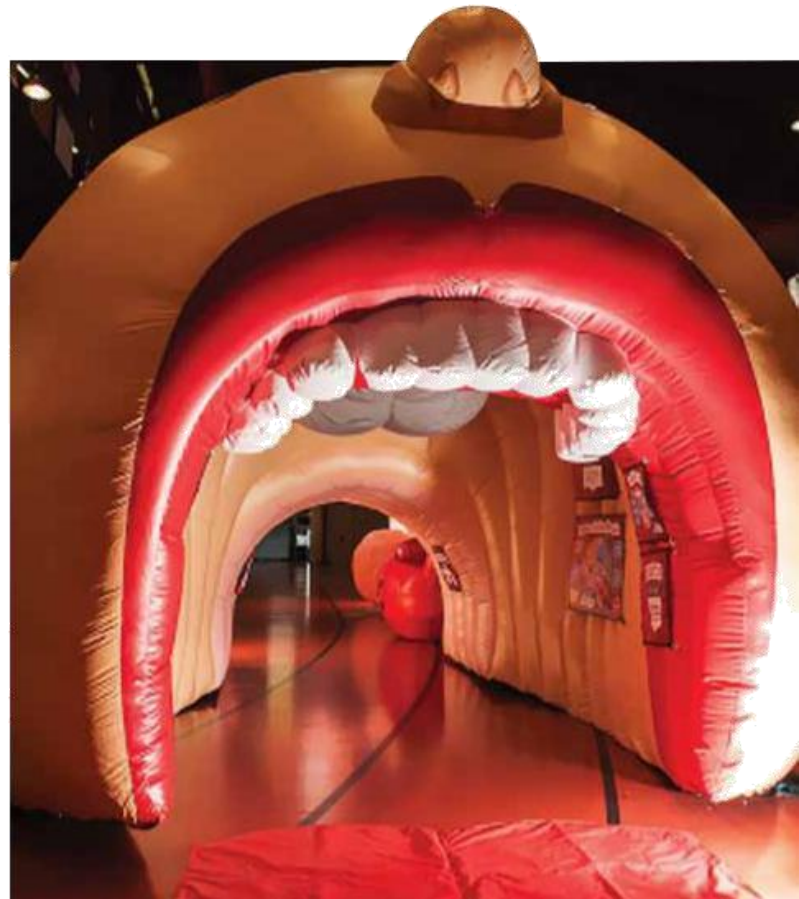


M E D I C A L INFLATABLES™

ABOUT THE EXHIBIT

The **MEGA Body™** is the world's only portable, inflatable, walk-through entire body exhibit. The **MEGA Body** is approximately 50 feet long by 26 feet wide by 12 feet high. Visitors enter the exhibit through the mouth, which highlights the importance of healthy teeth for maintaining overall health, and exit at the end of the small intestines where digestion is completed. In between are representations of the body's major organs that function together to optimize the health of an individual, regardless of age.

The **MEGA Body** provides visitors with a highly interactive, educational experience about the various systems of the human body...all at once. Visitors can step inside the body, learn about the different structures and normal bodily functions, observe examples of body trauma and disease, and view displays explaining some of the latest medical treatments.



The main emphasis of The **MEGA Body** exhibit is on healthy lifestyle choices to prevent common diseases currently affecting children, adolescents, and adults.

The **MEGA Body** showcases a variety of larger than life features, including:

Teeth	Lungs	Stomach
Heart	Ears	Muscle
Eyes	Esophagus	Intestines
Brain	Bones	Skin

DID YOU KNOW?

The human eye can detect 10 million color hues, but cannot see ultraviolet or infra red light. Also, your eyes blink over 27,397 times in a day.

The average cough comes out of your mouth at 60 miles per hour (96.5 km).

It takes food seven seconds to go from the mouth to the stomach via the esophagus.



The human body has approximately 37,000 miles of capillaries.

By walking an extra 20 minutes every day, an average person will burn off seven pounds of body fat in a year.

The human body is 75% water.



Every hour one billion cells in the body must be replaced.

The adult human body requires about 88 pounds of oxygen daily.

Bones are 4 times stronger than concrete.

