

Living and Learning with the APH Child



An introductory guide for parents of APH children

AFAPH

As a parent of a newly-diagnosed APH patient—a “child vampire”—your family physician has provided you with this brochure to acquaint you more thoroughly with the disorder. Although APH is not a fatal disease in the conventional sense, it can be serious. Fortunately, modern medicine has devised many ways to ease the discomfort of the disease for young patients, and the **American Foundation for Acquired Pediatric Hemodipsia (AFAPH)** provides support for parents and families of APH victims through documentation and information, seminars and training sessions, awareness campaigns, support groups, summer camps, government lobbying efforts, and fundraising telethons such as the yearly **Bleedathon**.® This brochure will help you to understand APH and its implications for your child, for you, and for other family members, clergy, and educators.

The Basics

Acquired Pediatric Hemodipsia, or APH, is a disease of the ethereal body. It is often referred to by its common name of *child vampirism*. It produces standard death followed by an undead state that persists for eternity if curative treatment is not applied. APH can produce a large constellation of symptoms, but typically only a handful of symptoms are present in any one patient; the most obvious and common among them are extreme lethargy or unconsciousness during daylight hours, a cadaverous appearance, a violent hypersensitivity reaction to sunlight, and an overwhelming desire to drink blood. These symptoms are present in almost all APH patients. Other symptoms exist among some patients to varying extents and are described later in this brochure.

Several varieties of APH exist. **Lestatine vampirism (Stoker-Rice syndrome)** is the most common variety, with a relatively benign and static prognosis. **Lugosi's complex (malignant Eastern vampirism)** is a rare but much more serious form, with a progressive and relatively grave prognosis. While both forms of APH confer immortality through undeath and thus are non-fatal in the conventional sense, the degenerative processes of Lugosi's complex can have a severe negative impact on the quality of life for the patient and his family over time.

There is no life-restoring cure for any form of APH once the symptoms of daytime unconsciousness or hypersensitivity to sunlight appear. Most cases are not diagnosed until they have progressed beyond this primary stage. Treatment is normally only symptomatic once the secondary stage is attained. Most treatment programs are designed to be continued for eternity. Stopping treatment only allows the symptoms to return; it does not worsen or accelerate the disease.

It is possible to permanently cure APH by driving a stake through the heart of the patient; this treatment is effective in 100% of cases and no relapse of the disease has ever been recorded after this treatment. Unfortunately, this curative procedure also causes the patient's body to turn to dust, and so most patients prefer to continue with symptomatic treatment only. The choice of whether to continue symptomatic treatment or implement curative treatment is for you, your physician, and your child vampire to decide together.

APH is not highly contagious; however, it can be transmitted by blood-to-blood contact. Children with APH tend to bite others without warning and should not be left alone with other children without supervision. Other persons should not be permitted to drink the blood of an APH child, be it fresh or frozen.

Treatment Regimens

Treatment of APH is normally symptomatic. If your child's case is typical and uncomplicated, chances are that your doctor will prescribe medication such as **Vampiril**® or **Loblood**®, both of which are highly effective against the symptoms of APH. The former is far more commonly prescribed than the latter, especially for Lestatine vampirism. These medications are provided in the form of capsules to be swallowed whole. Most APH children have no trouble swallowing without chewing (except for a slight tendency to bite down initially), but for those who do, it is worth noting that, at the time of this writing, a chewable form of Vampiril, marketed under the brand name **KidFang**®, has been approved by the FDA and should be available by prescription within a year. Both Vampiril and Loblood are Schedule VII thanatoxins and may not be dispensed in the U.S. without a prescription from a licensed physician.

Some physicians may prefer more traditional remedies for APH, including bat-wing and wolf's-bane (generic name *aconitum*—brand name **Lycanthrin**®) preparations, especially if the APH is complicated by lycanthropies. Unlike Vampiril and Loblood, these remedies are available without a prescription, although they should only be used on a doctor's recommendation.

It is important that APH children under medication not take any form of anticoagulant, blood thinner, or other

drug with similar effects, including aspirin, without their doctors' approval.

