

Success story:

Recently we have had several full breastfeeding women who have had wanted to exclusively breastfeed but have felt some pressure. One woman had a baby with a "mild" tongue tie who was not back at birth weight at 2-weeks, another two women have been engorged. We have been able to assist these women in meeting their breastfeeding goals (and avoid formula), we have also been able to reassure them. There is follow-up and support for breastfeeding in our community.

1. **Vitamin D Drops**--The WIC Office at 130 Seward Street, Suite 508 in Juneau has Vitamin D drops to distribute. Please contact: Sherry Brakes – sherry.brakes@alaska.gov phone: 907-465-3100 by February 4, 2015, If you are interested in receiving these Vitamin D Drops. Supplies are limited and depending on caseload, we have determined how many boxes of drops each agency will receive. After we have sent out the initial supply, we will review how many boxes are left and will distribute accordingly. For information on AK WIC policies regarding Vit D drop, please go to http://dhss.alaska.gov/dpa/Documents/dpa/programs/nutri/downloads/Admin/PolicyandProcedures/Admin_PandP_Ch2.pdf page 97.

2. **Mail Out Vendor (MOV)**

We have received many questions regarding the status of MOV packages. We suggest that your staff keep the following information handy for easy reference. If a package needs to be tracked please email erin.khmelev@alaska.gov to request a tracking number. Reminder: do not include participant names in your email request. Instead, include the WIC ID and benefit number.

Please be very careful when voiding an MOV benefit.

Be sure to confirm that an MOV order has NOT already been processed by the Mail Order Vendor (AIRSA) before voiding.

Procedure:

- a. Go to the Benefit History tab in the participant folder.
- b. Highlight or click on the benefit (order) that you want to void.
- c. Click on "Show Details" (lower right hand corner of screen).
- d. Check the "Status" (Upper left under Benefit number on the "Benefits Details" screen).
 - Issued:** Clinic staff has printed an MOV food benefit. AIRSA has not yet printed the packing slip; therefore the benefit can be voided by the clinic.
 - Paid:** AIRSA has printed the packing slip and will not see any changes made by the clinic. The MOV benefit should not be voided. If a prescription is in paid status and needs to be voided, contact Erin Khmelev immediately at (907) 465-8630 or erin.khmelev@alaska.gov before making any changes.
 - Voided:** Clinic staff has voided the MOV benefit.

3. **Tips for Caseload:** see attachment "Tips for Caseload" Part 2 of the Influential Clinic Assessment provided by the Washington State WIC Nutrition Program. This week's theme is "Connecting to WIC". Questions or concerns can be directed to dana.kent@alaska.gov or call 465-5322.

Tips for Upcoming Management Evaluations and State Technical Assistance Reviews (STAR)

Food Delivery and Accountability is one of eleven functional areas included in WIC. Some of the common findings within this area identified during recent Management Evaluations include leaving warrant stock unlocked and failing to maintain the daily warrant tracking log. Both findings are easily remedied by having a set procedure to keep and maintain warrant stock in a locked location and daily documenting the warrant stock use on the WIC Warrant Stock Tracking Form at each printer in your office. Please send questions/concerns to dana.kent@alaska.gov or call 465-5322.

4. Quarterly Teleconference Recording---The link to the quarterly WIC Local Agency Teleconference is at: PLAY RECORDING (1 hr 28 min) <https://stateofalaska.webex.com/stateofalaska/ldr.php?RCID=d4408b60a495705a3e03d71a0e702412>
The recording will be posted on the WIC website next week at <http://dhss.alaska.gov/dpa/Pages/nutri/wic/localagencies/latraining.aspx>.
5. **Yogurt and potatoes:** This is a reminder that coordinators will receive further training on the addition of yogurt and potatoes, probably at the March Quarterly Meeting. The state is finalizing plans for yogurt and potatoes and there will be notification before either yogurt or potatoes go into effect. Vendors will be notified to the changes as well. Regarding yogurt, WIC will authorize 32 oz containers of plain yogurt to women and children 2-5 years. This is to simplify the process for clients and vendors. (Smaller sizes of yogurt do not meet the full nutritional benefit of 32 oz). We are waiting to roll out yogurt for children 12-23 months until the labeling becomes more consistent and less confusing to clients and cashiers. At this time, whole yogurt may be labeled as “whole”, “original” or other wording, so it is not easy to tell which quarts of yogurt contain whole milk. Please note that in conjunction with your input, the above decisions were made in consideration of the administrative burden the changes place upon our diminishing collective resources.

