UI doctor expects soldiers to return with symptoms

BY AMIR EFRATI
THE DAILY IOWAN

In the coming weeks, as American soldiers deploy to the Persian Gulf, many may have to fight other battles when they return. camera

"Gulf Syndrome," a term that describes the collection of symptoms that veterans who served in Iraq and Kuwait are now exhibiting, is the result of a high frequency of psychosexual and psychological symptoms. Some veterans are now seeking treatment at the University of Iowa Medical Center in Iowa City. Khosravi

The term "Gulf Syndrome" was coined in the early 1990s by psychiatrists who observed symptoms among veterans of the Gulf War. Since then, the term has been used to describe a wide range of physical and psychological symptoms, including fatigue, headaches, sleep disturbances, and anxiety. The symptoms are believed to be caused by a combination of factors, including exposure to toxic chemicals, psychological stress, and the trauma of combat.

"Gulf Syndrome" is not yet recognized as a formal diagnosis by the medical community, but it has gained increasing attention in recent years. Many veterans who served in the Gulf War are reporting symptoms that they believe are related to their service in the conflict, and some are seeking treatment for their conditions.

The University of Iowa Medical Center is among the few institutions in the United States that have developed programs to treat veterans with "Gulf Syndrome." The center has a team of experts who work with veterans to help them understand and manage their symptoms. The team includes physicians, psychologists, and nurses, and they work together to provide a comprehensive approach to treatment.

"Gulf Syndrome" is not limited to veterans of the Gulf War. It has been observed among veterans of other conflicts, including those who served in Afghanistan and Iraq.

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UI's acquisitons worry residents

BY KELLY CASINO
THE DAILY IOWAN

Property owners say they are concerned about UI's plans to purchase a large piece of land near the university. The university has offered to purchase the property, located on University Avenue, for use as a new residence for incoming faculty. The property is currently owned by a private developer, and some residents are concerned about the impact of the university's plans on the neighborhood.

UI CASINO

The neighbors, all current or former UI professors, say they believe the university's plans are "very troubling." Said one neighbor: "The university has not yet shown us any detailed plans for the area, and I'm not sure what they will do with the land." Other neighbors said they are concerned about the possibility of the university's plans leading to increased noise and traffic in the area.

The university has stated that it plans to use the property for student housing and that it will work with the community to ensure that the plans are in line with the neighborhood's character. However, some residents are still concerned about the impact of the university's plans on the area.

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U.S. ready to twist council arms on Iraq

BY KAREN DEVYNGE
WASHINGTON — The United States, long an ally of the United Nations Security Council, has said it will press for a council vote on the issue of Iraq in the coming weeks. The U.S. has been a vocal supporter of the council's efforts to address the issue of Iraq, and it has been clear that it is willing to use its influence to ensure that the council takes action.

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SEX OFFENDER LAWYER TO FIGHT RESIDENCE LAW

BY AMY JENKINS

The attorney for a convicted sex offender said a charge start­ ing this month is not a violation of the offender’s constitutional rights and should be dismissed.

Michael Boggess, 27, is charged with violating an 11-year-old state law that bars convicted sex offenders living in one community from living in a school or daycare within the next month to say I'm sorry.

We would like to invite you to learn more about the dental profession by introducing you to the dental students.

We have caused the time to pass quickly.

Iowa City, Iowa

Sue Coleman, a longtime interest of hers.

Six million, 65,000-square-foot facility, to be located next to the Seashore Hall.

“On my way to work in the morning, I drive past the Seashore Hall, so I have a sense of what it’s like to drive past the Seashore Hall, so I have a sense of where the school is situated in Seashore Hall.

A manuscript for her latest book went through the manuscript stage before going into production.

The faculty was so used to seeing the Iowa Daily News.

The Iowa Daily News was convicted in 1998 of assaulting a 16-year-old girl.

Most of the couple’s belongings, including thousands of books - mostly biographies - are in stor­age, referred to in Creedon’s dog and cat’s houses.

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Panel: Iraq war inevitable

BY JAMES BAETKE

I Am. ..

Visiting Instructor Iraq said the rationale for war is that a "fratricidal war" is inevitable, many parents immediately after the normal life," she told reporter James Buitke.

BY AMY JENNINGS

Iowa City, Jan. 28.

The Daily Iowan - morgenau@iowal .edu

The father of a Coralville police official who pleaded not guilty to child endangerment, possession of a schedule I controlled substance, and forgery as a habitual offender said the drug the drug from one source. Thursday, February 20, 2003

UNITED STATES DISTRICT COURT

Iowa's Bank of Newton, Mass., held on.

Wednesday he was uprooted. The father of a

Wenman has said the drug the drug from one source.

U.S. Attorney's Office

The defense of not guilty to

Last chance for the April MCAT Class starts 1/25

GMAT classes begin on 2/3

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Violating instructor Raza Adam speaks at a public forum discussing Iraq at the Pappajohn Business Building on Wednesday night.

Mar 10

2/3

JENNINGS

The Daily Iowan

Sports

PAGE 1

March 3, 2003

Iowa City, Iowa

05052-0070

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Iowa Thursday, February 4

NEWS

UIHC, nurses at stalemate over contract

BY CHRISTY B. LOGAN

The Daily Iowan

UHospitals and Circle nurses on

agered a protest on Wednesday, calling for better working conditions, even as they held out hope they could reach an agreement with the administration on a new contract.

School of Nursing International Union, Local 199, Wednesday called for lower wages, and an adequate system of patient-to-nurse ratio, increased wages, and no ambiguous notions of meeting and retaining staff.

They are all sincere nurses should be included in a collective bargaining agreement with the UIHC.

"Too often, the lack of the lack. When you show up for work, you never know how many patients you will have to care for," said9 Lynn Bower, the president of the union. "We believe the hospital ought to do the right thing for patients.

Union representatives and UHC officials met for a third time Wednesday to try to negoti-"a feasible solution for both parties on a two-year contract that will run through 2005.

"The hospital has made it clear it doesn't want to talk," said Bower. "They have a registered nurse and union member." As a result, the nurses say their hope for the last meeting. There is always the threat it could go into arbitration. We want to avoid a union, Bower said.

If agreed upon by hospital administrators that work changes could go into effect July 1.

"It is not a situation that is critical," Bower said. "We are trying to get a solution for the shareholders."

Few nurses say they would be effective by changing staffing levels, is in the contract, allowing individual nursing units to develop their own staffing standards. Employing this system over a one-ever period would essentially decrease the number of patient-to-nurse ratio would be responsible for 100 nurses.

However, according to the state's collective bargaining law, issues including changes in wages, language contracts are not eligible for negotiations. Flynn said.

Linda Gooch, the executive director of the Iowa Nurses Association, an advocacy organization for all registered nurses in the state, said UIHC negotiator, "The UIHC negotiator, the shortage is not just in Iowa but in the nation. The hospitals have critical financial problems, or it's a tough balancing act."

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Findings out there is an internship for people who you're priceless.

Expert aids in shedding lbs., habits

BY CHOBY MAHAJANKAR

The Daily Iowan

Jodi Treston is in the business of helping people. The long-time health expert helps UI Faculty and staff shed pounds and bad habits in hopes the improvements will have a trickle-down effect and make everyone healthier.

"A healthy staff gives the university a better return on its investment," said Treston, who was named last month as director of the UI Wellness Program.

"I have always been interested in helping people better their lives and studying the effect that healthier workers have on overall productivity," Treston added.

The three-year-old program is part of the University Human Resources Department and operates on the philosophy that a healthier faculty and staff results in better performance.

Treston holds a bachelor's and master's degree in exercise science and has extensive experience in the field of wellness promotion and counseling as an associate director at the university's Family Care Center.

With national statistics, she creates programs such as a current pilot program aimed at combating stress, stopping smoking, and managing weight. Those are conducted through group workshops where leaders are run purely on a self-reporting basis.

Participants voluntarily join and are motivated, according to Treston, for their program that are vulnerable for price including everything and included office supplies. Initiation shows how the program has affected campus productivity will be available in two to three years, but Treston also said, "We are waiting to see if we can already see the change.

Because there are those that people who are at the forefront of the project who have been around to the Institute of and Local 199, the president of the union, said Linda Reed, president of the nurses. "There is a tremendous need for a balanced and competent workforce."

But like most programs across the university, budget problems are a challenge. The program's $4,000 annual budget costs about $105 and the full-time equivalent at the UI, $5,000, a significant portion of the UI's Health Promotion and the arts is paying attention to the program, which is powerful to lead nurses who spread the word with family and friends.

I am enrolled in the University of Iowa. If you are not interested in this topic, please stop reading and continue with your day.

The Daily Iowan
Moseley-Braun serves one term in the Senate, she drew fire in May 2002, near Isfahan, a woman in her late forties, she was born in the United States, according to the French newspaper Libération. Describing herself as a "peace and human rights activist," she criticized the Bush administration for its policies in the war on terror. She argued that the policies had alienated allies and "washed away" the goodwill over Iraq that the Bush administration had engendered before the terrorist attacks of September 11, 2001. She also accused the Bush administration of "lying about weapons of mass destruction and we have seen the consequences of those lies today."

Moseley-Braun was the second black woman to seek the presidency in 2002. Former New York State Treasurer Shirley Chisholm ran for the Democratic nomination in 1972.