If curative treatment of APH is desired, the heart must be pierced with a wooden stake, preferably of ash, in one continuous movement. The AFAPH recommends **Cardiopoke®** brand sterile, auto-piercing, disposable stakes for this purpose, in order to reduce the risk of infection during the several seconds that elapse between the piercing of the heart and the crumbling of the patient's body into dust.

Dietary Considerations

APH children not undergoing treatment have a very limited dietary tolerance, consisting essentially of blood, blood, and still more blood. Human blood is preferable but not essential, and fresh blood is more beneficial than frozen or refrigerated blood. Whole blood is required in every case for proper nutrition.

APH children undergoing chemotherapy with Vampiril or similar medications may be able to tolerate small amounts of normal food, particularly tomato juice or V8® brand vegetable juice. Solid foods often are not well tolerated even in APH children undergoing treatment, with the exception of raw red meats in some cases.

A single meal a day is sufficient, but several smaller meals may also suffice, provided in either case that the child's minimum daily requirement of approximately three liters of whole blood is regularly met.

Obtaining blood for your APH child's nutrition can be problematic. While friends and relatives may be willing to donate blood occasionally, it is unlikely that they can maintain the supply in quantity sufficient to keep your child healthy. In most cases, a discount contract with the local blood bank or slaughterhouse must be arranged to ensure a constant supply at affordable prices. Recovery of corpses is not recommended. Although blood may be collected from living or dying (but not dead) donors for storage and deferred consumption, your child vampire must *never drink blood directly from a dead body*; doing so risks (real) death for the child.

Whether or not you allow your APH child to suck blood directly from living persons or animals is a matter of your personal family preferences and etiquette. Most families frown on sucking blood at the dinner table, but some may not find it objectionable, if the donor does not interfere with the distribution of the meal to non-APH persons at the table. In cases where direct sucking of blood is deemed socially inappropriate, the APH child should be taught to either suck blood in private or consume pre-drained blood refrigerated in advance for the purpose. The latter may be heated in a microwave just before consumption to make it more palatable. The AFAPH also publishes a recipe for

frozen **Bloodsicles**® that increases variety in an APH child's diet by providing a tasty dessert to follow the main meal; for best results, use blood from a donor in hyperglycemic crisis for preparation of the Bloodsicles.

Child vampires often find pre-drained blood more appealing if it can be sucked through a straw.

School Problems

APH raises special and significant problems for children when it comes to school.

Most schools hold classes during daylight hours only. Unfortunately, children with untreated APH are unconscious during the day (from sunrise to sunset), and cannot be awakened. Even APH kids undergoing treatment are likely to be exceedingly drowsy or stuporous during the daylight hours. In addition, all APH children are sensitive to sunlight; those not undergoing treatment may be so sensitive that exposure to sunlight—even indirectly—may be fatal. These two problems prevent most APH victims from attending normal schools. Most APH children are tutored or home-schooled for this reason.

In those rare cases where an APH child can attend a normal school, he may be ridiculed for his death-like appearance and prominent teeth. Occasionally child vampires may strike back at classmates who ridicule them, typically by killing them or draining their blood, which can present a significant disciplinary problem. The unexplained disappearance of classmates should be considered an indication of a possible problem of this kind and warrants investigation.

Lunchtime is a particular problem for APH children, since most depend on blood as the staple of their diet. A lunchbox with two or three liters of fresh whole blood kept in Thermos® containers is usually sufficient. Child vampires may be ridiculed by classmates for their unusual diets, with possible consequences such as those described above, so careful monitoring of the situation is important.

Sports activities are not a problem for APH children, provided that they are conducted at night. Children with APH are physically robust and amazingly quick and strong, despite their pale and sickly appearance, and they usually excel in just about every form of athletic activity. In addition, their frequent ability to transform themselves into mists, bats, or wolves gives them an advantage in many sports.

APH children tend to have roughly the same academic interests and strengths as ordinary children, although they may demonstrate an unusual interest in occult literature (Bram Stoker and Anne Rice are favorite authors), old television series (*The Addams Family*, *The Munsters*, and *Dark Shadows*) and some types of films (old Universal horror films are particular favorites). Adolescent APH

patients may identify strongly with undead characters from more recent television series (*e.g.*, *Twilight*) or young adult novels. They often do well in history, and frequently display a knowledge of history so detailed, comprehensive, and vivid that they almost sound as if they were there.

