

Oneida County Health Department

PUBLIC HEALTH UPDATE

January 2017/February 2017

Dec. 2016 /Jan. - Feb. 2017 Surveillance

New! Vaccine Schedule Page 1
Communicable Disease Stats Page 2
Influenza in Oneida County Page 2
Communicable Disease 2016 Year in Review Page 3
Zika Testing Update Page 4
Increase in Hepatitis C Cases Among Women of Child Bearing Age Page 5
NYSDOH Refugee Health Program & NYSIIS Records Page 5
Health Fair Page 5

Quick News!

Page 6

New! Vaccine Schedules and Guidelines 2017

All adults need immunizations to protect against serious diseases. The advisory panel of the CDC has released the <u>2017 Advisory for Recommended Adult Vaccinations</u>. The new recommendations were developed by the Advisory Committee on Immunization Practices (ACIP).



Here are some highlights:

- The nasal flu vaccine (FluMist) has been found to be ineffective so it is not recommended to be used during 2016/2017 flu season
- Flu vaccine for people with egg allergy People who have an allergy to eggs can now "receive any age-appropriate" flu vaccine. The flu vaccine should be given under supervision for those with an allergy.
- HPV vaccine for adolescents New ACIP recommendation of a two-dose schedule for boys and girls who begin the vaccine regimen between 9 yrs 14 yrs old. The vaccine is more effective than expected at preventing HPV, especially when given during this younger age range. The three-dose schedule is still recommended for women 15-26, and men 15-21 (and those at high risk, up to age 26).
- People who are HIV positive Should now receive a two-dose series of MenACWY.
- Hepatitis B for adults with chronic liver disease People infected with Hepatitis C can benefit from a Hepatitis B series. People with cirrhosis, fatty liver disease, alcoholic liver disease, autoimmune hepatitis, and those with elevated liver enzymes should receive this series as well.

New vaccines schedules:

https://www.cdc.gov/vaccines/schedules

Oneida County Communicable Disease Surveillance

DISEASE	Jan. 2017	Feb. 2017	YTD 2017 (Feb. 2017)	YTD 2016 (Feb. 2016)	DISEASE	Jan. 2017	Feb. 2017	YTD 2017 (Feb. 2017)	YTD 2016 (Feb. 2016)
Tuberculosis	1	1	2	0	Influenza A	273	502	775	75
Giardia	2	4	6	6	Influenza B	18	211	229	3
Rabies Exposure	0	4	4	1	Pertussis	0	0	0	1
Salmonella	1	1	2	3	Cryptosporidiosis	0	0	0	1
Campylobacter	3	1	4	4	Syphilis	0	1	1	1
Hepatitis C	3	3	6	21	Gonorrhea	11	19	30	5
Hepatitis C (acute)	0	0	0	1	Chlamydia	25	33	58	67

INFLUENZA IN ONEIDA COUNTY

According to the New York State Department of Health (NYSDOH), influenza activity levels continue to be categorized as geographically widespread. As of March 11, this is the twelfth consecutive week that widespread activity has been reported. Locally, 714 laboratory-confirmed influenza reports were received in Oneida County for the month of February (a significant increase from 292 reported cases in January).

As of March 11, 2017, there have been a total of 1,479 confirmed cases of combined Influenza A and B in

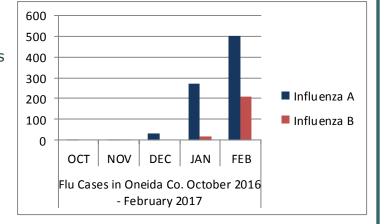
Oneida County. The county is currently seeing an increase in Influenza B.

There were no influenza-associated pediatric deaths reported in Oneida County. In New York State, there have been 7 influenza-associated deaths this season.

Influenza vaccine is still available and should be offered to any patients that have not already received the vaccine for 2017.



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



Communicable Disease - 2016 Year in Review

Disease	Tuberculosis	Giardia	Rabies Exposure	Salmo- nella	Campylobacter	Hepatitis C	Hepatitis C (acute)	Pertussis	Cryptosporidiosis
Total	9	38	52	31	32	125	5	13	18

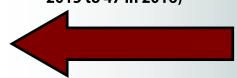
Disease	Influenza A	Influenza B
Total	1544	189

Disease	Syphilis	Gonorrhea	Chlamydia
Total	17	107	748

Group B StrepInvasive... Group B Strep Invasive 35 28 17 47 2013 2014 2015 2016

Group B Strep

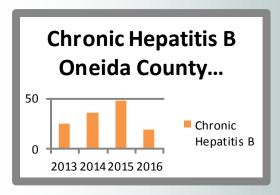
Oneida County experienced a <u>176%</u> increase in Group B Strep (17 cases in 2015 to 47 in 2016)

