



Northwest Michigan Community Health Agency

**HEALTH
DEPARTMENT**
of Northwest Michigan

Health Department of Northwest Michigan

Physician's Update

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Immunization Update

New Recommendations for Adult Pneumococcal Vaccine

On October 22, 2008, the ACIP voted on new and revised recommendations for the use of 23-valent pneumococcal polysaccharide vaccine (PPSV23) for the prevention of invasive pneumococcal disease. The new provisional recommendations are as follows:

1. Recommendation for use of Pneumococcal Vaccine among adult cigarette smokers:
Adults who smoke cigarettes are at substantially increased risk for invasive pneumococcal disease. *Persons aged 19 through 64 years who smoke cigarettes should receive a single dose of PPSV23 and smoking cessation counseling.*
2. Recommendation for use of Pneumococcal Vaccine among adults who have asthma:
Asthma is an independent risk factor for invasive pneumococcal disease.
The ACIP recommends that asthma should be included among the chronic pulmonary diseases (such as COPD and emphysema) that are indications for PPSV23 in adults aged 19 through 64 years.

Individuals under 65 years of age who receive a single dose of Pneumococcal Vaccine should be given a second dose when they are over 65 years of age and at least five years have elapsed since the first dose. No more than 2 doses lifetime are necessary.

Continued Shortage of *Haemophilus influenzae* Type b (Hib) Conjugate Vaccines

The Hib shortage continues and the interim recommendations to defer the 4th dose of Hib are still in place. The shortage is expected to continue at least until mid 2009. All children should be given a complete primary series but not the booster dose. Children at high risk (sickle cell disease, HIV, immunodeficiencies, asplenia, or Alaska Native/American Indian children) should continue to receive the full series including the booster dose.

As the shortage continues, providers may need to use Pentacel (DtaP/IPV/Hib) in order to be sure that all children receive their Hib vaccine. Pentacel is being distributed as part of the Hib allocation to the State and therefore may need to constitute a percentage of the Hib vaccine ordered through the Vaccine For Children Program. For more information, visit <http://www.michigan.gov/mdch> and search for "Pentacel".

Influenza Update

Antigenic Characterization

Preliminary lab data are showing good match between circulating Influenza A virus strains and the 2008/2009 vaccine strains. However, there has been some circulating Influenza B strains nationally that are distinct from the Influenza B vaccine strain. Whether this is the case in Michigan has not been determined to date.

Influenza A(H1N1) Oseltamivir Resistance Update

Preliminary data from the Centers for Disease Control and Prevention suggest that circulating influenza viruses may be antigenically related to the 2008-09 influenza vaccine but that oseltamivir (Tamiflu) resistance is likely to be high among A(H1N1) viruses in the US. Testing in Michigan to date has been consistent with these findings. The CDC has issued Interim Recommendations for the use of Antiviral Medications at <http://www.cdc.gov/flu>. Consult these recommendations when considering treatment or prophylaxis for influenza. Also remember that Influenza antiviral medications used for treatment are most beneficial when initiated within the first two days of illness.

"Google" Flu Trends

Google.org has found that tracking the frequency of searches for certain key words and tasks is predictive of flu activity and has tracked this by State and Nationally. You can view this information at <http://www.google.org/flutrends>.

Report Medication Errors

The Institute for Safe Medication Practices (ISMP), based in suburban Philadelphia, is the nation's only nonprofit organization devoted entirely to medication error prevention and safe medication use. The ISMP Medication Errors Reporting Program (MERP) is a confidential national voluntary reporting program that provides expert analysis of the system causes of medication errors and disseminates recommendations for prevention. Regulatory agencies and manufacturers are notified of needed changes in products when safety is of concern. Without reporting, such events may go unrecognized. ISMP is a federally certified patient safety organization (PSO), providing legal protection and confidentiality for submitted patient safety data and error reports.

