



# PUBLIC HEALTH UPDATE

AUGUST SURVEILLANCE

SEPTEMBER / OCTOBER  
NEWSLETTER

## SPECIAL POINTS OF INTEREST:

- EV-D68 has been confirmed in Oneida and surrounding counties.
- Healthcare providers are alerted to report neurological symptoms to CDC
- New Flu recommendations include timing and number of doses for children.
- STD guidelines have been revised due to antibiotic resistance.

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## EV-D68 — GUIDANCE FOR HEALTHCARE PROFESSIONALS

The United States is currently experiencing a nationwide outbreak of enterovirus D68 (EVD68) with at least one case in each state being reported. By Sep. 29, 2014 the NYS Public Health Lab reported more than 120 confirmed cases.

Many state health departments are currently investigating reported increases in cases of severe respiratory illness in children. This increase could be caused by many different viruses common this time of year. EV-D68 appears to be the predominant type of enterovirus this year.

Most of the confirmed cases of EVD68 infection have been

among children. Many of the children had asthma or history of wheezing.

CDC is working closely with



**Confirmed cases have been identified in NYS, the Capital District, Madison, Oneida and Onondaga Counties**

the Colorado Department of Health and Children's Hospital Colorado to investigate reports from August 9 to September 17, 2014 of nine children hospitalized for

sudden onset of neurologic illness with limb weakness of unknown cause.

Respiratory specimens from 8 of the children were tested for rhino/enterovirus; 2 were negative and 6 were positive

CDC is investigating whether this cluster of neurologic illness in Colorado may be linked to this very large EVD68 outbreak.

CDC will share information as soon as they have it, and post updates at:

<http://www.cdc.gov/non-polio-enterovirus/outbreaks/EVD68-outbreaks.html>

(See NYSDOH and CDC attachments)

## What Healthcare Professionals Should Do

- Consider EV-D68 as a possible cause of severe respiratory illness, particularly in children, and report unusual increases in the number to the local health department.
- Evaluate and report to NYSDOH any patients  $\leq 21$  years with sudden onset of limb weakness and an MRI showing abnormalities in the nerve tissue in the spinal cord.
- The general public can help protect themselves from respiratory illnesses by washing hands with soap and water, avoiding close contact with sick people, and disinfecting frequently touched surfaces.
- CDC Enterovirus D68 website: <http://www.cdc.gov/non-polio-enterovirus/about/EVD68.html>

# WHAT'S NEW WITH THE FLU?



The best defense against influenza is the influenza vaccine

Annual influenza vaccination is recommended for all persons aged 6 months and older, as has been recommended since the 2010–11 influenza season. 2014–2015 Vaccine Composition:

- ◇ A/California/7/2009 (H1N1)-like
- ◇ A/Texas/50/2012(H3N2)
- ◇ B/Massachusetts/2/2012
- ◇ Quadrivalent vaccine will include these antigens plus B/Brisbane

There are also new recommendations regarding the use of live attenuated influenza vaccine (LAIV) for healthy children aged 2 through 8 years. Several studies have demonstrated superior efficacy of LAIV in children. For children and adults with chronic medical conditions conferring a higher risk for influenza complications, data on the relative safety and efficacy of LAIV and inactivated influenza vaccine (IIV) are limited. When immediately

available, LAIV should be used for healthy children aged 2 years through 8 years who have no contraindications or precautions. However, inactivated influenza vaccine (IIV) should be used if LAIV is not immediately available.

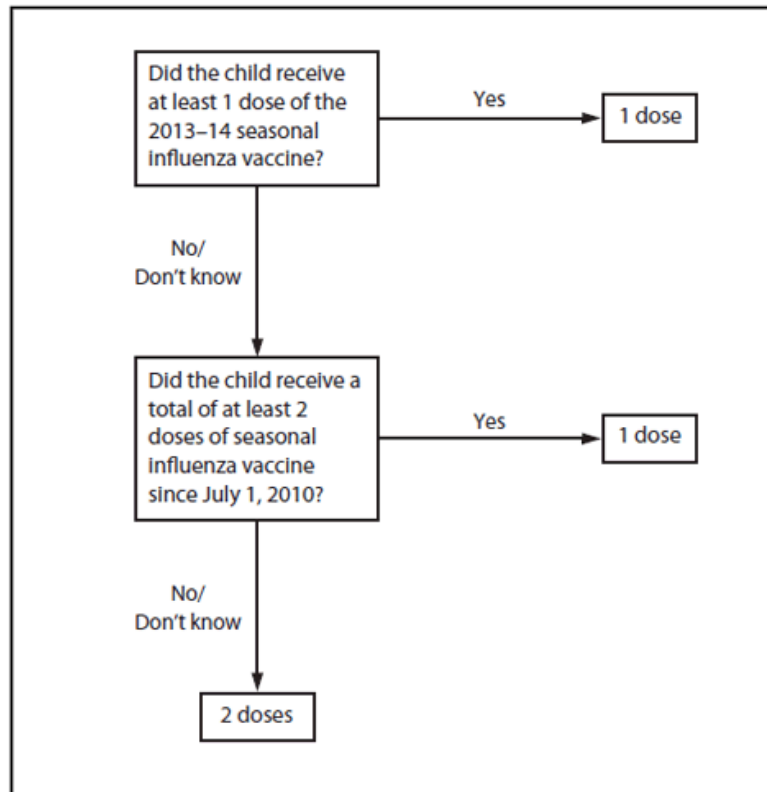
For the entire manuscript of ACIP Recommendations for the 2014–2015 Influenza Season, click on:

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6332a3.htm>

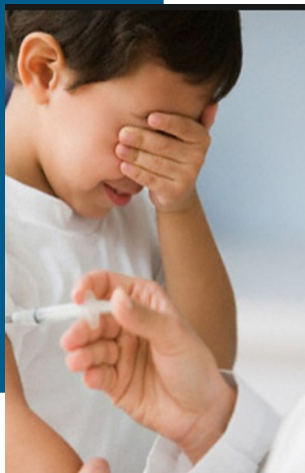
## TIMING OF FLU SHOTS IN CHILDREN

Because the virus composition of the 2014–15 seasonal influenza vaccine is the same as it was for the 2013–14 season, children aged 6 months through 8 years need only 1 dose of vaccine in 2014–15 if they received  $\geq 1$  dose of 2013–14 seasonal influenza vaccine, regardless of previous vaccination history.

Routine annual influenza vaccination is recommended for all persons age  $\geq 6$ mos who do not have contraindications



Avoid missed opportunities, offer the vaccine during routine visits.



# GONORRHEA TREATMENT : A Shrinking Arsenal



In response to recent surveillance data suggesting that the oral antibiotic cefixime is becoming less effective in treating gonorrhea, CDC has revised its gonorrhea treatment guidelines to preserve

the last available effective treatment option for as long as possible.

**CDC revised guidelines:**

CDC no longer recommends cefixime as an effective oral treatment for gonorrhea, leaving only injectable ceftriaxone to be used in combination with one of two oral antibiotics, either azithromycin or doxycycline. Ceftriaxone is more potent against gonorrhea than cefixime, and when paired with the additional oral antibiotic, might slow the emergence of drug resistance by ensuring that

gonococcal infections are quickly cured and not allowed to spread.

The NYSDOH Bureau of Sexually Transmitted Disease Control recommends dual treatment within less than 2 days. i.e. The oral antibiotic should be administered within 48 hours of the initial injectable antibiotic.

**Gonorrhea in Oneida County:**

**2013 - 82 (YTD)**

**2014 - 69 (YTD)**

New guidelines are published in the August 10,2012 issue of MMWR. Revision was made

**Gonorrhea has progressively developed resistance to the antibiotic drugs prescribed to treat it.**

## ONEIDA COUNTY COMMUNICABLE DISEASE SURVEILLANCE

AUGUST, 2014

DISEASE	AUGUST 2014	YTD 2014	YTD 2013	DISEASE	AUGUST 2014	YTD 2014	YTD 2013
Tuberculosis	0	3	6	Influenza A	*	*	*
Giardia	5	32	49	Influenza B	*	*	*
Rabies	10	54	48	Lyme	6	25	65
Salmonella	2	14	18	Pertussis	2	8	7
Chlamydia	61	488	524	Cryptosporidiosis	4	12	12
Campylobacter	2	13	20	Syphilis	1	5	4

*Influenza numbers reflect all confirmed cases since October 1, 2014 to June 30, 2015*

*YTD– Year to date cumulative data*



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## CLINIC SERVICES

STD

MOMS/Maternal Child



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

# Etc. etc.

MMWR is no longer being sent in paper form. To receive it electronically go to:  
<http://www.cdc.gov/mmwr/mwrsubscribe.html>

### Baby Weigh Station



To check baby's weight and for breastfeeding support  
Open Fridays from 1 - 4 or by appointment! 798-5906  
406 Elizabeth Street, Utica

**NYSIIS**- Providers must submit accurate vaccination information within 14 days of giving shots to persons 19 years and under.

### New LTBI treatment option available:

- \* INH 300mg daily for 9 months
- \* Rifampin 600mg daily for 4 months
- \* **(NEW)** INH/Rifapentine DOT weekly for 12 weeks

Call OCHD TB Department for information.

OCHD Clinic is giving quadrivalent vaccine exclusively this flu season, including FluMist and injectable.

Herkimer County HD is offering the high dose flu vaccine for those >65 yrs.  
Madison County HD is offering FluBlok for those with egg allergies.