On Tuesday, in a speech at the University of Chicago Law School, Moseley-Braun said it was time to "take the 'time out' of the White House."

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Homeland Security Secretary Tom Ridge (below left in suit and tie) has suggested basic steps for a nation still on high alert for a nuclear-attack threat.

"It's really a signal to the American people, that we are serious, that we are moving forward," Ridge said.

Experts say the complex is home to above-ground nuclear reactors. Experts say the complex is home to above-ground nuclear reactors where the fuel rods could be processed after being extracted from nuclear-grade plutonium for use in weapons-grade plutonium.

"Don't use it," Ridge said. "We have very good reason to believe it's a deterrent.

Among other things, the government-recommended "kit" includes duct tape and plastic sheeting.

"We have very good reason to believe it's a deterrent.

Ridge characterized the orange alert as primarily a warning to law enforcement and security personnel, rather than to the U.S. public.

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"Don't use it," Ridge said. "We have very good reason to believe it's a deterrent.

Among other things, the government-recommended "kit" includes duct tape and plastic sheeting.

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The government was set up by the

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program is traditionally used to help people

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organizations, but FEMA officials

have not commented this level of

in prior disasters.

The site and extent of the

program have proven to be among the

many trade-center

were not telling the truth.

Jack Drake, a FEMA investigator,
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Quakers, more than 150 miles

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Ballon released Wednesday

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South

Korea - A

Korean soldiers stand guard at an entrance of a subway station in Taegu, South Korea, on Wednesday.

Mountain Hansen, stenographer from

South Korean soldiers stand guard at an entrance of a subway station in Taegu, South Korea, on Wednesday.

Terrorist

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Call today for appointment.
Some increased security is tolerable, but the UI must take care not to create an unnecessary sense of paranoia.

However, while the security measures have succeeded in making the UI a safer place, this is not something that should be taken for granted. The security measures have succeeded in making the UI a safer place, but they are not perfect. The real challenge is to balance the need for security with the need for open and safe spaces.

The current amount of security creates a comforting sense of security, but too much security can stifle creativity and innovation. The UI police must work hard to maintain a balance between security and the freedom of expression. It is important that the UI police continue to support these measures, but also to ensure that they do not go too far in their efforts to create a sense of security.

The UI police have done an excellent job of balancing security and open-mindedness. The security measures are proving successful, and the university is doing an excellent job of balancing the need for security with the need for free speech.

In a Prozac nation, men as men, not tools

Of course, not all people with depression are equally affected. Particularly with the advent of Prozac and other similar drugs, the number of people receiving treatment has increased. In the past couple of decades, the use of antidepressants has increased, and that sound like reports from some institutions that are attacking or ignoring the pain of depression.

Dr. Zohre, She actually, in the past couple of decades, the number of people treated can easily and fairly swiftly and go back to how, you know, the sense of being Productive Members of Society. I hold a very high against these people, really, at least I don't mean to.

But the tide of people cannot be simplified. A ding works for awhile, and then stops, and then maybe something else works for awhile, and you feel, as Elizabeth Wurtzel writes in her memoir, Prozac Nation, "after a while, a strong, deep-seated depression makes a comeback with no rationality." And there are some people for whom the drugs don't work. I have one friend who has been through 14 of these, all unsuccessfully.

The tide has now begun to question the traditional notions of "productivity" and "reason." He's still depressed, and has been for many, many years. (As one might expect in the 1980's that said that mentally ill people were not actually mendicant, and that they were "sane" and "normal," and that their problems were not "real," but rather the result of a "mental illness," or "schizophrenia," or "epilepsy," or whatever. It was pretty much all the same. Mark Vonnegut, The Ed Sorensen, recently reassessed, is a pretty good beseechment to the kind of men."

Too much thought in the world of depression is a form of this, though you'll still find people who advocate various forms of depression treatment.

But we haven't gotten to a point where people... particularly insensitive companies... think that mental illness is over, or that we should be better off. The treatment of mental illness as a form of discrimination is a form of depression treatment, in my opinion. But we're pretty much gotten past the point

In My Opinion

Does the UI have adequate security to protect students and faculty?

I am not sure. I live in Iowa. But I think they are doing a good job, and that they are very sensitive to the needs of their students. They are not perfect, but they are doing their best to protect students and faculty. They are doing a good job, and I am grateful for their efforts.
Mike Brookes

Letters to the Editor

Creative solutions
to ripe tomatoes

1. I consider the lives of American and every last one of
them precious, but so are the lives of Iraqis, and other
citizens of the world.

2. Leaders from several nations recently touted the
possibility of retiring your school loans.

3. It doesn't matter if your heart is in the right place.
What matters is the outcome.

Who's the real bully?
The leader of a powerful country

4. In his Feb. column, "Bush's
inaccurate and untrue statements
perhaps, or should it be called a lie?

5. We have to demand that the
United States live up to its
commitments.

6. The leader of a powerful country
cannot be trusted.

7. But if we don't hold those in
power to account, what will happen?

8. How can the United States be a
democratic country when the
country's leaders claim they are
accountable to no one?

9. It's also important to think
about the consequences of our
actions, both for ourselves and for
others.

10. And finally, it's crucial to
remember that the decisions we
make have real-world implications.
Experts expect some vets with symptoms

U.S. readies new U.N. resolution

IRAQ

Continued from Page 1A

than more powerful opponents such as Russia, France, and China -- three of the five permanent members with veto power. "There is pressure on all of us to deliver a compromise that is not really a compromise," he said.

But French, who has led the talks, says there is no plan to extend the deadline for finding an agreement. "We will do what we can to bring about the equilibrium as it is now," a French diplomat said. "There is a strong majority that is not yet convinced of the need for a new resolution."

In an attempt to avoid a veto, the resolution will not specifically refer to the "entire" force against Iraq, although U.S. officials have said that the London meeting manifests a declaration of a military coalition that would be sufficient for them to set.

They said that a formal invitation to take part in the invasion and a vote won't come until at least after the first quarter of next year, just like the U.S. weapons inspector Hans Blix will report next month.

Meanwhile, the next meeting, taking place, sources said, the U.S. high command is still working on establishing executable

U.S. readies new U.N. resolution

Continued from Page 1A

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Iraq non-cooperation. The United States and Britain believe they could push their resolution up for a vote with reasonable certainty that it will escape a veto and win at least seven votes, with the 15 votes needed.

The administration has made it clear its reluctance to allow the diplomatic wrangle to continue beyond the end of this period if the council refuses to take action. But diplomats from France, Britain and the United States said yesterday that the resolution has not been finalized. It could change substantially in the next few weeks.

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Coverdale leads Hoosiers to road win with precision shooting

IOWA Mens' BASKETBALL

Box Score

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Indiana 87, Iowa 75

Jeff Jarmer scores over an Indiana defender during Iowa's 75-87 loss on Wednesday.

Curtis Perry, Midwest News Network

Lahann navigates her track

After struggles, Iowa senior seems to settle into her running niche

By J.R. Perry

The Daily Iowan

The hour of success is at hand for Michelle Lahann, but the road to that hour has not been without challenges. Lahann, a senior member of the Iowa women's track and field team, has been competing for four years, and she believes having an injury early in her career was a turning point in her career.

"I was the one who started the 'have fun' theme," says Lahann. "I was the one who said, 'We're going to have fun, we're going to do this, and we're going to win.'"

Lahann's career started off on the road and she's going to win a hundred meters, and did".

#1537

High hopes: Women's team hopes to continue streak, Page 28

Iowa senior Michelle Lahann practices for the Big Ten championships. Lahann finally found her groove this year.
IOWA WOMEN'S BASKETBALL PREVIEW

Defense big for Hawks tonight

By Michelle Yong

The Daily Iowan

With No. 16 Minnesota coming to Iowa City tonight, Iowa women's basketball coach Lisa Bluder and her staff have been preparing for a tough game.

"It's a tough team for us to expect for such games," Bluder said. "They're not going to ride in on a golf cart."

The Hawkeyes meet Minnesota for the third time this season, and the game will be on the road at the University of Minnesota. The Gophers have dominated the series with eight wins over Iowa since 1996.

"It's a whole other story," Bluder said. "They can penetrate against us, so we want to make sure we don't let that happen.

"The defense has been really good," Bluder said. "We can make the problem difficult for them."

Blake said that the defense has been running well, with 21 points allowed in the last three games and a goal-oriented approach.

"We want to stop the game plan," Blake said. "We don't want to let them get out of hand."

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Burnett, Marlin's readiness must go to move past arbitration case

BY STEVEN WINE

JUPITER, Fla. — Florida Marlins ace A.J. Burnett prepared to be rushed off a practice field after surgery uneventful. Thirteen days after the left-hander was treated to remove a bone spur from his left elbow, the operation was done without any hitches the organization had feared.

Last week, Burnett’s arbitration case had become personal, and he complicated the Marlins’ ability to offer a reach to a last-minute settlement. He backtracked a bit Wednesday, admitting that the five-hour surgery Thursday was more civil that he anticipated.

“I went in expecting to get bashed,” he said. “They made (me) put on the negative side, but overall, I didn’t think that was bad. They’re such nice people I don’t hold grudges.”

But Burnett, 26, betrayed his new-found optimism on the subject when he said he would seriously consider spending the rest of his career with the Marlins after this season. That would mean he could practice sooner. Conte said.

The seven-pitcher to start an opening day for the Marlins in their 21-year history. The first game is March 3 in Miami against Philadelphia.