Errors, near-errors or hazardous conditions may be reported to the program. These include, but are not limited to, administering the wrong drug, strength, or dose of medications; confusion over look-alike/sound-alike drugs; incorrect route of administration; calculation or preparation errors; misuse of medical equipment; and errors in prescribing, transcribing, dispensing, and monitoring of medications. This information will be sent to third parties such as the Food and Drug Administration (FDA) MedWatch program and to the manufacturer/labeler. You have the option of including your identity and location on these copies. For more information visit www.ismp.org

Communicable Diseases 2004-2008

<u>Disease</u>	<u>2004</u>	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>Total</u>
AIDS, Adult	3	0	0	0	0	3
AIDS, Aggregate	2	5	0	1	1	9
Campylobacter	3	5	14	10	9	41
Cryptosporidiosis	0	1	1	4	7	13
Escherichia coli 0157:H7	1	0	3	1	6	11
Giardiasis	6	6	13	3	6	34
Listeriosis	0	1	0	1	0	2
Salmonellosis	8	6	14	6	9	43
Shiga toxin, E. Coli, Non O157	1	0	0	0	0	1
Shigellosis	2	1	0	1	1	5
Yersinia enterocolitica	0	1	0	1	1	3
Meningitis - Aseptic	8	3	4	3	6	24
Meningitis - Bacterial Other	1	3	0	0	2	6
Meningococcal Disease	2	0	0	0	0	2
Streptococcus pneumoniae, Inv	0	1	0	5	8	14
Blastomycosis	2	0	2	3	0	7
Coccidioidomycosis	0	0	1	2	2	5
Cryptococcosis	0	0	0	0	1	1
Encephalitis, Primary	0	2	0	0	1	3
Flu Like Disease	1718	6285	6323	4564	6917	25807
Guillain-Barre Syndrome	2	0	2	1	1	6
Hemolytic Uremic Syndrome	0	0	0	0	1	1
Histoplasmosis	3	0	0	0	0	3
Influenza	0	0	2	8	27	37
Kawasaki	0	2	0	0	0	2
Legionellosis	0	1	0	1	3	5
Staphylococcus Aureus Infect.	1	0	0	0	0	1
Strep Pneumo, Drug Resistant	0	1	0	0	0	1
Strep Throat	0	0	0	0	55	55
Streptococcal Dis, Inv, Grp A	1	4	1	4	0	10
Unusual Outbreak or Occurrence	0	0	8	1	0	9
Rabies Animal	0	2	1	0	1	4
Chlamydia (Genital)	131	116	143	156	120	666
Gonorrhea	10	20	17	23	21	91
Syphilis - Late Latent	0	1	0	0	0	1
Syphilis - Latent of Unknown Duration	0	1	0	0	0	1
Syphilis - Primary	0	0	0	0	1	1
Syphilis - Secondary	0	1	1	0	0	2
Tuberculosis	1	0	3	1	0	5
Chickenpox (Varicella)	59	125	73	51	37	345
H. influenzae Disease - Inv.	0	0	0	0	1	1
Pertussis	3	6	2	6	5	22
Lyme Disease	0	1	0	0	0	1
West Nile Virus	0	0	1	0	0	1
Hepatitis A	4	0	1	3	1	9
Hepatitis B, Acute	2	0	0	0	0	2
Hepatitis B, Chronic	5	6	6	6	5	28
Hepatitis C, Acute	1	1	1	0	0	3
Hepatitis C, Chronic	34	52	67	74	56	283
Hepatitis C, Unknown	0	0	0	0	4	4
Total	2014	6660	6704	4940	7316	27634

To report STDs or HIV,
contact
Bert Notestine at
347-5022,
or use our secure fax
231-547-0460.

To report a Communicable
Disease to the Health
Department:

Emmet County:

Pat Guillaume, RN
231-347-5636

Otsego County:

Sandy Tarbutton, RN
989-732-6869

**Charlevoix & Antrim
Counties:**

Marley Niewendorp
231-547-7631

OR

**Send a secure fax 24
hours / day:
231-547-0460**