Special Needs and Interests

APH children have a few special needs and interests that must be taken into consideration by parents, family, and others who interact with them.

Child vampires typically have a fear of water, especially running water. It can be difficult to persuade them to cross a bridge or board a boat, for example.

Children with APH are usually frightened or repelled by certain objects or substances, including garlic, wolf's-bane, pointed sticks, crucifixes, holy water (water blessed by a Catholic priest or similar clergyman), and Communion hosts (bread blessed by a Catholic priest or similar clergyman).

APH children often express a fascination with cemeteries, the occult, death and dying, blood products, coffins, fresh soil or earth, lawyers, and dentistry.

Child vampires invariably sleep well only in the regions where they were born, and they prefer to sleep on dry land, in small beds with many pillows, or even in narrow box-like beds. They may be fond of nighttime camping expeditions.

Most APH children are good with animals and show special affection for spiders, flies, wolves, bats, and rats. They should not be left alone with large, warm-blooded animals unless they have already had their nightly meal, however.

Similarly, APH children should not be left alone with other children, or even with isolated adults, unless they have already had their meals for the evening. The unexplained disappearance of household pets, local neighborhood children, or adults in the neighborhood living alone should be taken as an indication that your APH child is not getting proper nutrition.

Most APH kids are defiantly non-religious, irrespective of the environment in which they were raised. Some can become violent if forced to attend religious services; it is best to indulge their aversion to conventional religion. Direct contact with religious objects can cause severe burns in APH children, particularly if these objects have been formally blessed.

Children with APH tend to be shy when visiting strangers, and will often refuse to enter a home until they are explicitly invited to cross the threshold.

Miscellaneous Considerations

Your child should be made aware, at some point, of the fact that he or she cannot reproduce (APH renders its victims unconditionally sterile). This should be discussed with

the child before the usual age of puberty, since APH children do not undergo puberty.

In addition, APH children do not grow or further develop after they acquire the disorder. If they develop APH at age six, for example, they will retain the physique they had at age six for eternity. Children with the disorder should be warned that they will not grow up like their peers.

Persons with APH (irrespective of their age at the time they first develop the disorder) do not die, since they are already dead. They are immortal, in fact, and so will outlive all their relatives and friends (unless curative treatment for the APH is undertaken, as we have discussed previously in this brochure). Since this does not become apparent for many years, it is usually not necessary to discuss it with your APH child in advance; but if you choose to do so, it cannot hurt.

One of the rare advantages of APH is that children with the disease are immune to all other diseases. This simplifies their medical care and tends to compensate for the cost of treating their APH.

Persons with APH cannot donate blood under any circumstances. All transfusions of blood from an APH patient will transmit the disease to the transfusion recipient(s).

Most persons with APH have excellent night vision. All have unusually well-developed canine teeth.

Future Prospects

The prognosis of the most common form of APH is benign and stable—the disease does not worsen over time. As a result, it is possible to usefully plan for the future of patients with APH even when they are very young.

Prejudice against vampires is very widespread. Many people feel that they are nothing more or less than parasites upon society. While the AFAPH and others are working to change this perception, progress is slow, and APH children should be prepared for a lifetime of dealing with these preconceived notions.

APH severely limits the scope of job opportunities for persons with the disorder; however, APH patients can be excellent choices for certain types of employment. Examples include night watchmen, casino workers (night shifts only), bartenders and bouncers, lawyers, tax inspectors, and miners.

The Role of the AFAPH

As the parent of a child with APH, you are not alone. The American Foundation for Acquired Pediatric Hemodipsia offers a wide range of services to APH patients and their families. Some of these services are widely known to the general public; others are largely unknown outside the community of APH patients and their families only. The more popular of these services are described below.

