



Health Department of Northwest Michigan

Physician's Update

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New Immunization Schedule Available

The 2007 Child and Adolescent Immunization Schedule has been published by the CDC and approved by the Advisory Council on Immunization Practices, the American Academy of Pediatrics, and the American Academy of Family Practice. The primary changes from the previous year's schedule are as follows:

- The main change to the format of the schedule is the division of the recommendation into two schedules: one schedule for persons aged 0–6 years and another for persons aged 7–18 years.
- The new rotavirus vaccine is recommended in a 3-dose schedule at ages 2, 4, and 6 months. The first dose should be administered at age 6 weeks through 12 weeks with subsequent doses administered at 4–10 week intervals. Rotavirus vaccination should not be initiated for infants aged >12 weeks and should not be administered after age 32 weeks.
- The influenza vaccine is now recommended for all children aged 6–59 months.
- Varicella vaccine recommendations are updated. The first dose should be administered at age 12–15 months, and a **newly recommended second dose** should be administered at age 4–6 years.
- The new Human Papillomavirus Vaccine (HPV) is recommended in a 3-dose schedule with the second and third doses administered 2 and 6 months after the first dose. Routine vaccination with HPV is recommended for females aged 11–12 years but can be started in females as young as age 9 years and a catch-up vaccination is recommended for females aged 13–26 years who have not been vaccinated previously.

The schedule is available at www.cdc/nip, among many other websites and can be printed out or even downloaded to PDA's.

Human Papillomavirus Vaccine (HPV) Now Available at the Health Department

The HPV Vaccine is now available through the Vaccine for Children (VFC) program and can be administered at the Health Department or at participating provider offices. VFC eligible children (on Medicaid, uninsured, or underinsured) and women 19-26 on Medicaid can receive the vaccine at no charge at the Health Department. The vaccine will also be available for non-VFC eligible adolescents and adults for a fee of \$130.

MCIR NEWS

The Health Department has begun running a district wide recall of immunization histories that are not up to date with the recommended doses. Your practice may begin getting phone calls regarding children **19-36 months** who are behind on their immunizations. Please check their MCIR Immunization History with the medical chart to assure that the MCIR information is up to date and schedule the child to come in as soon as possible if immunizations are needed.

Shingles Vaccine

Zostavax, the only zoster vaccine on the market, was studied in approximately 38,000 individuals throughout the United States who were age 60 years and older. Half received the vaccine and half received a placebo. Study participants were followed for an average of three years to see if they developed shingles and, if they did how long the pain lasted. Zostavax reduced the occurrence of shingles by about 50 percent and post herpetic neuralgia (pain persisting after an episode of shingles) by 67 percent.

While the ability for the vaccine to prevent shingles declined with age, the risk of chronic pain among those older vaccinated persons who still developed shingles was lowered. The most common reported side effects in vaccine recipients were mild, such as reactions at the injection site and headache. About 25% of people develop zoster during their lifetime, and there are about one million cases of shingles per year. The risk is highest in the elderly, and it increases with age starting at around 50 years. Shingles often causes chronic pain, and the risk of suffering chronic pain increases with age, starting at 60 years. Shingles is much less contagious than chickenpox.

Shingles Vaccine is indicated as a single dose for adults 60 years of age and older, regardless of previous history of shingles. Contraindications to Shingles Vaccine include a history of anaphylactic reaction to gelatin, neomycin, or any other component of the shingles vaccine, a weakened immune system due to infection (HIV/AIDS), drugs (steroids, chemotherapy, radiation), diseases of or cancer affecting the immune or lymphatic system, active untreated tuberculosis, or pregnancy.

The vaccine is not currently being offered at the health department but can be ordered and administered by any licensed physician. The vaccine is a live virus vaccine and must be stored frozen at less than 5 F.



Influenza Update

Michigan Surveillance has shown a slight decrease in flu activity for the week ending 1/20/07, dropping us back to "sporadic" levels. This is about the same as this period last year. National Surveillance has shown activity slightly increased from last week, which may be due to the holiday season. At this time laboratory surveillance suggests the vaccine is a good match to identified strains.

Avian Influenza Surveillance has reported Human deaths in Egypt and Indonesia and poultry outbreaks in multiple countries. As of 1/22/2007 there have been 269 confirmed cases of H5N1 Avian Influenza with 163 deaths (116 cases with 80 deaths in 2006) reported to WHO. For more information on current outbreaks in poultry, humans, and other information go to <http://www.pandemicflu.gov/>.

Pandemic Flu Preparedness Activities:

The Health Department has been involved in numerous activities as part of our emergency preparedness efforts. Recently we have been involved in "tabletop" exercises with local hospitals, EMS, first responders, and emergency management personnel simulating critical needs, communication, and response to pandemic flu outbreaks.

We have also held seminars with the educational community regarding school closure. There are several studies and models that suggest that school closure may be one of the best available measures at reducing the impact of a pandemic flu on our community. This assumes, as predicted, that there will not be sufficient vaccine or antiviral medication to respond to the initial outbreak. School closure, if utilized, would occur early in the response to the pandemic and would last as long as 6 weeks. Although school closure may reduce the spread of pandemic flu it obviously comes at a cost in disruption to our society. We will continue to work on this important issue.

Medical Office Planning for Pandemic Influenza

Planning for pandemic influenza is also critical for ensuring a sustainable healthcare response. The Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) have developed a checklist to help medical offices and ambulatory clinics assess and improve their preparedness for responding to pandemic influenza. This checklist is modeled after a pandemic preparedness checklist for hospitals and can be accessed at <http://www.pandemicflu.gov/plan/healthcare/medical.html> (or you may contact me for copies and assistance).

2006 Communicable Disease Totals by County

<u>Disease</u>	<u>Antrim</u>	<u>Chx</u>	<u>Emmet</u>	<u>Otsego</u>	<u>Total</u>
Campylobacter	3	4	6	1	14
Cryptosporidiosis	0	0	0	1	1
Escherichia coli O157:H7	0	0	3	0	3
Giardiasis	1	2	3	7	13
Salmonellosis	3	4	6	1	14
Meningitis - Aseptic	1	0	1	1	3
Animal Bite	1	0	1	0	2
Blastomycosis	1	1	0	0	2
Coccidioidomycosis	0	0	1	0	1
Flu Like Disease	709	1825	3069	720	6323
Guillain-Barre Syndrome	2	0	0	0	2
Influenza	0	0	0	2	2
Streptococcal Dis, Inv, Grp A	1	0	0	0	1
Unusual Outbreak or Occurrence	0	8	0	0	8
Rabies Animal	0	0	1	0	1
Chlamydia (Genital)	23	27	49	44	143
Gonorrhea	2	4	5	6	17
Syphilis - Secondary	0	0	1	0	1
Tuberculosis	1	2	0	0	3
Chickenpox (Varicella)	13	17	24	20	74
Pertussis	0	0	2	0	2
West Nile Virus	1	0	0	0	1
Hepatitis A	0	1	0	0	1
Hepatitis B, Chronic	2	1	2	1	6
Hepatitis C, Acute	0	0	1	0	1
Hepatitis C, Chronic	17	10	21	16	64
Total	781	1906	3196	820	6703

Michigan's Year of Public Health

The Governor has declared that 2007 is Michigan's Year of Public Health. As part of this campaign there will be different health topics stressed every month throughout the year. January was *Safe Homes = Safe Families* month, February is *Healthy Hearts* month, and March is *Healthy Beginnings* month. Look for numerous public service announcements and News Releases both locally and statewide as we try to encourage healthy individuals and healthy communities.

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