

Oneida County Health Department

PUBLIC HEALTH UPDATE

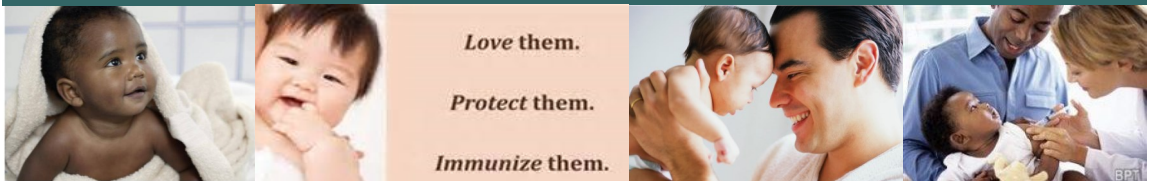
March/April 2016

March Surveillance

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National Infant Immunization Week (NIIW)



National Infant Immunization Week (NIIW) is April 16-23, 2016

This week focuses on the importance of protecting infants from vaccine-preventable diseases and celebrating the achievements of immunization programs. Since 1994, NIIW has been a way to focus attention on the benefits of maintaining high immunization rates in the community, state, and nationally.

Healthcare professionals are an important reasons why we can celebrate high infant immunization rates in this country. According to a national poll conducted by CDC in 2014, a doctor's recommendation was the #1 reason that parents made sure their child got all of the recommended vaccines.

NIIW is a great opportunity for the entire practice—including physicians, nurses, and receptionists—to show parents that their practice strongly supports vaccination according to the CDC's recommended immunization schedule. It's also a good chance to let parents know that on-time vaccination is the norm, despite what they might hear in the media.



National Infant Immunization Week
Immunization. Power to Protect.

April 16-23, 2016



Here are some ideas for ways that health care providers practices can celebrate NIIW this year:

- **Bring copies of CDC's "Talking with Parents about Vaccines for Infants."** Use this opportunity to discuss ways that your entire practice can promote NIIW to parents. <http://www.cdc.gov/vaccines/hcp/conversations/conv-materials.html>
- **Decorate your waiting room** with balloons, streamers, CDC posters, an NIIW banner, and coloring sheets. <http://www.cdc.gov/vaccines/events/niiw/print-materials.html>
- **Play CDC videos** in your waiting room or link to them on your website: <http://www.cdc.gov/vaccines/events/niiw/web-etools.html?tab=2#TabbedPanels1>
- **Print fact sheets** on vaccine safety and vaccine-preventable diseases and display them in your waiting room or exam rooms: <http://www.cdc.gov/vaccines/conversations>
- **Provide immunization schedules** for parents- <http://www.cdc.gov/vaccines/schedules/>

Zika Virus Updates

There continues to be ongoing concern about the spread of Zika virus, especially to pregnant women. Zika virus can be spread from a pregnant woman to her fetus. This infection has been linked to microcephaly and other neurologic defects in those babies. In addition there is an association, while rare, between Zika Virus infection and Guillian-Barre Syndrome.

Transmission & Incidence:

- Currently, there have been no cases of local transmission in the United States; however, there have been over 300 cases of Zika virus diagnosed in the United States in people who have traveled.
- There have been several documented cases of sexual transmission of Zika virus from an infected man to his sexual partners.
- As of, March 23, 2016, there were 39 transmission in the US. Updates on areas with active countries and US territories, including Puerto Rico and US Virgin Islands, reporting Zika virus can be found on at the CDC website <http://wwwnc.cdc.gov/travel/notices> .

Updated Testing Guidelines & Diagnoses:

- Pregnant women, with or without symptoms, who have travelled to a place with Zika Virus transmission should be tested.
- Men or women who have travelled to an area with Zika transmission and developed Zika or Guillian Barre symptoms or become ill within 4 weeks of travel can be tested. For more information go to: http://www.ninds.nih.gov/disorders/gbs/detail_gbs.htm
- The local health department must be contacted in order to access Zika testing. Please call the Oneida County Health Department Communicable Disease Department at 315-798-5290 for more information.



Transmission Prevention:

- Pregnant women in any trimester should consider postponing travel to areas where the Zika virus transmission is ongoing.
- Men who reside in or have traveled to an area of active Zika virus transmission who have a pregnant partner should abstain from sexual activity or consistently and correctly use condoms during sex (i.e., vaginal intercourse, anal intercourse, or fellatio) for the duration of the pregnancy.