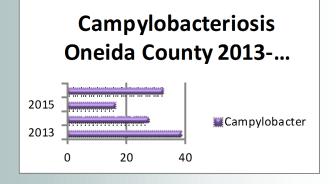




Chronic Hepatitis B

There was a <u>60% decrease</u> in Chronic Hepatitis B cases locally (45 cases in 2015 and 18 cases in 2016)





<u>Campylobacteriosis</u>

Oneida County saw a 100% increase in campylobacter cases over the past year (16 cases in 2015, and 32 cases in 2016)





ZIKA Testing Update

Zika Testing - 2017 Summary for OCHD

As of 3/17/2017, CD staff have received 11 requests for Zika testing of which 6 were males and 5 were females; 3 of the females were pregnant and 8 were registered for testing.

REMINDERS:

- Provider orders are needed before patient is registered for Zika testing by the Health Department
- Providers can test for Zika through commercial labs
- For more information about Zika testing eligibility criteria, please visit:

https://www.health.ny.gov/diseases/zika virus/docs/2016-

Zika Testing - OCHD 2016 Year Review

The CD Department has received 43 requests for Zika testing of which 35 were females and 8 males; 20 of the females reported pregnancy.

Testing status is as follows:

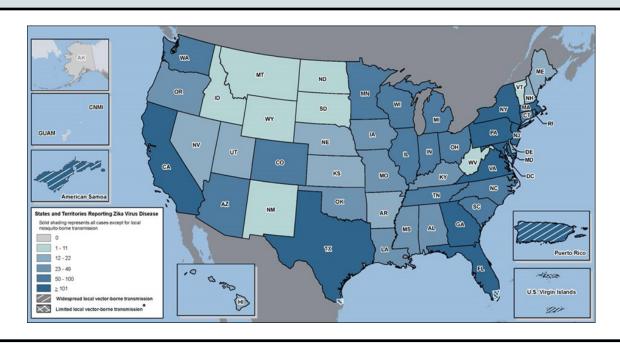
- 4 confirmed positive (3 non-pregnant females and 1 male)
- 19 confirmed negative
- 7 refused convalescent
- 5 did not meet testing criteria
- 6 reside out of Oneida County
- 2 registered but did not get tested

Testing Done by Commercial Labs

The CD department has received 8 negative PCR results that were done at commercial labs: 5 males and 3 females of child bearing age — The females are being followed up by New York State Department of Health

ZIKA HOTLINE: 1-888-364-4723

Zika Cases Reported in the United States (as of March 17, 2017)



Link for Zika Affected Areas: www.cdc.gov/zika/geo/index.html

Increase in Hepatitis C (HCV) Cases Among Women of Child Bearing Age

- There have been increases in Hepatitis C (HCV) infections among women of child bearing age (15-44 yrs.) both nationally and within NYS. Hepatitis C is the leading cause of liver-related morbidity and mortality.
- The most common risk for HCV infection is injection drug use (IDU).

Testing

- HCV testing is recommended for those with a history of injection drug use, and those infected with HIV.
- HCV testing is recommended for infants born to HCV infected women.

Recommendations for Providers:

- Assess pregnant women HCV risk and test accordingly.
- Communicate the HCV status of pregnant women to the baby's pediatrician.
- When reporting HCV status to OCHD, indicate the pregnancy status of the woman.
- Women who are screened and diagnosed with HCV should be referred for HCV treatment with one
 of the highly effective direct acting antivirals, to eliminate the risk of vertical transmission.
- **See attached NYSDOH memo for more information**

NYSDOH Refugee Health Program and NYSIIS Records

The NYSDOH Refugee Health Program has created a system that generates NYSIIS records for refugees with an electronic date on or after December 1, 2016.

The system will provide immediate access to overseas vaccine records, determine vaccines needed, and save time by creating the record.

NYSIIS records will NOT be generated for:

- Certain groups of refugees that are not included in electronic notification system
- Those who do not have an overseas vaccine record

Please search NYSIIS records for a refugee patient record prior to creating one. If no record exists, create a record using overseas vaccine information.

Contact the Refugee Health Program with any questions: 518-474-7000

Please see attachment for official NYSDOH notification**

OCHD HEALTH FAIR FOR BURMESE, KAREN AND NEPALI

10/23/16: Sixteen vendors from the community, addressed many preventive issues such as diabetes, immunizations, health insurance, women's health promotion, Emergency Preparedness, Head Start, Office of the Aging, etc.