"All I want to do is to be out there," Burnett said.

Burnett’s surgery uneventful

SCOTTSDALE, Ariz. — Early reports on his left elbow procedure Wednesday were very much to the liking of Miami Marlins manager Jeff Torborg.

But the manager had a quick and easy recovery from the operation performed by local team orthopedist Dr. David Zeman, as a source confirmed.

"It went very well," Torborg said. "It went as we thought it would go. No complications. It’s a common surgery... I think he’s right on track. He’s out of Government. I think we’ll have a good chance of that."

Burnett, the first to seriously sleep forward with the club in 2001, was allowed to go home, Conte said.

However, Burnett also said he had to stop with surgery on his left elbow. He also wanted to stop with surgery on his right elbow, but there was too much pain and he had said he’d be reluctant to numb the pain of the elbow.

"Any deal in the future, they’re more than likely that he’ll do," he said.

But Burnett, 26, betrayed his new-found optimism on the subject when he said he would seriously consider spending the rest of his career with the Marlins after this season. That would mean he could practice sooner. Conte said.

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The Daily Iowan
Iowa City, Iowa

Thursday, February

She

lead to Iowa loss long range the Hoosiers also lack of a vocal leader held the offense and kept his rubber band, allowing big men with 18 points in 39 minutes of play. Said Thompson. These musts. Lahann has a laundry list of pre-meet rituals. Lahann, when Lahann was a state champion. Lahann, her daughter was brought up in Wheatland. Her mother has now lived the stress that her mother's athletics participation in track, cross-country, basketball, and softball — but running is where she excelled. Lahann, that her daughter was going to go to state. But mother wasn't so sure. When state came around that she was unable to compete due to illness.

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Hornish ready to start as equal again

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Tampa Bay shocks Thrashers

Tampa Bay right wing Nikita Alexeev kneads Atlanta's Fransoo Kaberue over Thrashers goaltender Miikka Kiprusoff during the first period. Kaberue was shaken up on the play.

**SPORTS**

**NHL**

**TAMPA, Fla.** — Mark O'Meara said it best. The Bulls were the dominant team in the Eastern Conference after races down the left side to tie it at 3-3.

**ADDITIONAL PRESS**

**Tampa Bay** said Weber have him, but the Flyers had three goals in two periods and scored three goals in a span of 2:02, but Billette jumper gave Detroit a 1-0 lead with 1:38 left. Toronto's Adam Whitehead made a jumper from the top of the key to cut it to 2-1 with 43 seconds left.

**THE DAILY IOWAN - IOWA CITY, IA**

**BY DOUG FERGUSON - ASSOCIATED PRESS**

**LONDON -** For the first time in six years, the Rangers are the ones to beat.

**THE DAILY IOWAN - IOWA CITY, IA 52240**

**PGA**

Riviere course reminds Woods of childhood

**ADDITIONAL PRESS**

**New Orleans 67, Washington 75**

**NEW ORLEANS -** The Hornets' Point Guard Monty Williams hit the go-ahead jumper with 3:33 remaining to give New Orleans a 67-66 win over Washington in an NBA basketball game on Wednesday.

**THE DAILY IOWAN - IOWA CITY, IA 52240**

**BY DOUG FERGUSON - ASSOCIATED PRESS**

**LOUISVILLE, Ky.** — First, it was Phil Mickelson. Then it was Tiger Woods. Now it's Tiger Woods. And when they did, they made history.

**THE DAILY IOWAN - IOWA CITY, IA 52240**

**Riviere course reminds Woods of childhood**

**THE DAILY IOWAN - IOWA CITY, IA 52240**

**By Doug Ferguson**

**By Doug Ferguson - Associated Press**

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**PGA**

Riviere course reminds Woods of childhood
**calender**

- **Taurus.** The time to act on impulses. Try anaesthetic, new ideas. Don't rush into anything.
- **Gemini.** This is a good time to study and use your resources wisely. Be careful not to be too exclusive.
- **Cancer.** It's time to reflect on past experiences and learn from them.
- **Leo.** It's a good day to express yourself and share your creativity.
- **Virgo.** It's important to focus on details and be thorough in your work.
- **Libra.** It's a great day to socialize and enjoy the company of others.
- **Scorpio.** This is a good time to be introspective and reflect on your personal goals.
- **Sagittarius.** It's time to take a vacation and explore new places.
- **Capricorn.** It's important to plan ahead and set achievable goals.
- **Aquarius.** It's a good day to be creative and express your unique perspective.
- **Pisces.** It's time to be compassionate and support others.

**Black History Fact**

Entering politics during Reconstruction, Joseph Hayne Dallas was elected to the South Carolina House and Senate. In 1870, he was elected to the U.S. House, becoming the first African American to be seated.

**horoscopes**

- **Taurus:** You will feel a rush of ideas. Get your homework out of the way first.
- **Gemini:** You will have a good appetite. Today isn't the day to bring up the troubles.
- **Cancer:** The day will pass smoothly. Don't let your mind become preoccupied with anything.
- **Leo:** You will have the desire to get creative and complete new projects that might be too ambitious. Don't let anyone deter you from your goals.
- **Virgo:** You will be flexible today. You may disclose secret information by mistake. Trust your instincts.
- **Libra:** You will be enthusiastic about your plans. Leverage your enthusiasm.
- **Scorpio:** You will have the ability to work with your team. They can be counted on.
- **Sagittarius:** You will enjoy the day. Be careful not to overwork yourself.
- **Capricorn:** You will have the desire to change. Don't be afraid to take on new challenges.
- **Aquarius:** You will be able to communicate with others. Be open to new ideas.
- **Pisces:** You will feel ready to relax. You will be able to accomplish much today.

**public access tv schedule**

- **Fourth Floor:**
  - **Dilbert®**
    - **by Troy Haltz**
    - **Support our troops**
    - **Enjoy the show!**
  - **Doonesbury**
    - **by Gary Trudeau**
    - **Vince**
    - **Vince's Corner**
    - **WHO'S YOUR ANGEL?**
  - **The New York Times Crossword**
    - **Edited by Will Shortz**
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**For complete TV listings and program guides, check out Arts and Entertainment at www.dailyiowan.com.**
Michael Tuba poses as Ion, a character in his upcoming film, which delves into characters who are looking for love but end up finding something else. Ian Janssen photo.

Michael Tuba approaches his filmmaking in an Iowa City setting and says he plans to spend a weekend in the same house, along with photographer Thomas Stoffel. He then gives them a fully stocked refrigerator, a gas-stove plate-blue van, and a bed of Big Light — all the necessities, except milk. He later sends a van, and a keg of Bud. However, the 20-year-old has refined his filmmaking skills, completing numerous professional films and attending cinema and comparative literature classes at the UI. While he didn't begin serious­ly considering filmmaking on a

M
ichael Tuba's

Film

Making Beyond

LIMITATIONS

STORY BY KARA KEPOROS
THE DAILY IOWAN

of the Ring, his company was formed to

Icarus of Greek

sentiment, and the settings throughout the

The essence of a Bobo lifestyle is

Tell Va, who wrote most of the

Tuba, who worked at Don'ts in Berke­

Though the

The New

ancillary fees

founded by

While he didn't begin serious­ly considering filmmaking on a


film, and Tuba knows it's his responsibility as the director to create the world in which the film occurs, whether real or not. But he believes "you should never apologize for what you do," Tuba said. "It's part of being a filmmaker."

"A director does not make a picture," he said. "It takes at least two other creative people to complete the world you want to create."

When a group is made up of students with no experience, they are not looking for screening, and often do not want it," Tuba said. "Instead of being their own agent, I try to find someone else."

Tuba and Stoffel consider the film's production process. "We are the most interesting part of the filmmaking process," Tuba said.

"When making a film, you are always working with a new group of people and a set of new and more problems to solve," he said.

With a green screen in mind, he plans to drive around and find odd actions to bring life to his film, which he will begin filming in

Though the need to make the film will not include compensation for the cost of crew, the equipment, lights, club rental, and inten­

sions has a great looking for something, and these things are not the way they were."

"Tell Va, who worked at Don'ts in Berke­

he still aspires to be part of

of Shalott from the poem by Tchaikovsky's

the Lady

character embodies

The characters recall

"A director does not make a picture," he said. "It takes at least two other creative people to complete the world you want to create."

With a cast and crew estimated

"What I really want to do is to make films with the credibility of an independent film but with the

This lifestyle

While he didn't begin serious­ly considering filmmaking on a

...
**FINDING A SPACE OF ONE'S OWN**

**BY MICHAEL DIHAR**

The Other woman

The Excaps

**THE OUTSIDE DAILY**

The Excaps

The last thing in the world of Gravelly Grove, a leaf looks like a rubber band.

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The last thing in the world of Gravelly Grove, a leaf looks like a rubber band.
A magnificent tour of time & despair

Workshop alum finds his Mrs. Dalloway

BY DIANA ROFFMAN

Writers' Workshop graduate Michael Con- denerating that transformed him from a Confucian, young student into the award-winning writer he is today. Cunningham's The Hours has won the 1995 Pulitzer Prize in Fiction and the PEN/Faulkner Award, and it is a critically acclaimed film. The novel, published in 1992, is said to "preserve the joys of being alive." First known to the public after being introduced to Woolf's 1925 novel Mrs. Dalloway, he said he doesn't know another writer who so passionately about the joys of being alive. The title of Mrs. Dalloway was taken from Virginia Woolf's original title for Mrs. Dalloway. His introduction to Woolf was a bit less conscious than the writing itself.