New York State is taking steps to limit potential outbreaks of Zika virus from infected mosquitos! For more information on the Governor's 6 point plan:

www.ny.gov/programs/6-step-new-york-state-zika-action-plan

- Suggested timeframe to wait before trying to get pregnant: Women should wait at least 8 weeks after Zika symptoms start or after possible exposure to Zika virus. Men who have had symptoms should wait at least 6 months after symptoms start. Men who are exposed but have no symptoms should wait at least 8 weeks after exposure.
- The best way to prevent the virus is to avoid mosquito bites, use air conditioning or screens when indoors, and wear long sleeves and pants, and use insect repellent when outdoors.



For more information on Zika virus:

- NYS DOH Zika Information Helpline: Monday- Friday 9am -5pm 1(888) 364-4723
- For more information for clinicians go to: <http://www.cdc.gov/zika/hc-providers/index.html>
- For interim guidelines for pregnant women: <http://www.cdc.gov/mmwr/volumes/65/wr/mm6502e1.htm>

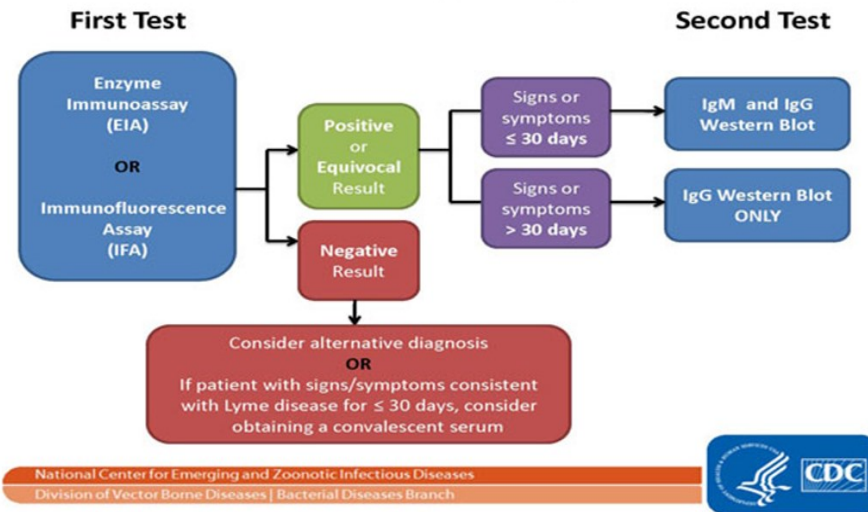
Ticks and Lyme Disease

Spring is in the air! With over 30,000 reported cases of Lyme disease, and 2853 confirmed cases in NYS in 2014 tick bite prevention remains important. CDC currently recommends a two-step process when testing blood for evidence of antibodies against the Lyme disease bacteria. Both steps can be done using the same blood sample.

The two steps of Lyme disease testing are designed to be done together. CDC does not recommend skipping the first test and just doing the Western blot. Doing so will increase the frequency of false positive results and may lead to misdiagnosis and improper treatment

Patients should be reminded to check for ticks after outdoor activity and remove them as soon as possible. The risk of contracting Lyme Disease is greatly reduced if the tick is removed within 36 hours. Visit www.health.ny.gov/tickfree.

Two-Tiered Testing for Lyme Disease



NEW Meningococcal Vaccine Recommendations and Requirements

The New York State Department of Health (NYSDOH) is strongly recommending the administering of a **second (booster) dose** of vaccine against meningococcal serogroups A, C, W-135, and Y (MenACWY vaccine) to adolescents aged 16 years and older.

Effective September 1, 2016, students entering grades 7-12 in New York State schools will be required to be fully vaccinated against meningococcal disease, according to the Advisory Committee on Immunization Practices (ACIP).

The ACIP recommends that adolescents receive a first dose of MenACWY vaccine at 11-12 years of age, and a booster dose at age 16 years in order to boost their immunity during the years at which they are at greatest risk for meningococcal disease.

If the first dose was administered on or after the 16th birthday, a booster dose is not necessary.

The NYSDOH asks you to think **SEARCH**:

Strongly recommend and administer the MenACWY booster to all adolescents aged 16 years and older.