OCHD staff administered immunizations to adults in attendance - 65 influenza vaccines were given, and 101 members of Karen and Burmese communities attended.

Youth from local churches volunteered and were instrumental in providing interpreting services as well as event support.









CLINICAL SERVICES

406 Elizabeth Street Utica, New York 13501

Phone: 315-798-5747 Fax: 315-798-1057

E-mail: spejcic@ocgov.net

revans@ocgov.net

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



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

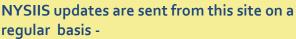
Etc., Etc.

STD/HIV Clinic

Please be aware that as of <u>February 1</u>, <u>2017</u> OCHD Public Health Clinic is <u>providing limited STD and HIV testing.</u>

For more information please call 315-798-5748.

NYSIIS



(doh.sm.NYSIIS via nysiis@health.ny.gov)

These updates are important because they assist you in utilizing the program more efficiently.

If you are not receiving these messages, please contact NYSIIS at 518-473-2839 or nysiis@health.ny.gov.

I

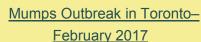
REGISTER NOW FOR THE:

2017 New York State STD Clinical Conference

June 2, 2017

The Conference & Event Center at Niagara Falls Niagara Falls, New York TO REGISTER:

Website: https://ceitraining.org



- Toronto Public Health is currently investigating a cluster of confirmed mumps cases primarily among young adults 18-29 years.
- Since January there have been 7
 confirmed cases, 6 additional cases under
 investigation. They normally average 4
 cases in a year.
- 4 of the 7 confirmed cases reported attendance at downtown Toronto bars.

Falls are not accidents!

A fall is a predictable and preventable event.

Falls are the leading cause of injury-related deaths, hospitalizations and emergency department visits among adults 65 and older. Falls can result in lasting, serious consequences, affecting mobility, independence and mental health.

For more information: https:// www.health.ny.gov/statistics/ prevention/injury_prevention/ falls.htm



ANDREW M. CUOMO Governor **HOWARD A. ZUCKER, M.D., J.D.**Commissioner

SALLY DRESLIN, M.S., R.N.Executive Deputy Commissioner

March 10, 2016

TO	TT 1/1	D	TT	T 1 TT 1/1	D	(T TTD)
TO:	Healtncare	Providers,	Hospitais,	Locai Heaitr	Departments	(LHDS)

FROM: New York State Department of Health (NYSDOH) Bureau of Communicable Disease Control (BCDC) and Wadsworth Center Laboratory (WC)

-	HEALTH ADVISORY: EXPANSION OF ZIKA VIRUS TESTING TO PREGNANT	-
-	WOMEN WHO HAD UNPROTECTED SEX WITH A PARTNER WHO TRAVELED TO	-
-	AN AREA WITH ACTIVE MOSQUITO-BORNE TRANSMISSION OF ZIKA VIRUS	-
_	Please distribute to the Infection Control Department, Emergency Department, Infectious Disease	_
	Department, Obstetrics/Gynecology (including Nurse Practitioners and Midwives), Neurology,	
-	Family Medicine, Travel Medicine Service, Pediatrics, Director of Nursing, Medical Director,	-
-	Laboratory Service, Pharmacy, and all patient care areas	-

- On February 23, the Centers for Disease Control and Prevention (CDC) issued a Health Advisory that announced 14 reports of possible sexual transmission of Zika virus, including several involving pregnant women. Information about sexual transmission of Zika virus and actions that can be taken to prevent transmission are available at http://www.cdc.gov/zika/hc-providers/index.html...
- NYSDOH is expanding Zika virus testing availability to all pregnant women who, during pregnancy, had unprotected vaginal, anal or oral sex with a sex partner who traveled to an area with active mosquito-borne transmission of Zika virus.
 - o Previously, NYSDOH offered testing only to pregnant women who themselves traveled to an area with active mosquito-borne transmission of Zika virus during their pregnancy.
 - o Testing is available regardless of whether the sex partner had symptoms consistent with Zika virus infection.
 - o Infants with microcephaly or intracranial calcifications born to these non-traveling, pregnant women are also eligible for testing.
- NYSDOH is investigating one possible case of sexual transmission of Zika virus to a pregnant woman whose only known risk factor was sexual contact with a symptomatic male partner who had recently traveled to an area with local Zika virus transmission.
 - o To date, 40 cases of Zika virus have been reported in NYS. The other 39 cases were diagnosed in travelers from areas with ongoing Zika virus transmission. No cases of local transmission from a mosquito bite have occurred in the State.
- In addition to the expanded groups discussed above, Zika virus testing at the WC continues to be available for:
 - o Pregnant women who traveled to an area with active mosquito-borne transmission of Zika virus while pregnant.