Please direct your questions to Jennifer Johnson, at jennifer.johnson@alaska.gov.

6. **Rethinking lactose intolerance: A guide for including dairy foods in the diet-** Information attached. Please contact Jennifer Johnson at Jennifer.johnson@alaska.gov with questions and suggestions.
- 7.
8. ⇒The “Overweight and Obese Women” and “Overweight Infants and Children” reports on the SPIRIT Utilities site: <https://wicspiritprod1.dhss.alaska.gov/WICSPIRITPROD1/SpiritUtilities/Default> are now available to clinic staff.
We intended to do this earlier and apologize for any inconvenience.



⇒If your agency has no participants with the risk factor addressed in the “Obesity 2-5 Year Olds” report (for the date range that you choose), your agency will not display at all in the results. In other words, rather than showing your agency number with a zero in each column, the agency does not appear in the results display.
The report will pull data on participants that were certified or recertified between the dates that you choose. This report is also on the SPIRIT Utilities site.

SPIRIT Help Desk Info:

Send all questions, issues and errors to the WIC SPIRIT Helpdesk at wicpsirithelpdesk@alaska.gov or phone them at 907-334-4900.

Nice To Know:

9. **Drink Different: Feasible Strategies to Reduce Obesity** report at <http://www.milkeninstitute.org/publications/view/683>
- 10.

Rethinking Lactose Intolerance: A Guide for Including Dairy Foods in the Diet

Dennis Savaiano, Virginia C. Meredith Professor, Purdue University Department of Nutrition Science

Why Drink Milk? What History Shows Us



If you think about it, drinking the milk of a cow seems a little strange.

We are hunter-gatherers. We hunt animals for their meat, and we grow and gather vegetables, fruits, and nuts. One of the real advantages of herd animals is that that they are a long-term “bank account.” Humans invest in these animals

by having them graze, then reap the benefit by either using their milk or eating their meat. Gathering their milk is a way to live off the interest of the bank account.

The milk of a cow is highly nutritious. It is a good source of protein, calcium, and riboflavin as well as other vitamins and minerals. Adding vitamin D enhances this nutritional value. The nutrition that milk provides per calorie makes it a nutrient-dense food. It is not designed for humans exactly, but we eat milk as part of complex mixed diet of many different foods. Cow’s milk shouldn’t replace human milk for infants due to their different nutrient profiles.

Why Be Concerned with Calcium in the Diet?

- Calcium builds stronger bone density, but there are very few good sources of calcium in the American diet.
- On average, humans are living longer, so our bones have to survive 80-plus years now.
- The bone density we develop occurs in early life around puberty and peaks by early adulthood.
- We lose bone density as we get older, but adequate calcium and vitamin D intake along with regular exercise can help us maintain bone density.

Everyone will experience bone loss as they age, but the question is, How much? Will it result in osteoporosis, fragile bones, or bone breakage?

Physicians and nutrition scientists are interested in maximizing bone density so that you have more to lose without experiencing fragile bones or osteoporosis, a disease that causes bones to become brittle and weak. The stronger your bones, the better equipped you will be to weather the storm of aging and bone loss.

For many older adults, a bone break is the start of downward trend in health. A bone break, such as in a hip or leg, often happens before or as a result of a fall. Bone repair is a challenge for the elderly. A break in the bone can lead to more severe health issues by limiting mobility and leading to complications, such as pneumonia.

Prevention of the downward trend in health is key. To do so means to maximize bone density when you are young and maintain it as you age.

The American Culture and Calcium

Among the foods available in American culture, milk is one of the few sources of calcium — a mineral used by your body’s bones, muscles, nervous system, and heart. Almost three-quarters of the calcium that Americans eat comes from dairy foods. There are few other good sources of calcium, so it is difficult to get calcium in the American diet without eating dairy foods.