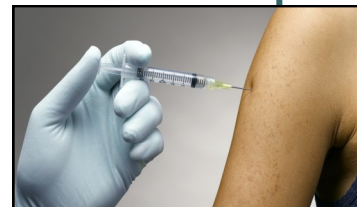
Vaccinate at **E**very **A**ppointment— including well **child visits, sick visits, camp and sports physicals**

Recall adolescents aged 16 years and older who are overdue for their MenACWY booster dose

Catch up adolescents overdue for doses of **HPV, Tdap, and other vaccines** at the same visit.

For additional tools and resources: <http://www.give2mcv4.org>

http://www.health.ny.gov/diseases/communicable/meningococcal/docs/meningococcal_qa.pdf



Influenza in Oneida County

According to the New York State Department, influenza activity levels continue to be categorized as geographically widespread. This is the tenth consecutive week that widespread activity has been reported. Locally, there were 951 laboratory-confirmed influenza reports in Oneida County for the month of March. This was a significant increase from 63 reported cases February. As of April 9, 2016, there have been a total of 1,309 confirmed cases of Combined Influenza A and B in Oneida County.

Influenza vaccine is still available and should be offered to any patients that have not already received the vaccine for 2016.

Reinforce Infection Prevention Practices such as good hand washing, and avoiding contact with other as much as possible to help minimize the spread of flu.



Stay up-to-date on CDC flu surveillance
www.cdc.gov/flu/weekly/summary.htm



Oneida County Communicable Disease Surveillance - March 2016

DISEASE	Jan 2016	Feb 2016	Mar 2016	YTD 2016	YTD 2015	DISEASE	Jan 2016	Feb 2016	Mar 2016	YTD 2016	YTD 2015
Tuberculosis	0	0	2	2	0	Influenza A	3	72	951	1026	881
Giardia	4	2	3	9	1	Influenza B	0	3	25	28	24
Rabies Exposure	1	1	3	5	1	Pertussis	0	1	0	1	6
Salmonella	1	2	2	5	3	Cryptosporidiosis	1	0	0	1	0
Campylobacter	1	3	2	6	1	Syphilis	0	1	1	2	1
Hepatitis C	13	19	25	57	26	Gonorrhea	2	3	6	11	19
Hepatitis C (acute)	0	1	0	1	0	Chlamydia	4	64	84	152	119

PrEP and PEP to Prevent HIV Infection

PrEP (Pre-exposure prophylaxis) for HIV infection prevention

PrEP should only be considered for people who are HIV negative and at very high risk for HIV infection.

People are considered very high risk if they are:

- ◆ in an ongoing relationship with an HIV-positive partner
- ◆ not in a mutually monogamous relationship with a partner who recently tested HIV-negative
- ◆ gay or bisexual men who have had anal sex without a condom or been diagnosed with a STD within the past 6 months
- ◆ men who have sex with both men and women
- ◆ heterosexual men or women who do not regularly use condoms during sex with partners of unknown HIV status who are at substantial risk of HIV infection (e.g., people who inject drugs or women who have bisexual male partners)
- ◆ injection drug users in the past 6 months and have shared needles or been in drug treatment in the past 6 months

PrEP Treatment: Truvada - 1 tab daily.

⇒ Must be taken **EVERY DAY**. If not, patient may not have enough medicine to block the virus. It takes 7 days to build up maximum level of protection.

Effectiveness: up to 90 % prevention for those with sexual exposure and up to 70% for those that use IV drugs and share needles.

Side effects: possibility of nausea which usually subsides.

- Bloodwork (liver, kidney, HIV tests) and physical exams need to be done initially and on a routine basis
- Patients shouldn't stop using condoms since they can still get STD's. Condoms will reduce the risk of infection even further.
- Insurance covers this medication, but for those uninsured or underinsured there are medication assistance programs.



ANY CLINICAL PROVIDER CAN PRESCRIBE PrEP.

NYSDOH compiled a directory of providers that prescribe PrEP. Clinical providers offering PrEP interested to participate in directory can register by clicking on: <https://www.surveymonkey.com/s/S329ZK5>.

For more information about PrEP visit NYSDOH web page: <http://www.health.ny.gov/diseases/aids/general/prep/>.

PEP (Post-exposure prophylaxis) for HIV infection prevention:

This is an option for someone who may have been recently exposed to HIV.

Types of Exposures for Which PEP Should Be Recommended: Receptive and insertive vaginal or anal intercourse with a person known to be HIV positive or whose HIV status is unknown; Needle sharing; Injuries with exposure to blood or other potentially infected fluids from a source known to be HIV infected or HIV status is unknown.