¹ Available at http://emergency.cdc.gov/han/han00388.asp

- o Non-pregnant women, men or children who develop (or developed) compatible symptoms during or within 4 weeks of travel to an area with active mosquito-borne transmission of Zika virus.
- o Persons who traveled to an area with active mosquito-borne transmission of Zika virus and who present with Guillain-Barré syndrome.
- o Infants with microcephaly or intracranial calcifications born to women who traveled to an area with active mosquito-borne transmission of Zika virus while pregnant.
- <u>Preauthorization of testing by the LHD where the patient resides continues to be required</u>. Contact information and hours of operation for LHDs is available at https://www.health.ny.gov/contact/contact_information/.
 - o If the patient resides in another state, the healthcare providers/or facility caring for the patient should directly contact the New York State Department of Health (NYSDOH) at 1-888-364-4723 between 9AM and 5PM weekdays for authorization.
 - The preauthorization process applies to all patients <u>except</u> infants. Healthcare providers and facilities caring for these infants should directly contact the New York State Department of Health (NYSDOH) at 1-888-364-4723 between 9AM and 5PM weekdays for consultation and facilitation of testing or, if a NYC resident, 1-866-692-3641 anytime.
- WC will perform molecular tests which detect the presence of the virus, as well as both screening and confirmatory tests for antibodies against Zika and other related viruses. Testing is not performed on the weekends.
 - PCR will be performed on specimens that were collected either within one month of the onset of symptoms or within six weeks of travel. PCR results are reported within a few business days of specimen receipt.
 - o Specimens collected between the day of the patient's return from travel up until 9 months after return will be accepted for serology. Screening serology testing takes up to 7 days to complete from date of specimen receipt. Some patients will need confirmatory testing by plaque reduction neutralization testing (PRNT) to rule out the possibility of cross reactivity due to other related viruses such as dengue. PRNT takes an additional 10-14 days because it is dependent on the length of time it takes for virus to grow in culture. For some patients, a second serum specimen may be needed at least three weeks after the first specimen was collected to quantify the rise in antibodies.
 - o Testing of semen is not currently available. CDC is actively studying the incidence and duration of seminal shedding from infected men and the utility and availability of testing in this context.
- Results of Zika virus testing will be made available to the ordering provider through the submitting laboratory and/or the LHD where the patient resides. Providers can access public health consultation for assistance with interpretation of results by calling their LHD or, if a NYC resident, 1-866-692-3641.
- Hospitals and providers must report suspected cases of Zika virus and all other arboviral diseases to the LHD where the patient resides.

If you have any questions, please contact your LHD or the NYSDOH Bureau of Communicable Disease Control at bcdc@health.ny.gov.



ANDREW M. CUOMO Governor HOWARD A. ZUCKER, M.D., J.D. Commissioner

SALLY DRESLIN, M.S., R.N. Executive Deputy Commissioner

Dear Refugee Health Care Providers,

The New York State Department of Health (NYSDOH) Refugee Health Program has developed a system that generates New York State Immunization Information System (NYSIIS) records for refugees with an electronic notification date on or after December 1, 2016. This system will provide you the ability to have immediate access to overseas vaccine records, determine vaccines required, saves time since you will not have to create a record for all refugees, and will reduce the likelihood of duplicate records.

NYSIIS records will be generated for:

- Refugees, adults and children, with an electronic notification date on after December 1, 2016.
- Any refugee with an overseas vaccine record.

NYSIIS records will not be generated for:

- Certain groups of refugees that are not included in the electronic notification system (may include Special Immigrant Visas, Parolees).
- Refugees that do not have an overseas vaccine record.

Important Notes:

- The Refugee Program receives notification information for refugees from the federal Electronic Disease Notification (EDN) system. Date of notification is usually within 2 weeks of date of arrival, but at times it could be longer. All refugees arriving on or after December, and meeting the criteria listed above, should have a NYSIIS record. There will be other refugees with earlier arrival dates that may have a record as well. Beginning immediately, please search NYSIIS records for a refugee patient record prior to creating one. This will ensure that you have the most accurate medical information for the refugee and decreases the chance of creating duplicate records.
- If no record is available after searching NYSIIS, please create a record using overseas vaccine information, if available, as you are currently doing.

If you have any questions, please contact the Refugee Health Program at 518-474-7000. Thank you for all you do for the refugees in New York State.

Sincerely,

Refugee Health Program Bureau of Tuberculosis Control New York State Department of Health

ESP Corning Tower Room 575 Albany, N.Y.12237-0669

Phone: 518-474-7000