Dairy foods can be made into many secondary products. Milk spoils quickly, but cheese and yogurt have a much longer shelf life. Yogurt evolved naturally as a way to preserve milk. The curds and whey were separated from the yogurt and were made into cheese, which has an even longer shelf life.

Lactose Intolerance and Humans

Most humans do not have the ability to digest large amounts of milk as adults. Between ages 3 and 5, many people begin producing less lactase, which is the enzyme in the body that helps digest lactose, the sugar naturally found in milk. The inability to fully digest lactose is known as lactose maldigestion and can cause symptoms of lactose intolerance.

However, a quarter of the world’s population continues producing high levels of lactase. These are the populations where the business of owning and operating dairies began (northern Europe, the Middle East, or central Africa). Among these populations, there is a genetic basis for being able to digest high levels of lactose.

In the United States, about 25 percent of the population are lactose maldigesters (poor digesters), including African Americans, Hispanics, Asians, and a small group of northern Europeans. As the diversity of the U.S. population increases, so will the number of those who are intolerant to lactose.

True lactose intolerance symptoms typically start with stomach rumbling and some gas. There may be stomach discomfort and, in more severe cases, acute (rapid and quick) diarrhea where once the lactose is gone, the symptoms are gone. Lactose intolerance symptoms occur from one to six hours after consuming the excess dairy. Consult your doctor if these symptoms persist.

Symptoms of Concern

- If you drink milk and experience a fever or rash, contact your doctor.
- If you are having gas that lasts beyond eight hours after drinking the milk, you may have intestinal flu, a virus, or food poisoning. Contact your physician if these symptoms persist for more than a day or two.

Tips for Tolerating Lactose

Everyone can digest some lactose. For those who are lactose intolerant, the most important factor to consider when drinking milk is dose: how much milk at a time and how you drink it.

▶ **Drink 8 ounces (one cup) or less of milk with a meal.**

Research suggests that you will tolerate milk fairly well if it is 8 ounces (one cup) or less. Slowing down the digestion of the milk will also improve the tolerance. Drink a small serving of milk with a meal — such as over a bowl of cereal or with dinner — and it will be better tolerated than on an empty stomach. Drinking milk with a meal will improve digestion by three times as compared to drinking the milk by itself.

▶ **Train your body to adapt.**

Research indicates the amount of lactose you can tolerate can be changed. For some people, one cup might be too much to tolerate when introducing milk back into the diet. Start with a small amount, such as a quarter cup at meals. After a few days, increase to a half cup with meals. After a week or two, increase to a cup, but don’t go beyond that. By doing this, you will train your intestinal bacteria to aid the digestion of lactose, and this will help eliminate symptoms of lactose intolerance. Drink a small amount of milk once or twice a day, and you will keep your bacteria trained and further enhance your body’s ability to digest milk.

The *Dietary Guidelines for Americans* recommend that adults consume three cups or servings per day of fat-free or lowfat milk and milk products. Work up to this amount. One or two cups could be milk with meals, and the remaining amount could be yogurt or cheese. Spreading the three cups out over the day is

most beneficial. For example, doubling up milk with yogurt at a meal does not increase tolerance. It only increases the amount of lactose, which can make symptoms of intolerance more likely.

Lactose Content in Dairy Foods

You won't find this on the food label, but a cup of milk contains about 12 grams of lactose. Maldigesters should stay below 12 grams of lactose in a meal to prevent symptoms. So in other words, a cup of milk with a meal is just about right.

Hard cheeses are well tolerated because they are low in lactose, with 1.5 ounces of a hard cheese (cheddar, mozzarella, Swiss, Parmesan) containing only 1 to 2 grams of lactose. Cottage cheese contains 4 to 6 grams of lactose (depending on the amount).

A 6- to 8-ounce serving of yogurt contains 11 to 17 grams of lactose (depending on the amount), but it is well tolerated. Researchers at Purdue University and across the globe have studied the digestion of yogurt and found that yogurt lactose digestion is far superior to milk lactose. Yogurts contain their own enzymes, which are active in the digestion of lactose in the intestine.

