

# Physician's Update

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## Vaccine Update

### Universal Hepatitis A Vaccine

At their Fall Meeting, the CDC's Advisory Committee on Immunization Practices (ACIP) has recommended that all children in the United States receive hepatitis A vaccine. The previous recommendations focused vaccinations in states with high rates of disease. The vaccine has lowered these states rates and now 2/3 of the cases are now from states where the vaccine was not being used. Children should receive the first dose of the two dose series between 1-2 years of age. Further recommendations and guidelines for incorporating this vaccine into the routine childhood schedule should be forthcoming. There are currently two licensed hepatitis A vaccines available for use in children and the vaccine is available for administration at the Health Department.

### Measles, Mumps, Rubella, Varicella Vaccine

Combination Measles Mumps Rubella Varicella Vaccine (MMRV) has been licensed and is available for use in children 12 months to 12 years of age. As of this time, there has not been a decision on giving a second dose of varicella vaccine. Varicella hospitalizations have declined 88% nationwide since 1994, with the biggest decrease seen in infants.

### Meningococcal Vaccine

The CDC and FDA are investigating cases of Guillain-Barré syndrome among adolescents who have recently received meningococcal conjugate vaccine. As of October 31, 2005, the Vaccine Adverse Event Reporting System (VAERS) received six reports of GBS in adolescents after receipt of MCV4 vaccination. All reported GBS cases occurred among persons aged 17-18 years who were vaccinated during June and July, 2005 and had symptom onset 14-31 days after MCV4 vaccination. The timing and onset of neurological symptoms are reasons to gather further information.

The number of cases of GBS in adolescents who received MCV4 is not greater than would be expected in an unvaccinated adolescent population and an ongoing known risk for serious meningococcal disease exists. Therefore, CDC is recommending continuation of current vaccination strategies.

Whether receipt of MCV4 vaccine might increase the risk for recurrence of GBS is unknown. Persons with a history of GBS who are not in a high risk group for invasive meningococcal disease should not receive MCV4. FDA and CDC are requesting that providers or other persons with knowledge of possible cases of GBS (or other clinically significant adverse events) occurring after vaccination with MCV4 and/or other vaccines report them to VAERS. Reports should be submitted to the VAERS website or by telephone at 800-822-7967.

CDC further requests that healthcare providers report other cases of GBS (even those not associated with MCV4 or other vaccination) that occur among persons 11-19 years of age to local health departments in accordance with state disease-reporting guidelines.

### Rotavirus Vaccine

On the horizon, a new oral live vaccine against **Rotavirus** is near licensure.

## Influenza News

Although there has been delays in distribution of influenza vaccine and some providers who have not received their total vaccine order, there should be enough flu vaccine for everyone who needs and wants one this season. Remember that December and even January is not too late to be vaccinated against influenza. The Health Department does currently have some vaccine in stock and if you are having trouble getting your patients vaccinated please contact your local office of the Health Department.

Although it is well documented that health care workers can and do spread influenza virus (even before they are symptomatic) **only 40% of health care workers receive influenza vaccine each year.** So help protect yourself and your patients by immunizing yourself and your staff this year.

## Pandemic Influenza

Pandemic influenza strains are different from the regular annual influenza strain; a pandemic influenza occurs approximately 3-4 times a century; the last 100 years there have been in 1918, 1957 and 1968. While the 1918 pandemic was especially severe and killed over 50 million people worldwide, approximately one million people died in the 1957 and 1968 pandemics.

All age groups are at risk for pandemic influenza, not just "high-risk" groups. A vaccine may not be available for a pandemic influenza strain at the start of the pandemic and antiviral drugs and other resources may be in limited supply in a pandemic.

H5N1 avian influenza began infecting birds and humans in 1997; since Dec. 2003 it has caused for 60 deaths and 116 illnesses in 4 countries: Indonesia, Thailand, Cambodia, and Viet Nam. H5N1 can rapidly mutate and there is high concern that this virus may cause a pandemic, but so far **H5N1 has not shown an ability to transmit well person-to-person.**

**The current risk to Americans from the H5N1 bird flu outbreak in Asia is low.** The strain of H5N1 virus found in Asia has not been found in the United States. There have been no human cases of H5N1 flu in the United States.