Every square inch of the human body has about 19,000,000 skin cells.

Juvenile Diabetes

Juvenile diabetes (*or type 1 diabetes*) is thought to be an autoimmune disease, in which the body's own infection-fighting cells attack the cells within the pancreas that produce insulin. It nearly always requires insulin injections carefully coordinated with precisely measured carbohydrate intake during meals, as well as regular measurement of blood sugar. While juvenile diabetes has a strong genetic component, recent research suggests a combination of genetic factors, environmental triggers, and specific antigen buildup that cause onset in early childhood.

WHAT ARE THE RISK FACTORS?

There aren't many known risk factors for juvenile diabetes, though researchers continue to find new possibilities.

Known risk factors include:

A family history—Anyone with a parent or siblings with type 1 diabetes has a slightly increased risk of developing the condition.

Genes—The presence of certain genes indicates an increased risk of developing type 1 diabetes. In some cases (*usually through a clinical trial*) genetic testing can be done to determine if a child who has a family history of type 1 diabetes is at increased risk of developing the condition.

Other possible risk factors include:

Viral exposure—Exposure to Epstein-Barr virus, coxsackie virus, mumps or cytomegalovirus may trigger the autoimmune destruction of the islet cells, or the virus may directly infect the islet cells.

Low vitamin D levels—Research suggests that vitamin D may protect against type 1 diabetes. However, early intake of cow's milk (*a common source of vitamin D*) has been linked to an increased risk of type 1 diabetes.

Diet—Drinking water that contains nitrates may increase the risk of type 1 diabetes. The timing of the introduction of cereal into a baby’s diet or the type of formula may also affect a child’s risk of developing diabetes.

One clinical trial found that between ages 4 and 7 months appears to be the optimal time for introducing cereal.

Another study found that when special easier-to-digest formulas are given to babies when they’re between ages 6 and 8 months instead of standard cow’s milk formula, the risk of type 1 diabetes might be reduced. However, the study didn’t link standard cow’s milk formulas to the development of type 1 diabetes.

RECOGNIZE THE SIGNS

Knowing the warning signs for juvenile diabetes could save a life. The following symptoms may occur suddenly:

Extreme thirst	Increased appetite
Frequent urination	Sudden weight loss
Sudden vision changes	Drowsiness, lethargy
Sugar in urine	Heavy, labored breathing
Fruity, sweet, or wine-like odor on breath	Stupor, unconsciousness

If you know someone who exhibits one or more of these symptoms, call a doctor immediately.

CHILDHOOD OBESITY

Childhood obesity is a condition where excess body fat negatively affects a child’s health or wellbeing. Obesity now affects 17% of all children and adolescents in the United States, which is triple the rate from just one generation ago. Childhood obesity can have a harmful effect on the body in a variety of ways.

Obese children are more likely to have:

High blood pressure and high cholesterol, which are risk factors for cardiovascular disease (CVD).

In one study, 70% of obese children had at least one CVD risk factor, and 39% had two or more.

Increased risk of impaired glucose tolerance, insulin resistance and type 2 diabetes.

Breathing problems, such as sleep apnea and asthma.

Joint problems and musculoskeletal discomfort.

Fatty liver disease, gallstones and gastro-esophageal reflux (*i.e.*, heartburn).

Obese children and adolescents also have a greater risk of social and psychological problems, such as discrimination, bullying and poor self-esteem, which can continue into adulthood.

Furthermore, children who are obese will likely have problems later in life:

Obese children are more likely to become obese adults.

Adult obesity is associated with a number of serious health conditions, including heart disease, diabetes and some cancers.

If children are overweight, obesity in adulthood is likely to be more severe.

IF YOUR CHILD IS BECOMING OVERWEIGHT...

Schedule an appointment with your pediatrician.

Ask about your child's BMI (*body mass index*) and whether he or she is overweight or at risk of becoming overweight.

Encourage your child (*and the whole family*) to have healthy eating habits and regular physical activity.

CONTACT INFORMATION:

Lauren Hill

Medical Inflatable Exhibits, Inc.

Phone: 281.214.0490

Cell: 713.459.5388

Lauren@medicalinflatables.com

www.medicalinflatables.com

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