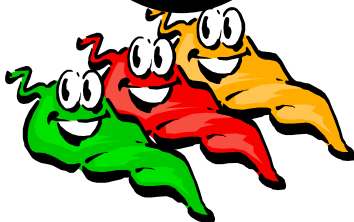
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Child Health  
Immunization  
Learning  
Initiative

We are on the  
Web  
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[Http://www.health.state.nm.us/immunize](http://www.health.state.nm.us/immunize)



Have a great August From The  
Chili Girls in district IV  
Helen Millie Suzie

## RED /GOLD

BY CYNTHIA ZÁDESKEY HOLUB

Last spring, my mother handed down my grandmother's spaetzle-making spoon, the tarnished piece of silver that generations of my family have used to learn to cook. Looking down at it, I remembered the way it felt in my hands as my grandmother gave me my first lessons at the stove, and the smell of pots bubbling with the rich aroma of paprika.

That paprika most people use as a decoration on potato salad or deviled eggs pales next to the paprika I know. The sweet essence of paprika dances on the tongue, sensually permeating favorite dishes with the addictive, palate-tickling spice. As a pepper, it can also be fiery hot.

As a second-generation American-Hungarian, I grew up on paprika-based classics like creamy rich chicken paprikas and savory beef goulash, made with ingredients that were fresh-picked from my dad's garden. Fiery red, paprika-laced soups and stews are part of my heritage, connecting the past and present with only a recipe. But I found many cooks of other descents weren't aware of the difference in quality between domestic and imported Hungarian paprika. Noted food authority Craig Claiborne sums up the situation best: "The innocuous powder which most merchants pass on to their customers as paprika has slightly more character than crayon or chalk," he says. "Any paprika worthy of its name has an exquisite taste and varies in strength from decidedly hot to pleasantly mild but with a pronounced flavor."

Imported Hungarian paprika such as the famous red gold of Szeged can be found in a red and white tin in your grocer's spice aisle. As one part of the "Hungarian trinity," with a taste-tantalizing combination of lard and onions, paprika has an uncommon ability to transform ordinary meat and vegetables into extraordinary dishes. With grandmother's spoon as my talisman, I took to the classroom to teach what I knew best: Hungarian home-style cookery, with paprika-the quality stuff-is an essential ingredient.

As far back as 1538, the Hungarians knew the exceptional qualities of paprika. The Turkish invaders who brought paprika to southeast Europe later strictly forbade its propagation. Hungarian peasants living in Turkish-occupied areas were threatened with the penalty of death. At the same time, black pepper had become a spice of the aristocracy, and its prohibitive cost became the catalyst for peasants to seek flavor from paprika. Determined Hungarian peasants acquired the seeds, grew and processed the spice in great secrecy during the next 150 years.

In 1686, the town of Szeged was liberated from the Turks, and from that point on, slow but steady progress toward a better quality Hungarian paprika took place in gardeners' home plots. Its delicately sweet but slightly pungent flavor and beautiful color made it irresistible. Paprika ascended the social ladder, gaining acceptance with the gentry, aristocracy, and eventually, royalty. Generation after generation of Hungarian peasants' meticulous labor and experimentation led to the mastering of paprika cultivation.

These savvy Hungarians turned their gardening skills into Hungary's "Red Gold"-paprika. It became the basis of a distinctive cuisine, producing Hungary's world-renowned dishes like chicken paprikas and goulash and establishing Europe's first chile pepper cuisine. Hungary as a nation soon proclaimed their undeniable addiction to the pungent spice, which they adopted as their own distinctive condiment.

Walking the soil-rich paprika fields on a recent trip to Kalosca, Hungary, I met a local paprika grower who, with obvious pride, snapped a fresh paprika pepper from its bush for me to sample. "This is the best paprika you will ever taste," he exclaimed. Happily, I accepted the brilliant red, horned-shaped pod, which nearly filled my small hand. Thin-skinned, crisp and crunchy under my teeth, its juice was like sweet nectar flowing over my tongue.

"Just as you can't produce Tokaji wine in the Szeged region, you can't cultivate red pepper under any microclimate," states József Balatoni, plant manager of Pick Szeged Co., the largest producer of Szeged paprika. Seasoning-paprika cultivation requires a harmonious happenstance of rich soil composition and a rhythmical alternation of warmth, sunshine, and rain. The paprika plant quickly acclimated to the conditions found in Kalosca and Szeged, Southern Hungary's two paprika growing centers.

Hungarian paprika is unique. "It is the ideal spice, indeed," states the eminent Hungarian breeder of paprika, academician Ernő Obermayer. "It has a marvelous fire and unparalleled properties of food-coloring, a palate-tickling flavor, a sweetish taste and a genuine Hungarian aroma; these are the properties that raise Hungarian noble sweet paprika above all other condiments."

Misconceptions of paprika abound; it is often thought to be merely "spicy hot" or even tasteless. Hungarian paprika's reputation was established by its non-pungent variety, when in the early 20th century many countries desired a sweet paprika. In 1924, the Pálffy brothers of Szeged invented a method to relieve the paprika fruits of the capsaicin-containing seeds and veins. In the 1940s, after years of research, Kalosca was declared a "hot-free" growing zone with the development of a naturally mild strain of paprika.

Today, expert Hungarian paprika millers are responsible for grinding just the right amount of paprika seeds and pods together, creating six different spice varieties of differing pungency, grind, and color properties. Unfortunately, not all of these varieties are available in the States.

American chileheads can experience two Hungarian paprika varieties imported from the Szeged region. Most local grocers stock the paprika extremes: pleasantly mild paprika, packaged as "sweet delicacy" and generally used for cooking; and the spicy "hot" variety, typically used as a tableside condiment for added fire. With or without the heat, paprika emits a taste-tantalizing fragrance, although it is most often utilized for its mildly pungent yet pronounced flavor and the beautiful rich red color. Cooks can vary the heat to suit their tastes by using a combination of the two varieties to create a dish that varies from sweet to fiery hot.

Fiery hot, mild or pungent, Hungarian paprika is more than a decorative spice. Hungarian farmers have given us a seasoning paprika with its own distinctive depth of flavor, which no other chili pepper has yet to achieve.