## CDC Publishes New Edition Of Yellow Book

For the first time ever, CDC's newest edition of its travel health book, known as the "Yellow Book", is available at bookstores nationwide and through online booksellers. The "Yellow Book" is named for its traditionally yellow cover and is officially titled Health Information for International Travel. Intended for medical professionals and travelers, the 2005-2006 edition is now available at bookstores, through Internet book sellers or by contacting Elsevier Book Order Fulfillment at 1-800-545-2522 or online at [www.us.elsevierhealth.com](http://www.us.elsevierhealth.com). A companion web site that lets travelers look up specific information by travel destination and view or print custom reports based on individual travel plans is also available at <http://www.cdc.gov/travel/yb/>.

## Mother to Mother Breastfeeding Program Expands

The Mother to Mother Breastfeeding Program is a free program that offers breastfeeding information, encouragement and support to WIC and Food Stamp participants. Otsego County has had a breastfeeding peer support counselor for thirteen years and has the highest breastfeeding initiation rates among the four county WIC recipients. Mothers with breastfeeding experience are recruited and hired from the community by the local MSU Extension and WIC agency to serve as peer counselors.

They are available to see mothers in person or by phone, in the home, the hospital, or the WIC clinic. The program goals are to increase breastfeeding initiation and duration rates among low income WIC women and to provide breastfeeding encouragement and support to women throughout the infant's first year of life.

**Danica Howard** has been hired as the Breastfeeding Peer Support Counselor for Charlevoix and Emmet Counties. She will work 18 hours per week and be available 24 hours/day 7 days/week by phone to be accessible at critical times when mothers may experience difficulties. Danica's office is located in the Emmet County office of the Health Department and she can be reached at 231-347-4630. Danica will be working closely with nurses from the health department, lactation counselors and lactation consultants from local hospitals.

Peer counselors do not weigh or assess babies or provide advice beyond breastfeeding techniques. The overall goals of the peer counselor are to encourage women to breastfeed, empower mothers to solve breastfeeding problems, support and encourage breastfeeding women, and help women feel like great mothers to their babies. A breastfeeding peer support counselor will also be hired to serve Antrim and Kalkaska counties in the near future.

## 2005 Communicable Diseases June — October

Disease	Antrim	Chx	Emmet	Otsego	Total
AIDS, Aggregate	1	0	1	2	4
Campylobacter	0	0	1	0	1
Cryptosporidiosis	1	0	0	0	1
Giardiasis	0	1	1	2	4
Listeriosis	0	0	0	1	1
Salmonellosis	0	1	1	2	4
Shigellosis	0	0	1	0	1
Meningitis - Aseptic	1	0	0	1	2
Animal Bite	1	0	0	0	1
Flu Like Disease	114	271	350	69	804
Kawasaki	0	0	1	0	1
Streptococcal Dis, Inv, Grp A	0	1	0	1	2
Rabies Animal	1	0	0	1	2
Chancroid	0	0	0	0	0
Chlamydia (Genital)	11	11	21	15	58
Gonorrhea	1	1	4	6	12
Syphilis - Latent of Unknown Duration	0	0	1	0	1
Syphilis - Secondary	1	0	0	0	1
Chickenpox (Varicella)	4	13	17	10	44
Pertussis	0	0	4	0	4
Lyme Disease	1	0	0	1	2
Hepatitis B, Acute	0	0	1	0	1
Hepatitis B, Chronic	0	0	1	1	2
Hepatitis C, Acute	0	0	0	1	1
Hepatitis C, Chronic	3	5	8	2	18
Hepatitis C, Unknown	2	1	2	1	6
Total	142	305	415	116	978

To report STDs or HIV, contact Bert Notestine at  
347-5022,  
or use our secure fax

To report a Communicable Disease to the Health  
Department:  
Emmet and Charlevoix Counties:  
Pat Guillaume, RN  
231-347-5636  
Otsego and Antrim Counties:  
Sandy Tarbutton, RN  
989-732-6869  
OR  
Send a secure fax 24 hours / day:  
231-547-0460