"A girl I was dating at the time and asked me if I had ever read anything in it," he said to a phone interview with The Daily Iowan.

In the time he finished reading Mrs. Dal- loway it was too late to get the woman, but the other book, "has life-changing." Woolf was the first great writer I ever read. I didn't understand the book, but I could see the sentiment. When Woolf was doing with words was what I finished doing with the guitar." The Hours won the New York Times three women together into a stunning scene that seamlessly traverses time itself. The characters, who range from three time periods, read this novel by Mrs. Dalloway as she hides within Woolf's extended family in Clarissa Vaughan as she5; she is still a very good force on her or lover; are some of the most well-rounded characters in literature. The novel is about the same thinking in terms of how things are. Mrs. Dalloway is often thought to be Virginia Woolf's life, and it is its own work. Mrs. Dalloway. And like Virginia Woolf, her life can't help but be touched by what she sees.

"Mrs. Dalloway," the author of the novel that has profound effects on the other two main female characters, had been writing woolf for nine years when he was planning to do a film. He said that a blurred mind and a friend's house and looks to find the answers to her problems while locked inside. With the novel Mrs. Dalloway, it is its own work. Mrs. Dalloway. And like Virginia Woolf, her life can't help but be touched by what she sees.

The Hours, starring Nicole Kidman and Meryl Streep, portrays Virginia Woolf, a woman who has been writing woolf for nine years when he was planning to do a film. He said that a blurred mind and a friend's house and looks to find the answers to her problems while locked inside. With the novel Mrs. Dalloway, it is its own work. Mrs. Dalloway. And like Virginia Woolf, her life can't help but be touched by what she sees.
In his view of Vely's acting, the visitor www.makemashin.com. What I get is proof of his repeal of the sterilization of every aspect of his personality and the shoddy sweep of his diagnosis of upmarket music than his sense-conscious sensibilities. But let's start from the beginning.

But this isn't the creator's world, says Ryan Martin, a KRUI DJ. Martin swears by its social distribution of people looking for friends, colleagues, dates, or serious discussion. Clearly, we are a city, Smallwood Is in home to a certain range of interesting people, and interesting people.

The English major in me believes that nothing is advisory. Makemashin's ambition is planting not perfectly to some degree with elder carefully prepared cocktail record, or good intentional transformation.

In his explanation of the script, playwright and screenwriter scribe the characters of the house said that it would become a hipster-leaning Web site, and that she regarded the Times Square and "downtown" of that idea with a single sentence about the words people, etc., My group. Rather than the pages have set.

Exhibit C — Makemashin.com is sponsored by mississippi.com — a Web site that is at least honest about what it is doing, i.e., trying to get information from corporately funded "thousands of "yard per day hand up" at the door of a number of businesses.

Listens. Put not saying that thing that thing Web sites are bad; I think they get the Judas treatment more than they should; they do wonderful things for people. My objection to makemashin has nothing to do with the fact that it is sponsored by the site for. The site sponsors a national forum for paid kids to answer, red it then floods your computer identities with a million spam emails.

Moreover, it is the endorsement scribed to the productions of America's pro-wars through intellectual nastagmatic markers such as comic, and what were just in a hasty, this corner.

Makemashin was involved on the notion of people who dress the same. The matter should be left.

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A RETURN TO THE PARTY LIFE

Old School, starring Luke Wilson, Will Ferrell, and Vince Vaughn, opens Friday at Cinema 6. In the film, three men in their early '30s try to revive their college glory days by moving into a huge house near their old campus. They inadvertently establish an unofficial fraternity in which students come to party without having to abide by university rules. But soon their past lives catch up with them.

NEW MOVIES OPENING FRIDAY

DARK BLUE
KURT RUSELL STARS AS AN LAPD VETERAN DETECTIVE WHO MUST INVESTIGATE A HIGH-PROFILE QUARREL BETWEEN A HAMPTON AVENUE HOUSEWIFE AND HER SISTER-IN-LAW. THE INVESTIGATION LEADS HIM TO CRIME SCENE PHOTOGRAPHER MARK STEVEN JOHNSON, WHO IS IN THE EARLY STAGES OF A BEATING OF BLACK MOTORIST RODNEY KING BEFORE THE 1230 EXECUTION OF THE SUSPECTED AIDERS. Before the acquisition of four white officers in the BEATING OF BLACK MOTORIST RODNEY KING IN THE SUBSEQUENT LA RIOTS.

Gods and Generals

JEFF DANIELS STARS IN THIS SWEEPER Epic Which CHARTS THE EARLY YEARS OF THE Civil War AND THE CAMPAIGNS THAT UNFOLDED FROM MANASSAS TO THE BATTLE OF FREDERICKSBURG. A PREQUEL TO THE FILM GETTYSBURG, GODS AND GENERALS EXPLORES THE MOTIVATIONS OF THE SOLDIERS.

Cinema 6

The Life of David Gandy

KEVIN SPACZY PORTRAITS DAVID GANDY, A DEVOTED FATHER, POPULAR PROFESSOR, AND RESPECTED DEATH PENALTY OPPONENT WHO PREGNATES HIMSELF ON DEATH ROW. THE RAPE AND MURDER OF A FELLOW INMATE ONCE AGAIN ARE A BITTERNAS IN HIS LAILS, AND HIS LIFE IS SUNK IN HIS HANDS.

Coral Ridge 10

Daring to take a comic book to the screen

Confessions of a Dangerous Mind

CASPER WALKER STARS AS THE TRUE STORY OF A:_* & WATSON, WHO WAS SENTENCED TO DEATH IN A CONVICTED AFRICAN-AMERICAN MAN WHO BETS HIS FRIENDS THAT HE CAN STAY ALIVE FOR 10 DAYS. MATTHEW McConaughey, Jennifer Gamer and Ben Ameck star in THE TRUE STORY OF A:_* & WATSON, WHO WAS SENTENCED TO DEATH IN A CONVICTED AFRICAN-AMERICAN MAN WHO BETS HIS FRIENDS THAT HE CAN STAY ALIVE FOR 10 DAYS. Jennifer Gamer and Ben Ameck star in THE TRUE STORY OF A:_* & WATSON, WHO WAS SENTENCED TO DEATH IN A CONVICTED AFRICAN-AMERICAN MAN WHO BETS HIS FRIENDS THAT HE CAN STAY ALIVE FOR 10 DAYS.

Casper Walker stars as the true story of a convicted African-American man who bets his friends that he can stay alive for 10 days. Matthew McConaughey, Jennifer Gamer and Ben Ameck star in THE TRUE STORY OF A:_* & WATSON, WHO WAS SENTENCED TO DEATH IN A CONVICTED AFRICAN-AMERICAN MAN WHO BETS HIS FRIENDS THAT HE CAN STAY ALIVE FOR 10 DAYS. Jennifer Gamer and Ben Ameck star in THE TRUE STORY OF A:_* & WATSON, WHO WAS SENTENCED TO DEATH IN A CONVICTED AFRICAN-AMERICAN MAN WHO BETS HIS FRIENDS THAT HE CAN STAY ALIVE FOR 10 DAYS.
The Daily Iowan
Iowa City, Iowa - Thursday, February 25, 2003

**Taking the mural route to the wall**

**BY MICHAEL DHAR**

The ghost of Delta Blues musician Mike Dugan, more commonly known as Mike Log, has been haunting University Park and the towns around it for several months when he saw the women's tanning salon.

"A lot of people have noticed the change. We've gotten a lot of compliments," said Krista Goldsberry, owner, stylist, and hair guru at The Pizza Pit.

The venture started last year when Goldsberry called her twin sister, Kristina, to ask if she would help her out. The two painted a set of memorial murals in the salon, which gained attention. "Girls came in and said, 'It looks nothing like mine,'" Goldsberry said.

When the sisters' hair stylist, Foreman, moved in to help, they expanded their offering to include more creative use of the space. They turned a pair of yellow emergency lights into a lens hanging from a painted ceiling.

The competition entailed a two-point shaving contest, a current billboard, as well as the Orange Bow logo. It was the basis for the mural design.

With the women's tanning salon's owner, Krista Goldsberry, and Foreman, both of whom have previously worked almost solely on people's bodies, the Gilmore sisters have also begun to turn down work for more individual styles. They do this to accommodate more individual styles. They do allow more individual styles.

The competition was called for demonstrations of their abilities while at work. But the giveaway is what the two painted the mural for, and Foreman chose the vaguely racy theme. "We wanted to do something fun," said Foreman.

"Half the fun," she added. "Make sure you dance over a floor of glass without thinking twice. Make sure you do it," said Foreman.

The majority of the songs on the album were written by Log and his band, The Purple Hearts.

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Protecting, Preparing Iowa

There is little risk of smallpox here in Iowa, and there are no plans at this time to vaccinate the general population. Still, the risk is real, and the department and its partners across the state are working to prepare Iowa for the highly unlikely appearance of smallpox.

Instead of mass vaccinations, the state is preparing to begin a voluntary program to vaccinate a strategic reserve of health care and public health workers in advance of any actual cases. These vaccinations are part of a larger plan outlining the state’s preparation for the unlikely event of a smallpox outbreak, including broader vaccinations in the event of a confirmed case in Iowa.