Clinical providers should triage patients who may require PEP as urgent cases because PEP should ideally be initiated within **two hours and no later than 36 hours after exposure**. A best practice is to administer the first dose of PEP while conducting a baseline evaluation to establish that the patient: 1) is not already HIV infected; and, 2) has a high risk of exposure to HIV.

PEP is not intended for long-term use. It is not a substitute for regular use of other proven HIV prevention methods, such as pre-exposure prophylaxis (PrEP), correct and consistent condom use or use of sterile injection equipment.

For more information visit: https://www.health.ny.gov/diseases/aids/general/prep/docs/dearcolleague_3-2015.pdf

April is STD Awareness Month

April is STD Awareness Month, an annual observance to raise public awareness about the impact of STDs on the lives of Americans and the importance of preventing, testing for, and treating STDs. It is an opportunity to normalize routine STD testing and conversations about sexual health. The following are this years messages:

1. Protecting your patient's health is as easy as **Talk. Test. Treat.**
2. Providing the best care possible means **talking** to your patients about their sexual health.
3. **Test** your patients for STDs as recommended.
4. Follow CDC's STD Treatment Guidelines to ensure appropriate **treatment** and care.

STD Infographic- <http://www.cdc.gov/std/prevention/lowdown/index.html>

Condom Do's and Don'ts- <http://www.cdc.gov/teenpregnancy/pdf/teen-condom-fact-sheet-english-march-2016.pdf>

WHAT'S STOPPING YOUR PATIENTS FROM GETTING TESTED FOR STDs?

1 IN 2 SEXUALLY ACTIVE YOUNG PEOPLE WILL GET AN STD BY THE AGE OF 25 MOST WILL NOT KNOW IT

GET YOURSELF TALKING TODAY.

I've only had one partner so I don't need to get tested for STDs, right?

You can tell if someone has an STD by looking, right?

If I needed to be tested, my doctor would automatically test me, right?

I've had a PAP test (or donated blood), so I've been tested for STDs, right?

You can't get any STDs from oral sex, right?

I don't have symptoms, so I don't need to be tested, right?



ANTHONY J. PICENTE, JR.
ONEIDA COUNTY EXECUTIVE



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**Clinic Hours: 8:30-4pm
Monday through Friday**

<p>STD</p> <p>GYT</p> <p>GET YOURSELF TESTED</p>	<p>Maternal Child Health</p>
<p>HIV</p>	<p>TUBERCULOSIS</p>
	<p>Communicable Disease</p>

All previous Public Health Updates are posted at <http://www.ocgov.net>
Go to "Health Department" then click on "For Providers"

Etc., Etc.

NY Links– System Linkages and Access to Care– Regional Group Meeting May 11th; 9am-1pm- Syracuse

Join the NYSDOH AIDS Institute and CNY Providers, Leaders, and Community Members committed to providing linkages to care, retention in care, and viral load suppression rates in CNY counties for people living with and impacted with HIV/AIDS. RSVP to Howard Lavigne by 5/4/16: 315-477-8749 or howard.lavigne@health.ny.gov

Mohawk Valley Infant Sleep Coalition presents: "Let's Talk! A Conversation Series About Infant Sleep" Friday, April 29th, 1-2:30pm

The first in a series of webinars: Expert presenters will explore the science behind the American Academy of Pediatrics' Sleep Recommendations, better preparing you to talk about infant sleep with families.
Register at: <https://attendee.gotowebinar.com/register/1017347696540623618>
Questions? April Owens– 732-4657 X 222

WIC in Rome has a **NEW** location!

415 North Madison St.
Rome, NY 13440
Phone: 356-4755

Smoking Cessation Classes

MVCC Respiratory Therapy Program in collaboration with Oneida County Health Department will offer a FREE 3-week smoking cessation class series. Classes will begin on April 25th from 4:30-6pm, and will use the American Cancer Society Freshstart curriculum. To register please call: 798-5486 or by email: revans@ocgov.net

Antibiotic Resistance

The threat of untreatable infections is real. Just a reminder to providers to prescribe antibiotics correctly and refrain from overprescribing to avoid antibiotic resistance. More information to come on this in the next newsletter!

<http://www.cdc.gov/features/>

Effective March 27, prescriptions can no longer be faxed or called in.

All prescriptions (controlled and uncontrolled) must be electronically submitted. For more information on the new E-Prescribing law and circumstances that are exempt from E-Prescribing, visit: http://www.health.ny.gov/professionals/narcotic/electronic_prescribing/