Lactose Content in Foods (grams per serving)

Milk (8 oz.)	11–13
Yogurts (plain, 8 oz.)	11–17
Greek yogurt (plain, 4–6 oz.)	2–4
Cheeses	
Cottage cheese (4 oz.)	2–3
Processed cheese (1 oz.)	2–3
Hard cheeses (1 oz.)	0.3–1
Sour cream (4 oz.)	4–5
Cultured milk (8 oz.)	9–13
Acidophilus milk (8 oz.)	11–13
Ice cream (8 oz.)	6–7
Whey (8 oz. fluid)	13
(1 Tbsp = 2.9g dry)	2.1

Source: USDA National Nutrient Database for Standard Reference, Release 26, ndb.nal.usda.gov

Greek yogurts are also well tolerated due to a low level of lactose and higher protein content, which slows down stomach emptying and increases tolerance. Kefir is a type of fermented beverage that limited research suggests is also fairly well tolerated and a good source of calcium, too.

Dairy foods are by far the best source of calcium and include excellent quality protein and substantial amounts of potassium and riboflavin. But another option might be low-lactose products such as almond or rice beverages. These are well tolerated, but be sure to read the Nutrition Facts label to check the amount of calcium and other nutrients in these products. These other “milks” are often fortified with calcium and vitamins to improve their nutritional value, but amounts can vary by manufacturer, and there are no clear national guidelines for these products. They may also contain large amounts of sweeteners.

More Information about Lactose Intolerance

National Institutes of Health

<http://digestive.niddk.nih.gov/ddiseases/pubs/lactoseintolerance>

Mayo Clinic

<http://www.mayoclinic.com/health/lactose-intolerance/DS00530>

Content Reviewers

Julie Gray, RD, Nutrition Education Programs Coordinator, Purdue Extension, Indianapolis, Indiana.

W. Allan Walker, Member, Mucosal Immunology and Biology Research Center, Massachusetts General Hospital, Charlestown, Massachusetts.

DISCLAIMER: Dennis Savaiano chairs the Ritter Pharmaceuticals Medical Advisory Board and is a member of the Dannon Yogurt Advisory Board.

Jan. 2015

It is the policy of the Purdue University Cooperative Extension Service that all persons have equal opportunity and access to its educational programs, services, activities, and facilities without regard to race, religion, color, sex, age, national origin or ancestry, marital status, parental status, sexual orientation, disability or status as a veteran. Purdue University is an Affirmative Action institution. This material may be available in alternative formats.

Tips for Caseload
Influential Clinic Assessment
Part 2

Connecting to WIC

Target:

Maintaining caseload is all about bringing clients back. And about sending them away happy – happy enough to tell their friends, who may become clients themselves.

Successful clinics anticipate client needs and resolve issues as quickly as possible. The essence of good service is relationship and relationships require access. One important way clients access us is on the phone.

Activity:

Make several calls to your clinic at different times during the day. What is your experience trying to connect to WIC? Is this an experience you'd like to have if you were calling for services?

Assessment:

Rate the likelihood or frequency of each of the following statements for your clinic.

a. Callers reach a "live" person"

0 1 2 3 4

b. Staff answer phone calls by the third ring

0 1 2 3 4

c. Phone is answered with a smile and warm tone of voice

0 1 2 3 4

d. Voice mail is used only when the clinic is closed

0 1 2 3 4

e. Voicemail messages are short and to the point

0 1 2 3 4

g. Clients are able to leave a voicemail message whenever an automated message is used

0 1 2 3 4

h. Client calls are returned within 24 hours during the work week

0 1 2 3 4

i. Clients are called or texted the workday before with a reminder about their appointment

0 1 2 3 4

j. Texting is used as one way to contact clients

0 1 2 3 4

k. Clients are contacted via phone or text when they miss an appointment

0 1 2 3 4

l. It's easy for clients who don't speak English to connect to WIC

0 1 2 3 4

Improvement Goals:

Use your Assessment results to identify goals for making it easier for clients to connect with WIC.

1. Describe your agency strengths in this area.
2. Describe the ways in which your agency can improve.
3. What will your agency do to improve in this area? Set a goal to improve. Include a completion date and plan to reach your goal.
4. What resources and support does your agency need to reach your goal?