The Iowa Department of Public Health is working with local health departments, the Iowa Hospital Association, the Iowa Emergency Management Division, University of Iowa Hygienic Lab, and state medical and nursing associations to determine the most appropriate front line health-care professionals who would respond. They would be involved in the investigations or treatment of cases, and would track contacts and vaccinate those who have been exposed and those who will help prevent the spread of the disease.

"While vaccinations of key public health and medical personnel across the state may begin in the coming months, there is no recommendation to offer the vaccine to the general public," said Dr. Patricia Quinlisk, Iowa state epidemiologist. "This vaccine is very different from children's and the flu vaccine. This vaccine has a lot of complications and side effects."

A complicated vaccine

The current smallpox vaccine is very different from other flu vaccines. Based on historical data, it's expected that 14 to 52 people per million vaccinated will suffer life-threatening reactions, and one to two people per million vaccinated will die. As such, decisions about which Iowans to offer the vaccine will not be made lightly.

Besides the complications, about 25 percent of the population cannot receive the vaccine because of health conditions. Those include pregnancy, skin disorders, organ transplantation, or treatment for cancer or HIV. It will also not be offered to anyone who is a family or household contact of someone with the above conditions.

The department is forming regional smallpox response teams to be the first offered the smallpox vaccine. One group includes six regional public health response teams including disease investigators, epidemiologists, health lab workers and public health nurses and administrative personnel. Another group includes hospital-based teams.

Iowa's smallpox response proposal has been submitted to the federal Centers for Disease Control and Prevention (CDC). No vaccinations will begin in the state until the CDC allocates vaccine to Iowa and the Homeland Security Act becomes effective. The earliest, therefore, that vaccinations for anyone in Iowa could begin is January 24, 2003.

The state is beginning a voluntary program to vaccinate a strategic reserve of health care and public health workers.

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- Iowa's community-based toolkit
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- Questions and answers
- Recommendations for families
- Center for Public Health Practice
- National Pharmaceutical Stockpile
- Smallpox vaccination
- History of smallpox in Iowa
- Smallpox around the world
- La Viruela y su Vacuna

Online resources

- Iowa Department of Public Health
  http://www.idph.state.ia.us
- Iowa Emergency Management Division
  www.state.ia.us/emergencymanagement
- Iowa Homeland Security
  www.iowahomelandsecurity.org
- Dept. of Health & Human Services
  www.smallpox.gov
- Centers for Disease Control and Prevention
  www.bt.cdc.gov
Homeland Security in Iowa

The State of Iowa's homeland security mission is to detect, prepare for, prevent, protect against, respond to, and recover from terrorist attacks within the state. Governor Tom Vilsack appointed Ellen M. Gordon Iowa's Homeland Security Advisor in October of 2001, to oversee the state's homeland security efforts. Since that time, Gordon and the Iowa Emergency Management Division, of which she is administrator, have been working closely with government and private-sector partners to enhance the security of the citizens of our state.

The Iowa Homeland Security Initiative: Envisioning the Future is the foundation of the state's homeland security efforts. The Initiative evaluates the state's current security activities and makes recommendations to maximize the strengths and eliminate any weaknesses. The plan establishes Iowa's homeland security priorities and is the foundation on which to build a long-term security management program. Gordon, along with her partners in this endeavor, is currently working to prioritize and implement the plan's recommendations within the next three years.

There are things all Iowans can do to be safer and more prepared

Individuals, Communities Play a Role in Homeland Security

Homeland security is not just about what government is doing. It's something in which every Iowan can become involved. Whether it's forming a neighborhood watch group, or sitting down with your family to make a disaster plan, Iowans can do much to be safer and more prepared for a terrorism incident or any disaster.

To help citizens protect themselves and prepare for disasters, whether natural or human-made, a Community-Based Tool Kit has been created. The Tool Kit is designed to equip individuals and communities with the knowledge and resources to empower them, was created by the Iowa Emergency Management Division, local emergency management personnel, state agencies, law enforcement, and others from across the state.

"Since the September 11 attacks, there has been a heightened awareness of family security and public safety," said Iowa Homeland Security Advisor Ellen M. Gordon. "Iowans have asked what they can do to protect their families and their communities. A community-based approach will help to bolster our security efforts, providing a multi-faceted partnership that will empower Iowans, raise public awareness, and provide critical information in case of emergencies."

The Community-Based Tool Kit encourages citizens to work with local emergency management coordinators to start neighborhood-watch programs; provides families with a checklist of supplies to have on hand for emergencies and provides information that can help all citizens feel better prepared to cope with potential disaster.

For more information on Iowa Homeland Security or to download the Community-Based Tool Kit, visit www.iowahomelandsecurity.org. For more information on disaster preparedness, contact your local emergency management coordinator.

Courtesy of Iowa Emergency Management Division
What is Smallpox?

Smallpox is a contagious virus with no specific treatment that kills as many as 30 percent of those infected. The name smallpox is derived from the Latin word for “spotted” and refers to the raised bumps that appear on the face and body of an infected person.

There are two clinical forms of smallpox—variola major and variola minor. In either form, initial symptoms include fever, fatigue, and head and back aches. A characteristic rash, most prominent on the face, arms, and legs, follows in 2-3 days. The rash starts with flat red lesions that evolve at the same rate. Lesions become pus-filled and begin to crust early in the second week. Scabs develop and then separate and fall off after about 3-4 weeks. Variola major is the severe and most common form of smallpox, with an extensive rash and high fever. Variola minor is less common and a much less severe disease with death rates historically of 1 percent or less.

Smallpox outbreaks have occurred periodically for thousands of years, but the disease is now eliminated after a successful worldwide vaccination program. The last case of smallpox in the United States was in 1949. The last naturally occurring case in the world was in the African nation of Somalia in 1977. After the disease was eliminated from the world, routine vaccination against smallpox among the general public was stopped because it was no longer necessary for prevention.

Though the disease has been eliminated, there are still some stockpiles of the smallpox virus that exist in the world. However, in the aftermath of the terrorist events of September and October 2001, there is heightened concern that the variola virus might be used as an agent of bioterrorism. For this reason, the U.S. government is taking precautions for dealing with a smallpox outbreak.

Transmission

Generally, direct face-to-face contact is required to spread smallpox from one person to another. Smallpox can also be spread through direct contact with infected bodily fluids or contaminated objects such as bedding or clothing. Rarely, smallpox has been spread by virus carried in the air in enclosed settings such as buildings, buses, and trains. Humans are the only natural hosts of smallpox. Smallpox is not known to be transmitted by insects or animals.

A person with smallpox is sometimes contagious with onset of fever (prodrome phase), but the person becomes most contagious with the onset of rash. At this stage the infected person is usually very sick and not able to move around in the community. The infected person is contagious until the last smallpox scab falls off.

Smallpox Disease Progression

| Incubation Period | Exposure to the virus is followed by an incubation period during which people contract the virus without any symptoms and may feel fine. This incubation period averages about 12 to 14 days but can range from 7 to 17 days. During this time, people are not contagious.
| Initial Symptoms | The first symptoms of smallpox include fever, malaise, head and body aches, and sometimes vomiting. The fever is usually high, in the range of 101 to 104 degrees Fahrenheit. At this time, people are usually too sick to carry on their normal activities. This is called the prodrome phase and may last for 2 to 4 days.
| Early Rash | A rash emerges first as small red spots on the tongue and in the mouth. These spots develop into sores that break open and spread large amounts of the virus into the mouth and throat. At this time, the person becomes most contagious. Around the time the sores in the mouth break down, a rash appears on the skin, starting on the face and spreading to the arms and legs and then to the hands and feet. Usually the rash spreads to all parts of the body within 24 hours. As the rash appears, the fever usually falls and the person may start to feel better. By the third day of the rash, the rash becomes raised bumps. By the fourth day, the bumps fill with a thick, opaque fluid and often have a depression in the center that looks like a bellybutton. (This is a major distinguishing characteristic of smallpox.) Fever often will rise again at this time and remain high until scabs form over the bumps.
| Pustular Rash | The bumps become pustules—sharply raised, usually round and firm to the touch as if there’s a small round object under the skin. People often say the bumps feel like BB pellets embedded in the skin.
| Pustules and Scabes | The pustules begin to form a crust and then scab. By the end of the second week after the rash appears, most of the sores have scabbled over.
| Resolving Scabs | The scabs begin to fall off, leaving marks on the skin that eventually become pitted scars. Most scabs will have fallen off three weeks after the rash appears. The person is contagious to others until all of the scabs have fallen off.
| Scabs resoved | Scabs have fallen off. Person is no longer contagious.

Message from Iowa’s Governor

The events of the fall of 2001 changed us forever as a nation, and as people individually. Those events, from terrorist hijackings to deadly bacteria sent through the mail, made all of us aware of the possibility of a terrorist attack not just in our own state, but our own community as well.

Iowa has responded well to the unprecedented incidents with a coordinated and comprehensive strategy to protect our citizens. Lieutenant Governor Sally Pederson and I remain committed to ensure better detection, prevention, preparedness and response to any threats to Iowa’s security.

This packet of information being provided to you today is part of that effort. You’ll find several articles that tell you what you need to know about smallpox, as well as what plans the state has to deal with it in the highly unlikely event it should occur. Please keep it and refer to it should you have questions about smallpox and the vaccination program that is underway.