The major AFAPH event of the year is the annual Bleedathon, held on October 31, from dusk to dawn. The Bleedathon is the major fundraising event for the AFAPH, providing funding for AFAPH staff salaries and perks and for other AFAPH services. Since 1924, the master of ceremonies for the Bleedathon has been faded cinema star Dick Head, who is also the honorary chairman of the AFAPH. Every telethon features entertainment donated by top-name entertainers from cocktail lounges around the country, plus heart-rending stories and interviews with actual APH patients and their families, plus constant requests for donations and pledges. In 2019, the Bleedathon raised more than \$6 billion in donations, of which \$135,000 remained available to fund AFAPH activities after deductions for fixed overhead. The Bleedathon is carried live on television nationwide each year over the **Blood Network**, using airtime donated by individual stations in exchange for large sums of money.

Favorites of APH kids include the outdoor programs of AFAPH summer night camps, including the **Lil' Suckers**[®] program, for APH children from four to six years of age, and the **Outward Leech**[®] program, for APH children from six to eight years of age. APH kids from eight to twelve enjoy the **Blood River**[®] program. Finally, APH adolescents rave about the **Transfusers**[®] and **PlasmaPower**[®] programs of long-distance expeditions specially adapted for vampire teens, with night-only activities and special provisions for bringing the home soil of participants along for sleeping purposes during the trips.

The AFAPH holds an annual conference, **Heme Globe**[™], on the winter solstice of each year. Heme Globe brings together AFAPH administrators, executives, staff, and other hangers-on for several wild nights of dining, dancing, and drinking at Foundation member expense. This is the premier event of the year for the Foundation's 450,000 employees and contractors.

An exclusive European retreat, **Coffin Rock**, is maintained by the AFAPH for use by employees, staff, administrators, contractors, and the occasional foundation member. Coffin Rock is located on a 4500-acre estate on the Borgo Pass of the Carpathian mountains near Transylvania, Romania.

A nationwide network of electronic support groups, **Sanguinity**[®], established and maintained by the AFAPH, provides AFAPH members with the means to communicate with and support each other through cyberspace. It also provides free e-mail, web-surfing capability, and financial grants to AFAPH staff, employees, contractors, and administrators.

The AFAPH also markets a line of designer clothing (**Bela Originals**[®]) and cosmetics (**Bloodline**[®]), and sponsors two syndicated dramatic television series (*The Clotting Factor* and *Thrombus*), a yearly Dick Head film festi-

val at the Ed Wood Auditorium in Lompoc, California, and a beauty pageant (**Miss Platelet®**). The Foundation also sponsors many one-time public-relations events to raise APH awareness, the most recent of which was **Bleed Across America**, in 2017.

Contact Information

The AFAPH welcomes and encourages all APH patients and their families to contact the Foundation with large donations in order to assist it in paying salaries and other overhead. If you'd like to help, send money to:

AFAPH
666 Rhesus Circle
Antigen, Montana 04938-7483

Your donations are tax-deductible, so there is no reason for you to not empty your wallet or bank account in support of our cause.

"Keeping the Good Blood Flowing"™



American Foundation for Acquired Pediatric Hemodipsia

© 2021 AFAPH. All rights reserved.

Unauthorized reproduction of this brochure is prohibited.

No portion of this document shall be construed as medical or legal advice.
Always consult a licensed physician for diagnosis and treatment of any condition.

The Fanged Toddler logo, Bleed Across America, Bela Originals, Bloodline, Sanguinity, Heme Globe, Transfusers, PlasmaPower, Blood River, Outward Leech, Lil' Suckers, Miss Platelet, Bleedathon, the slogan "Keeping the Good Blood Flowing," and Bloodsicles are trademarks, registered trademarks, service marks, or registered service marks of the American Foundation for Acquired Pediatric Hemodipsia. Vampiril and KidFang are registered trademarks of Tepeş Pharma. Loblood is a trademark of Talbot Laboratories, Ltd. *The Clotting Factor* and *Thrombus* are registered trademarks of LeukoSky Entertainment, Ltd. Thermos is a registered trademark of The Thermos Company. V8 is a registered trademark of Campbell Soup Company. Cardiopoke is a registered trademark of Johnson & Johnson & Johnson Professional Systems, Inc.

Printed in U.S.A.

