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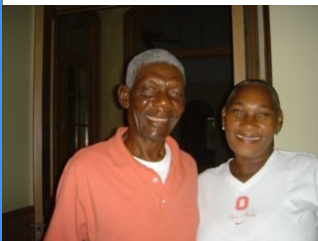
In Haiti—the Harvest can be Great but the Workers are Few . . .



Haiti is the western half of the island of Hispaniola, located between Cuba and Puerto Rico



A young Haitian boy stares at Doc between leaves of a small tree.



Parice (Dr. Nord's Haitian interpreter and his wife Charite are visiting America for the first time this summer.

As I stepped out of the American Airlines Airbus, the hot muggy air slapped against my face, and I could immediately feel the beads of sweat forming on my face and chest. My glasses, which had become accustomed to the air-conditioned jet, were now coated with a layer of fog. If someone had blindfolded me, my instincts would tell me that I had just arrived in Haiti. There is no mistaking the feel of the moist hot air, the sound of the steel band playing just outside the airport doors, and the smell that is distinctly Haitian. The familiar sights and sounds that I have come to know have changed little since 1995, when I started coming to Haiti. I love the Haitian people, and it is unconscionable that their government does little to elevate the population out of the deep and widespread poverty that exists. Their neglect increases the risk of infection due to malnutrition, poor unaffordable healthcare, and poor sanitary practices. The government is oblivious to a people who are starving to death while inflation grows out of control. They undermine the goodwill of caring people who want to bring food, building supplies, medicines, and other materials needed to help these

people live a better way of life, by levying high taxes or confiscating the items in customs for their own personal gain. Most Haitian people would say, "my government does not know that I exist, because it does nothing for me." It is plain to see that money given by foreign governments to the Haitian authorities for welfare projects seldom reach the poor people who need it most.

It's no wonder why a large number of Haitian people revolt to demand a better standard of living as they live in sewage, drink unclean water, eat (maybe) one meal a day, suffer from a wide range of illnesses, and hope to live in a shelter that has a solid roof and dry dirt floor.

Many of the Christian people in Haiti believe that God has abandoned them because their government dedicated their country to the religion of Voodoo 200 years ago. Recently, this dedication to Satan was not renewed as many of the people denounced this action. Hopefully they will put their trust in the only true 'Being' that can change their nation, God. He alone has the power to raise the nation out of Satan's stronghold and give the people the blessings they desire.

In the meantime, as God continues to transform the Haitian people, the harvest continues to be great, but the workers are few. I implore you to pray for and support any missionaries who will be going to Haiti or any other place around the world to spread the love of God and to reach out and help those in need with the gifts and tools God has empowered them to use.

I want to thank everyone who prayed for my team while we were in Haiti. We treated about 250 people in the clinic and performed 50 surgeries. We felt very blessed and stayed healthy. God was faithful and answered many prayers as He watched over us and provided for our needs. I was able to bring back Parice (my interpreter) and his wife Charite for 8 weeks to visit us and some of the other churches that support Pillatre Christian Center. Please pray for their health and safety as they travel during their time here in the USA. They will leave to go back to Haiti August 23, 2008.

May the Lord of all keep you healthy and provide for all your needs.

Dr Harold

International Group B Strep Awareness Month

July is International Group B Strep awareness month. Group B Strep (GBS) is a bacteria naturally found in the digestive tract, vagina, and rectum. In the U.S., 1 in 4 women carry this type of bacteria. If you are a carrier, it means the bacteria is present, but causes no signs or symptoms. GBS is not a sexually transmitted disease and being a carrier does not mean you are unclean. In pregnancy, the presence of GBS can pose a potential threat to the newborn at the time of delivery. Without proper screening and treatment of the mother, the baby is at risk of contracting GBS.

Routine screening for GBS is done at 35-37 weeks gestation. This is done in the office with a vaginal/rectal swab, which is then sent for culture. Testing can also be done on urine. If the presence of GBS is detected, the mother will be treated at the onset of labor in the hospital with intravenous antibiotics. Penicillin is the antibiotic of choice, but if an allergy is present, there are other alternatives. If active labor occurs before cultures are obtained or before results are received, the mother would be treated with antibiotics as prophylactic treatment. Even those undergoing cesarean section are screened and treated for GBS, as their babies may also be at risk of contracting the bacteria.

Mothers at higher risk of delivering a baby with possible GBS infection are those whose labor or membranes have ruptured before 37 weeks, rupture of membranes 18 hours or more before delivery, fever during labor, urinary tract infection during pregnancy from GBS infection, or a previous baby with GBS infection. In these

instances, intravenous antibiotics are administered for prevention and protection. According to the CDC, if the mother tests positive for GBS and she is not in the high risk category, then chances of delivering a baby with GBS are 1 in 200 if IV antibiotics are not given and 1 in 4000 if IV antibiotics are given.

Newborns are watched closely in the first 24-48 hours of life for any signs of distress that would indicate possible infection. Respiratory distress, fever, lethargy, heart and blood pressure instability can all be signs of possible infection. Cultures may be obtained to determine the cause of the infection and antibiotics administered to treat, if necessary. Since routine screening of mother for the presence of GBS, the infection rates of newborns have decreased.

Proper prenatal care is essential to the health of mother and baby. Screening for GBS at 35- 37 weeks gestation is done to give your newborn the best start at life outside the womb. If you have any further questions regarding GBS feel free to contact our office and speak to one of the nurses.

References

<http://www.americanpregnancy.com>

<http://acog.org>

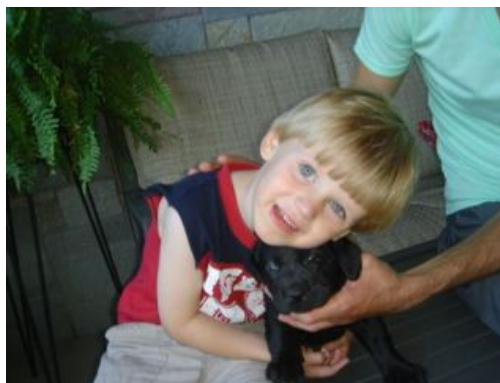
<http://cdc.gov/groupbstrep>

The dog days of summer

Dr. Harold's Labrador, Angel, gave birth to eight black lab puppies on June 10th



Ernie and Ruthie observing the puppies during a feeding frenzy



One of the puppies gets love from Axel



Rae enjoying one of her first solid food feeding frenzies