The dedication and cooperation shown throughout the state in putting together our smallpox response plan has been tremendous. While the state public health and medical communities have led the effort, their work would have been much more difficult without the assistance of the public safety, emergency management, and local county health officials. They are all part of Iowa’s efforts to respond to the president’s call to protect our health and safety.

Although the state is moving forward with a voluntary smallpox vaccination program, it is being done in the absence of a clear and direct threat. The nature of public health requires that front-line health workers be pre-vaccinated, so they are prepared to respond to any suspected outbreak without putting themselves at risk.

At this time, we are not recommending vaccinations for everyone. Should a clear threat or actual outbreak be reported anywhere, the state is prepared to protect our residents.

Iowans have shown many times they have the resilience and resourcefulness to deal with crises. I’m confident that in the same spirit with which we’ve helped each other cope with past disasters, we will successfully deal with any cards nature or humans might deal us.
SMALLPOX QUESTIONS AND ANSWERS

What should I know about smallpox?
Smallpox is an acute, contagious, and sometimes fatal disease caused by the variola virus (an orthopoxvirus), and marked by fever and a distinctive progressive skin rash. In 1980, the disease was declared eradicated following worldwide vaccination programs. However, in the aftermath of the events of September and October, 2001, the U.S. government is taking precautions to be ready to deal with a bioterrorist attack using smallpox as a weapon. As a result of these efforts: 1) There is a detailed nationwide smallpox response plan designed to quickly vaccinate people and contain a smallpox outbreak and 2) There is enough smallpox vaccine to vaccinate everyone who would need it in the event of an emergency.

How serious is the smallpox threat?
The deliberate release of smallpox as an epidemic disease is now regarded as a possibility, and the United States is taking precautions to deal with this possibility.

How dangerous is the smallpox threat?
Smallpox is classified as a Category A agent by the Centers for Disease Control and Prevention. Category A agents are believed to pose the greatest potential threat to public health and have a moderate to high potential for large-scale dissemination. The public is generally more aware of category A agents, and broad-based public health preparedness efforts are necessary. Other Category A agents are anthrax, plague, botulism, tularemia, and viral hemorrhagic fevers.

If I am concerned about a smallpox attack, can I go to my doctor and get the smallpox vaccine?
At the moment, the smallpox vaccine is not available for members of the general public. In the event of a smallpox outbreak, however, there is enough smallpox vaccine to vaccinate everyone who would need it.

The Disease
What are the symptoms of smallpox?
The symptoms of smallpox begin with high fever, head and body aches, and sometimes vomiting. A rash follows that spreads and progresses to raised bumps and pus-filled blisters that crust, scab, and fall off after about three weeks, leaving a pitted scar.

If someone comes in contact with smallpox, how long does it take to show symptoms?
After exposure, it takes between 7 and 17 days for symptoms of smallpox to appear (average incubation time is 12 to 14 days). During this time, the infected person feels fine and is not contagious.

Is smallpox fatal?
The majority of patients with smallpox recover, but death may occur in up to 30% of cases. Many smallpox survivors have permanent scars over large areas of their body, especially their face. Some are left blind.

Is smallpox spread?
Smallpox normally spreads from contact with infected persons. Generally, direct and fairly prolonged face-to-face contact is required to spread smallpox from one person to another. Smallpox can also be spread through direct contact with infected bodily fluids or contaminated objects such as bedding or clothing. Indirect spread is less common. Rarely, smallpox has been spread by virus carried in the air in enclosed settings such as buildings, buses, and trains. Smallpox is not known to be transmitted by insects or animals.

How many people would have to get smallpox before it is considered an outbreak?
One confirmed case of smallpox is considered a public health emergency.

Is there any treatment for smallpox?
Smallpox can be prevented through use of the smallpox vaccine. There is no proven treatment for smallpox, but research to evaluate new antiviral agents is ongoing. Early results from laboratory studies suggest that the drug cidofovir may fight against the smallpox virus; currently, studies with animals are being done to better understand the drug's ability to treat smallpox disease (the use of cidofovir to treat smallpox or smallpox reactions should be evaluated and monitored by experts at NIH and CDC). Patients with smallpox can benefit from supportive therapy (e.g., intravenous fluids, medicine to control fever or pain) and antibiotics for any secondary bacterial infections that may occur.

The Vaccine
Many vaccinations are required. Why don't people have to get the smallpox vaccine?
The last case of smallpox in the United States was in 1949. The last naturally occurring case in the world was in Somalia in 1977. After the disease was eliminated from the world, routine vaccination against smallpox among the general public was stopped because it was no longer necessary for prevention.

If someone is exposed to smallpox, is it too late to get a vaccination?
Vaccination within 3 days of exposure will completely prevent or significantly modify smallpox in the vast majority of persons. Vaccination 4 to 7 days after exposure likely offers some protection from disease or may modify the severity of disease.

How long does a smallpox vaccination last?
Past experience indicates that the first dose of the vaccine offers protection from smallpox for 3 to 5 years, with decreasing immunity thereafter. If a person is vaccinated again later, immunity lasts longer.

Is it possible for people to get smallpox from the vaccination?
No. The smallpox vaccine does not contain smallpox virus and cannot spread or cause smallpox. However, the vaccine does contain another virus called vaccinia, which is live in the vaccine. Because the virus is live, it can spread to other parts of the body or to other people from the vaccine site. This can be prevented through proper care of the vaccination site (e.g., hand washing and careful disposal of used bandages).

Is it possible to get vaccinia, the virus in the vaccine, from someone who has recently been vaccinated?
Yes. Vaccinia is spread by touching a vaccination site before it has healed or by touching bandages or clothing that have become contaminated with live virus from the vaccination site. Vaccinia is not spread through airborne contagion. The vaccinia virus may cause rash, fever, and head and body aches.

How safe is the smallpox vaccine?
The smallpox vaccine is the best protection you can get if you are exposed to the smallpox virus. Most people experience normal, usually mild reactions that include a sore arm, fever, and body aches. In recent tests, one in three people felt bad enough to miss work, school, or recreational activity or had trouble sleeping after receiving the vaccine. However, the vaccine does have some risks. In the past, about 1,000 people for every 1 million people vaccinated for the first time experienced reactions that, while not life-threatening, were serious. Rarely, people have had very bad reactions to the vaccine. Based on past experience, it is estimated that between 1 and 2 people out of every 1 million people vaccinated will die as a result of life-threatening reactions to the vaccine. Careful screening of potential vaccine recipients is essential to ensure that those at increased risk do not receive the vaccine.

Who should NOT get the vaccine?
Some people are at greater risk for serious side effects from the smallpox vaccine. Individuals with any of the following conditions, or living with someone who does, should not get the smallpox vaccine unless they have been exposed to smallpox. People who should not get the vaccine include anyone who is allergic to the vaccine or any of its components; pregnant women; women who are breastfeeding; anyone under 12 months of age; people who have, or have had, skin conditions (especially eczema and atopic dermatitis); and people with weakened immune systems, such as those who have received a transplant, are HIV positive, are receiving treatment for cancer, or are taking medications that suppress the immune system.

Is there any way to treat bad reactions to the vaccine?
Two treatments may help people who have certain serious reactions to the smallpox vaccine. These are Vaccinia Immune Globulin (VIG) and cidofovir. VIG and cidofovir are both administered under investigational new drug protocol.
Recommendations for Your Family

The terrorist attacks on the World Trade Center and the Pentagon have left many concerned about the possibility of future incidents in the United States. You can prepare for the unexpected and reduce the stress that you may feel now, and later should another emergency arise. Taking preparatory action can reassure you and your children that you can exert a measure of control even in the face of such events.

What You Can Do to Prepare

Finding out what can happen is the first step. Once you have determined the possible events and their potential in your community, discuss them with your family or household and develop a disaster plan together.

1. Create an emergency communications plan.
   Choose an out-of-town contact your family or household will call or e-mail to check on each other should a disaster occur. Your selected contact should live far enough away that they would be unlikely to be directly affected by the same event, and they should know they are the chosen contact. Make sure every household member has that contact’s, and each other’s, e-mail addresses and telephone numbers (home, work, pager and cell). Leave these contact numbers at your children’s schools, if you have children, and at your workplace. Your family should know that if telephones are not working, they need to be patient and try again later or try e-mail. Many people flood the telephone lines when emergencies happen but e-mail can sometimes get through when calls don’t.

2. Establish a meeting place.
   Having a predetermined meeting place away from your home will save time and minimize confusion should your home be affected or the area evacuated. You may even want to make arrangements to stay with a family member or friend in case of an emergency. Be sure to include any pets in these plans, since pets are not permitted in shelters and some hotels will not accept them.

3. Assemble a disaster supplies kit.
   If you need to evacuate your home or are asked to "shelter in place," having some essential supplies on hand will make you and your family more comfortable. Prepare a disaster supplies kit in an easy-to-carry container such as a duffel bag or small plastic trash can. Include "special needs" items for any member of your household (infant formula or items for people with disabilities or older people), first aid supplies (including prescription medications), a change of clothing for each household member, a sleeping bag or bedroll for each, a battery powered radio or television and extra batteries, food, bottled water and tools. It is also a good idea to include some cash and copies of important family documents (birth certificates, passports and licenses) in your kit.

