

To Your Health!

By Judy Hargis, P.A., and Audeen Wagner



New optometrist comes to Vernonia

Dr. Jamal Masalmeh, OD, is now seeing patients at Vernonia Eye Clinic, 622 Bridge Street, where he shares the building with Vernonia Dental and Vernonia Pharmacy. Dr. Masalmeh (pronounced "Mass-ALL-ma") is here two days a week, Mondays and Wednesdays, from 9:00 a.m. to about 5:00 p.m., with plans to extend the hours to an additional half-day as patient needs dictate. He will have an assistant in Vernonia, who will help him in all areas of clinic operations.

Dr. Masalmeh offers a full-service eye clinic and, as soon as he gets fully set up and operational, will have space and equipment for dispensing eyeglasses and contact lenses in Vernonia, in addition to performing eye exams, diagnosing and treating diseases of the eye including Glaucoma and Diabetic eye exams, and prescribing eyeglasses and contact lenses. He plans to keep the eyeglasses dispensary open 3-4 days a week, so patients can get their glasses or contact lenses even when the doctor is not at the clinic.

Dr. Masalmeh was born and raised in Syria. He came to the United States after high school, entering college and earning a degree in Engineering at Valparaiso University in Indiana, and a master's at Bradley University in Peoria, IL. After working six years in the automotive industry in Michigan, he went back to school, this time studying pre-med at Central Michigan University, then on to Optometry school at Pacific University in Forest Grove. He worked for a number of years in the Portland area after graduating from Pacific. He also worked for a year in the hospital of an Indian reservation, running the eye clinic and working in the ER when needed. He currently works at 20/20 Eye Care Professionals in Tigard. And now, Vernonia Eye Clinic, as well.

The Masalmeh family lives in Hillsboro; he and his wife, Eman Nabils, have five children, who range in age from 12 to the newest member of the family, just a few weeks old. In his spare time, Dr. Masalmeh likes to spend time with his family. They take trips to the coast, and enjoy camping and the great outdoors in Oregon. He also likes to read, write, swim, bicycle, hike and travel.

He is passionate about eye care for children of all ages, even infants, and will work with parents and schools, with the goal of better vision for all kids. "I am excited about offering full-service optometry in Vernonia," Dr. Masalmeh says. "Even the commute is great – all the traffic is going the other way!"

It's obvious that Vernonia's healthcare community is doing well and growing – with medical, dental, pharmacy, and optometry services. Welcome to Vernonia, Dr. Masalmeh!

Don't let winter blues make you blue

by the American Counseling Association

Not feeling yourself lately? Perhaps you're a bit sluggish, a little irritable, sleeping longer,

or just feeling a bit down about everything? Welcome to seasonal depression, or as it's commonly known, the "winter blues" or the "winter blahs."

It's a much more common

problem than most people realize, and yes, it can be serious. Some people find winter weather depresses them enough that it interferes with normal life and leads to severe feelings of depression. Such cases are known as Seasonal Affective Disorder (SAD) and can be serious enough to warrant treatment by a mental health professional. **Please see page 20**

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Had your whooping cough shot?

Oregon state health officials are calling on teens and adults to make a pledge to protect the health of babies: Get vaccinated against pertussis (commonly called whooping cough) to avoid passing the illness to vulnerable infants.

Although infants are routinely vaccinated against pertussis, their immune systems are not mature enough to fully protect them until about six months of age. Also, they do not complete the first series of vaccinations until about six months. During that time they are vulnerable to infection from teens and adults who may carry the illness without realizing it.

Dr. Paul Cieslak, communicable disease manager with the Oregon Department of Human Services Public Health Division, said the consequences can be severe. Almost half of the 342 infants diagnosed with pertussis in Oregon since 2000 have had to be hospitalized. Four infants in Oregon have died since 2003.

"We need to try to vaccinate everyone to minimize the likelihood that this will happen to other babies," Cieslak said. The key to protecting everyone in the community is "herd immunity," he said. When vaccination is widespread, diseases such as pertussis don't have an opportunity to travel through the population. In that way, infants who are too young to be vaccinated are kept from harm.

For maximum protection, Cieslak recommends:

- Vaccinate children against diphtheria, tetanus and pertussis at two, four, six and 15-18 months, and again at four years. DTaP is the name of the vaccine used for children under age seven.

- Vaccinate infants' parents and siblings (age 10 and older) with one dose of Tdap, a booster vaccine that helps protect adolescents and adults from getting pertussis and transmitting it to infants. Even adolescents and adults who don't typically come in contact with small children should be vaccinated.

- Vaccinate health care workers with Tdap to ensure they don't expose newborns and other vulnerable patients to pertussis.

Health officials estimate that

only a quarter of Oregon teens have been vaccinated with Tdap.

Whooping cough is caused by the bacterium *Bordetella pertussis*, which is found in the mouth, nose and throat of an infected person. The illness begins as a mild infection with symptoms resembling the common cold. However, with pertussis the cough becomes more severe and the coughing episodes more numerous. Infants and young children may have the high-pitched whoop produced when they try to take a quick, deep breath after the coughing fit. The cough can last for several weeks.

Infants younger than 12 months are at highest risk for severe pertussis, which can lead to hospitalization and even death. In 2004-05, the U.S. Centers for Disease Control and Prevention reported 66 deaths from pertussis. Children three months-old or younger accounted for 85 percent of these deaths. In 2008, 175 cases in both adults and children were reported in Oregon.

Pertussis is highly contagious. Around 80 percent of non-immune household members will contract it from a member who is infected. The disease is common in the U.S. In 2008, the CDC recorded more than 9,000 cases. While this is down considerably from the 150,000 cases a year before the vaccine was available, it remains one of the most common vaccine-preventable childhood diseases in the country.

Cieslak said the success of vaccination programs has lulled some people into thinking childhood diseases are things of the past.

"During the past century pertussis was a major cause of childhood death," he said. "Widespread vaccination has dramatically reduced the number of cases. Because of this success, people tend to think old diseases like pertussis are no longer a threat. But they are still with us, so we have to stay on guard and keep our vaccination rates up."

Additional information about pertussis or the Oregon Immunization Program can be found on the Web at <http://oregon.gov/DHS/ph/index.shtml>.