Copies of essential documents — like powers of attorney, birth and marriage certificates, insurance policies, life insurance beneficiary designations and a copy of your will—should also be kept in a safe location outside your home. A safe deposit box or the home of a friend or family member who lives out of town is a good choice.

4. Check on the school emergency plan of any school-age children you may have.
   You need to know if they will they keep children at school until a parent or designated adult can pick them up or send them home on their own. Be sure that the school has updated information about how to reach parents and responsible caregivers to arrange for pickup. And, ask what type of authorization the school may require to release a child to someone you designate, if you are not able to pick up your child.
   During times of emergency the school telephones may be overwhelmed with calls.

For more information, contact your local American Red Cross chapter or visit http://www.redcross.org.

Courtesy of American Red Cross

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UI College of Public Health Serves as Preparedness Resource

Ensuring that Iowa’s public health workforce has the skills to prepare for, promptly identify, and respond to current and emerging health threats is the mission of the Iowa Center for Public Health Preparedness (ICPHP), based in the University of Iowa College of Public Health.

“The center serves as an important resource for upgrading the training and education of the state’s health and emergency providers,” said ICPHP director Christopher Atchison. “Our goal is to enhance the skills of frontline public health workers to deal effectively with challenges such as bioterrorism, terrorism, and other public health emergencies.”

The center sponsors a variety of learning opportunities, including conferences and an eight-month “train-the-trainer” program in public health preparedness. Applications are now being accepted from individuals interested in being certified as trainers and assisting with training efforts at the community level. A series of free “Grand Rounds” lectures on preparedness issues are broadcast statewide via the Iowa Communications Network. Previous Grand Round speakers have included the Assistant Surgeon General of the United States, an Ebola virus outbreak expert from the World Health Organization, and an expert in agrotERRORISM. Each lecture is digitally recorded and can be downloaded from the center’s web site or is available on VHS tape or CD ROM.

Funded by the Centers for Disease Control and Prevention through a cooperative agreement with the Association of Schools of Public Health, the ICPHP is one of 19 academic Centers for Public Health Preparedness located throughout the United States.

The center’s program partners include the Iowa Association of Local Public Health Agencies, Iowa Department of Public Health, Iowa Emergency Management Division, Iowa Hospital Association, Iowa Medical Society, Iowa Nurses’ Association, Iowa Pharmacy Association, Iowa State University College of Veterinary Medicine, Iowa State University Extension and the University of Iowa Hygienic Laboratory.

For more information about the Iowa Center for Public Health Preparedness, visit the center’s website at www.public-health.uiowa.edu/icphp/.

Courtesy of the University of Iowa

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National Pharmaceutical Stockpile Ready

In the event of a bioterrorism attack, the Iowa Department of Public Health (IDPH) has joined forces with the Iowa Emergency Management Division and the Centers for Disease Control and Prevention (CDC) to ensure the availability and rapid deployment of life-saving pharmaceuticals, antidotes, other medical supplies, and equipment necessary to counter the effects of nerve agents, biological pathogens, and chemical agents. This joint effort has been dubbed the National Pharmaceutical Stockpile Program (NPS).

The CDC has stockpiles stationed around the country to get supplies to areas in need quickly. Since the NPS could take anywhere from two to 12 hours to arrive, it is important to note that the NPS was designed to provide medical supplies in the event that supplies at the local level are exhausted.

A request for the NPS may follow a terrorist attack in which results are extremely visible. It is more likely, however, that subtle signs, such as unusual patterns of sickness and death identified through the nation’s disease outbreak surveillance and epidemiology network, will alert health officials to the possibility (and confirmation) of a biological or chemical terrorism incident. To receive the NPS, Iowa can directly request the Director of CDC to send it. Once requested, the Director of CDC has the authority, in consultation with the Surgeon General, and the Secretary of Health and Human Services, to send the NPS.

The public will be informed of distribution sites to receive treatment. There will be alternate sites for those already experiencing symptoms. People will be allowed to pick up medicine for family members, but will need to provide medical information on their behalf. It will be extremely important for those receiving medications to follow the health care professional’s directions to avoid infection. Also note that there are several different medications that can be used to treat one particular disease. Not everyone will receive the same medication for the same disease.
Vaccination – Method, Safety and Reactions

The smallpox vaccine helps the body develop immunity to smallpox. It is made from a virus called vaccinia which is a "pox"-type virus related to smallpox. The vaccine contains the "live" vaccinia virus – not dead virus like many other vaccines. For that reason, the vaccination site must be cared for carefully to prevent the virus from spreading. The vaccine does not contain the smallpox virus and cannot give you smallpox. Still, the vaccine can have side effects.

Currently, the United States has a big enough stockpile of vaccine to vaccinate everyone who might need it in the event of an emergency.

Length of Protection
Smallpox vaccination provides high-level immunity for 3 to 5 years and decreasing immunity thereafter. Historically, the vaccine has been effective in preventing smallpox infection in 95% of those vaccinated. In addition, the vaccine was proven to prevent or substantially lessen infection when given within a few days of exposure.

It is important to note, however, that at the time when the smallpox vaccine was used to eradicate the disease, testing was not as advanced or precise as it is today, so there may still be things to learn about the vaccine and its effectiveness and length of protection.

Receiving the Vaccine
The smallpox vaccine is not given with a shot as most people have experienced. It is given using a bifurcated (two-pronged) needle that is used to prick the skin a number of times in the upper arm.

Components of a smallpox vaccination kit including the diluent, a vial of Dryvax® smallpox vaccine, and a bifurcated needle.

If the vaccination is successful, a red and itchy bump develops at the vaccine site in three or four days. In the first week, the bump becomes a large blister, fills with pus, and begins to drain. During the second week, the blister begins to dry up and a scab forms. The scab falls off in the third week, leaving a small scar. People who are being vaccinated for the first time have a stronger reaction than those who are being revaccinated.

Post-Vaccination Care
Because the virus is live, it can spread to other parts of the body or to other people. It may cause rash, fever, and head and body aches. In certain groups of people, complications can be severe.

Benefit of Vaccine Following Exposure
Vaccination within 3 days of exposure will prevent or significantly lessen the severity of smallpox symptoms in the vast majority of people. Vaccination 4 to 7 days after exposure likely offers some protection from disease or may modify the severity of disease.

Smallpox Vaccine Safety
The smallpox vaccine is the best protection you can get if you are exposed to the smallpox virus. Anyone directly exposed to smallpox, regardless of health status, would be offered the smallpox vaccine because the risks associated with smallpox are far greater than those posed by the vaccine.

There are side effects and risks associated with the smallpox vaccine. Most people experience normal, usually mild reactions that include a sore arm, fever, and body aches. However, other people experience reactions ranging from serious to life threatening.

Specifically, these people are most likely to have serious side effects and should not be given the vaccine:

- People who have had, even once, skin conditions (especially eczema or atopic dermatitis)
- People with weakened immune systems, such as those who have received a transplant, are HIV positive, are receiving treatment for cancer, or are currently taking medications that suppress the immune system
- Pregnant women because of the risk it poses to the fetus
- Women who are breastfeeding
- Children younger than 12 months of age and, for non-emergency use, children younger than 18 years of age
- Those allergic to the vaccine or any of its components

Reactions to the Vaccine
In the past, about 1,000 people for every 1 million people vaccinated for the first time experienced reactions that, while not life-threatening, were serious. These reactions included a toxic or allergic reaction at the site of the vaccination, spread of the vaccinia virus to other parts of the body and to other individuals, and spread of the vaccinia virus to other parts of the body through the blood. These types of reactions may require medical attention.

In the past, between 14 and 52 people out of every 1 million people vaccinated for the first time experienced potentially life-threatening reactions to the vaccine. Based on experience, it is estimated that 1 or 2 people in 1 million who receive the vaccine may die as a result. Careful screening of potential vaccine recipients is essential to ensure that those at increased risk do not receive the vaccine.

For more information, visit www.cdc.gov/smallpox, or call the CDC public response hotline at (888) 246-2646 (English), (888) 246-2857 (Español), or (866) 874-2646 (TTY)

The Role of Iowa's Hospitals

Just as they do when preparing for tornadoes, aircraft accidents, and other events that could result in multiple casualties, Iowa’s hospitals are working closely with federal, state, and local agencies to ensure Iowa is prepared and protected against smallpox. All of the state’s hospitals regularly train and prepare for large-scale disasters and public health emergencies. Since the September 11 attacks, hospitals have in particular emphasized readiness for the possibility of bio-terrorism, including the use of smallpox.

Iowa’s smallpox plan calls for one or two hospitals in each of six regions to prepare medical teams that can quickly respond to a smallpox outbreak. Hospitals included in the plan must meet certain criteria, such as having two isolation rooms. The plan also includes vaccinating all team members for smallpox. Iowa’s hospitals support this regionalized effort because it minimizes the risks that are part of any smallpox inoculation while providing the medical professionals and facilities needed to respond should there be a smallpox outbreak. Physicians, nurses, and other hospital staff from across the state have volunteered for these medical teams because they recognize that while the threat to Iowa is low, Iowans and their hospitals should be prepared and protected.

Iowa’s hospitals are proud and ready to do their part to assist the State of Iowa in implementing its smallpox planning. Our state can count on its medical facilities and the professionals staffing them to work as a team with federal, state, and local authorities, and with all people dedicated to the health, safety and security of Iowans.

Courtesy of Iowa Hospital Association

Iowa's six smallpox planning regions.
A History of Smallpox in Iowa

Although smallpox could have existed earlier, the first recorded signs in Iowa were from Hamburg on Nov. 18, 1898, where it appeared that the source of infection came from Nebraska City or Omaha, Nebraska.

At the end of June 1899, 249 cases with two deaths were reported from fifteen counties, which included: Appanoose, Audubon, Cedar, Fremont, Henry, Howard, Johnson, Jones, Lee, Scott, Shelby, Warren, Washington, Winneshiek, and Wayne.

Smallpox spread until hardly a county in the state didn't have one or more cases. Many physicians didn't recognize it and neglected to report it to the State Board of Health, which wanted it for quarantine purposes. Also, between 1899 and 1900, many cities, towns and townships didn't keep good records on the number of cases.

Around the turn of the century, around 5,000 cases of smallpox were reported and a total number of 25 deaths. Recognizing the mistakes physicians were making in the diagnosis of smallpox the board sent pamphlets to wherever it was known or suspected to exist and visited many localities when questions occurred about diagnosis or to enforce quarantine regulations.

At the same time, the board started to recommend vaccination as the means for prevention. If smallpox appeared in a community, the board believed that every person had to get the vaccination, and if employed, the vaccination was a condition to continue employment. Also, all children had to present a certificate of successful vaccination before entering school.

After WWI, around 4,505 smallpox cases and a total of 22 deaths were reported during a two-year period. Shortly afterward, smallpox reached its peak with a little over 13,000 reported cases.

Before the Great Depression a considerable number of smallpox cases was still being reported. The board believed that with vaccination readily available, there was no reason for contracting smallpox.

The number of cases started to drop around 1935, but until this time it was one of the most prevalent communicable diseases in Iowa. By WWII, its occurrence was reaching low levels. During this period only 210 cases of smallpox and one death were reported.

Although there was a low incident of smallpox cases, alerts were still maintained because the State Board of Health, now called the Iowa Department of Public Health, believed the numbers could increase at any time. The number of cases continued to drop because of vaccination until the late 1940's when Iowa's last smallpox cases were reported.

Smallpox is at least 3000 years old. The first credible evidence of its existence comes from Egypt and it is believed to have spread through India to China and Japan. Smallpox came to Europe in the first few centuries A.D., but the disease never became established there until the time of the Crusades, when the population increasingly moved around.

The disease played a fundamental role in the European conquest of South America. It reduced the fighting capability of the native armies, killing more than 3 million Aztecs in the 1500's. One hundred years later, the North American east coast was settled by Europeans, and with these colonies came outbreaks of smallpox among the eastern Native American Indians.

During the 1600's and 1700's, smallpox was the most serious infectious disease in The West and accounted for a substantial proportion of deaths, especially among town dwellers.

Today, smallpox is considered eradicated - the equivalent of extinct. The last known case occurred in Somalia on October 26, 1977.

Smallpox eradication became possible when, during the 18th century, Edward Jenner discovered vaccination. He became convinced that an infection with cowpox could protect against smallpox. He then induced immunity by transferring cowpox from the hand of a dairymaid to the arm of a young boy.

In the late 1950's, the World Health Assembly fostered cooperation between the United States and the Soviet Union to eradicate smallpox in the midst of Cold War politics. The United States can be proud of its role in the worldwide vaccination program, contributing hundreds of workers and millions of dollars for the eradication of a disease that no longer involved our nation.
La Viruela y su Vacuna

La Enfermedad
La viruela es una enfermedad infecciosa grave, contagiosa que en algunos casos puede causar la muerte. No hay tratamiento especial para la viruela y la única forma de prevención es la vacunación. El nombre viruela proviene de la palabra latina que significa "manchado" y se refiere a los abultamientos que aparecen en la cara y en el cuerpo de una persona infectada. Durante miles de años han ocurrido ocasionalmente epidemias de viruela; sin embargo, luego de un exitoso programa de vacunación mundial se logró erradicar la enfermedad. En los Estados Unidos, el último caso de viruela se registró en 1949.

La Vacuna contra la Viruela
La vacuna contra la viruela ayuda al cuerpo a crear inmunidad a esta enfermedad. La vacuna se hace con un virus llamado vaccinia que es otro tipo de virus "pox" relacionado con la viruela. En esta vacuna, el virus vaccinia está "vivo"—no muerto como en muchas otras vacunas. Por esa razón, hay que cuidar muy bien el sitio donde se aplica la vacuna para evitar que el virus se extienda a otras partes del cuerpo. La vacuna no contiene el virus de la viruela y, por lo tanto, no puede causar la enfermedad. Actualmente, en los Estados Unidos hay cantidades suficientes de las vacunas contra la viruela para aplicarla a todos en el país que pudieran necesitarla en caso de una emergencia. La vacuna se sigue produciendo sin interrupción.

Duración de la Protección
La vacuna crea un alto nivel de inmunidad contra la viruela durante un período de 3 a 5 años y, de allí en adelante, la inmunidad empieza a disminuir. Pero, si una persona se vuelve a vacunar, la inmunidad durará todavía más. Históricamente, la vacuna ha sido eficaz para prevenir la infección con el virus de la viruela en 95% de las personas vacunadas.

Aplicación de la Vacuna
La vacuna contra la viruela no se aplica con una aguja hipodérmica. No se trata de una inyección como la que conoce la mayoría de la gente. Se utiliza una aguja bifurcada, es decir con dos puntas, que se sumerge en la solución de vacuna. Cuando se saca de allí, queda una gota de la vacuna en las puntas. Con la aguja, se pincha la piel varias veces en pocos segundos. Los pinchazos no son profundos, pero dejarán esa zona adolorida y harán salir una o dos gotitas de sangre. Normalmente, la vacuna se aplica en la parte superior del brazo.

Si la vacunación es exitosa, luego de tres o cuatro días aparecerá, en el lugar donde se aplicó, un abultamiento rojo que produce comezón. En la primera semana, el abultamiento se transforma en una ampolla que se llena de pus y luego el pus empieza a salir. Durante la segunda semana, la ampolla comienza a secarse y se forma una costra. La costra se cae durante la tercera semana y deja una cicatriz pequeña.

Cuidados Después de la Vacunación
Es muy importante seguir las instrucciones para cuidar el sitio donde se aplicó la vacuna. Debido a que el virus está "vivo" puede propagarse a otras partes del cuerpo y, tal vez, hasta a otras personas. El virus vaccinia (el virus vivo de la vacuna contra la viruela) puede causar erupción, fiebre, dolores de cabeza y dolores en el cuerpo.

Beneficios de la Vacuna Luego de la Exposición al Virus
Si la vacuna se aplica dentro de los 3 días siguientes a la exposición al virus, se evitarán los síntomas de la viruela o se atenuará considerablemente su gravedad en la gran mayoría de las personas. La vacuna aplicada dentro de los 4 a 7 días siguientes a la exposición, probablemente ofrecerá cierta protección contra la enfermedad o podría modificar su gravedad.

Inocuidad de la Vacuna contra la Viruela
La vacuna es la mejor protección que uno puede recibir si ha estado expuesto al virus de la viruela. Los riesgos asociados con esta enfermedad son mucho mayores que los que presenta la vacuna.

Quiénes NO Deben Recibir la Vacuna Contra la Viruela
Las personas que tienen más probabilidades de presentar efectos secundarios graves son: quienes han padecido, aunque sea una sola vez, enfermedades de la piel (especialmente eczema o dermatitis atópica) y las que tienen el sistema inmunológico debilitado, como por ejemplo las que han recibido un trasplante, son VIH positivos, están en tratamiento para el cáncer o están tomando algunos medicamentos (como esteroides) que deterioran el sistema inmunológico.

Por otra parte, las embarazadas no deben recibir la vacuna porque representa un riesgo para el feto. Tampoco la deben recibir las mujeres que están amamantando ni los niños menores de 12 meses de edad. Por otra parte, el Comité Asesor sobre M étodos de Inmunización (ACIP) aconseja que no se aplique la vacuna contra la viruela, a menos que se trate de una situación de emergencia, a personas menores de 18 años de edad. Además, quienes sean alérgicos a la vacuna o a alguno de sus componentes no deberán recibir la vacuna.

En el pasado, unas 1,000 personas por cada millón de las que se vacunaron por primera vez experimentaron reacciones que, a pesar de no poner en peligro su vida, fueron graves. Entre 14 y 52 personas por cada millón de las que se vacunaron por primera vez experimentaron reacciones que podían poner en peligro su vida. Sobre la base de la experiencia acumulada, se calcula que de 1 a 2 personas de cada millón de las que reciben la vacuna por primera vez, podrían morir como resultado de ella. Es fundamental un examen cuidadoso de los posibles receptores de la vacuna para asegurar que los que se encuentran expuestos a mayor riesgo no la reciban.

Disponibilidad de la Vacuna contra la Viruela
Luego de los sucesos de septiembre y octubre de 2001, el Gobierno de los Estados Unidos tomó otras medidas para estar mejor preparado en caso de un ataque terrorista. El Gobierno de los Estados Unidos dio órdenes de producir la vacuna contra la viruela en cantidades suficientes para vacunar a la población estadounidense en caso de un brote. En estos momentos, el Gobierno de los Estados Unidos tiene acceso a suficientes dosis de vacuna contra la viruela para responder con eficacia a un brote de viruela.


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