

Epi Update for Friday, September 30, 2016
Center for Acute Disease Epidemiology (CADE)
Iowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- **West Nile virus still a threat in Iowa**
- **Helping patients control blood pressure**
- **Infographic: At each visit: Identify. Assess. Act.**
- **Meeting announcements and training opportunities**

New suggested timeframe for pregnancy planning and prevention of sexual transmission of Zika for males

CDC has updated the suggested timeframe that men with possible Zika virus exposure should wait before trying to conceive with their partner. The new recommendation states that all men with possible Zika virus exposure (through travel to an area with ongoing Zika transmission or sexual exposure) should wait at least 6 months after symptom onset (if symptomatic) or most recent possible Zika virus exposure (if asymptomatic) before trying to conceive. Recommendations for women remain unchanged: women with possible Zika virus exposure are recommended to wait to conceive until at least 8 weeks after symptom onset (if symptomatic) or most recent possible Zika virus exposure (if asymptomatic).

The recommendation for the prevention of sexual transmission of Zika for men with a possible exposure has also been updated. Men, who do not have a pregnant partner or a partner planning to become pregnant, should use a condom or abstain from sex for the same time period as above: at least 6 months after symptom onset (if symptomatic) or most recent possible Zika virus exposure (if asymptomatic). The timeframe for sexual transmission recommendations for women remain unchanged: 8 weeks for women after symptom onset (if symptomatic) or most recent possible Zika virus exposure (if asymptomatic).

For additional information visit:

www.cdc.gov/mmwr/volumes/65/wr/mm6539e1.htm?s_cid=mm6539e1_w.

West Nile virus still a threat in Iowa

Even with the seasons changing, mosquitoes are still biting. Late summer and early fall are the seasons of peak West Nile virus activity in the state. Iowans should take the following steps to reduce the risk of exposure to West Nile virus:

- Use insect repellent with DEET, picaridin, IR3535, or oil of lemon eucalyptus. Always read the repellent label and consult with a health care provider if you have questions when using these types of products for children. For example, DEET should not be used on infants less than 2 months old and oil of lemon eucalyptus should not be used on children under 3 years old.
- Avoid outdoor activities at dusk and dawn when mosquitoes are most active.

- Wear long-sleeved shirts, pants, shoes, and socks whenever possible outdoors.

So far this year, 15 cases of West Nile virus have been confirmed in Iowa. For more information about West Nile virus, visit idph.iowa.gov/cade/disease-information/west-nile-virus.

Helping patients control blood pressure

About 70 percent of adults in the United States ages 65 or older have high blood pressure. As healthcare providers know, maintaining a healthy blood pressure level is important to reduce the risk of long-term complications later in life; however, at least 25 percent of adults ages 65 or older with Medicare Part D are not taking their prescribed blood pressure medications as directed (patients may skip doses or stop taking the medication altogether). The reasons people gave for not taking their blood pressure medicine as directed vary:

- Not filling the prescription – nearly 25 percent of new prescriptions for blood pressure medicine are never filled.
- No symptoms – people with high blood pressure often don't have symptoms, so some may not treat a problem they don't notice.
- Complexity – people don't know when to take which pills when they have multiple medicines.
- Side effects – medicines may have unwanted side effects.
- Forgetting – people forget to take their medicine or refill prescriptions on time.
- Cost – medicine costs may be too high for some people.

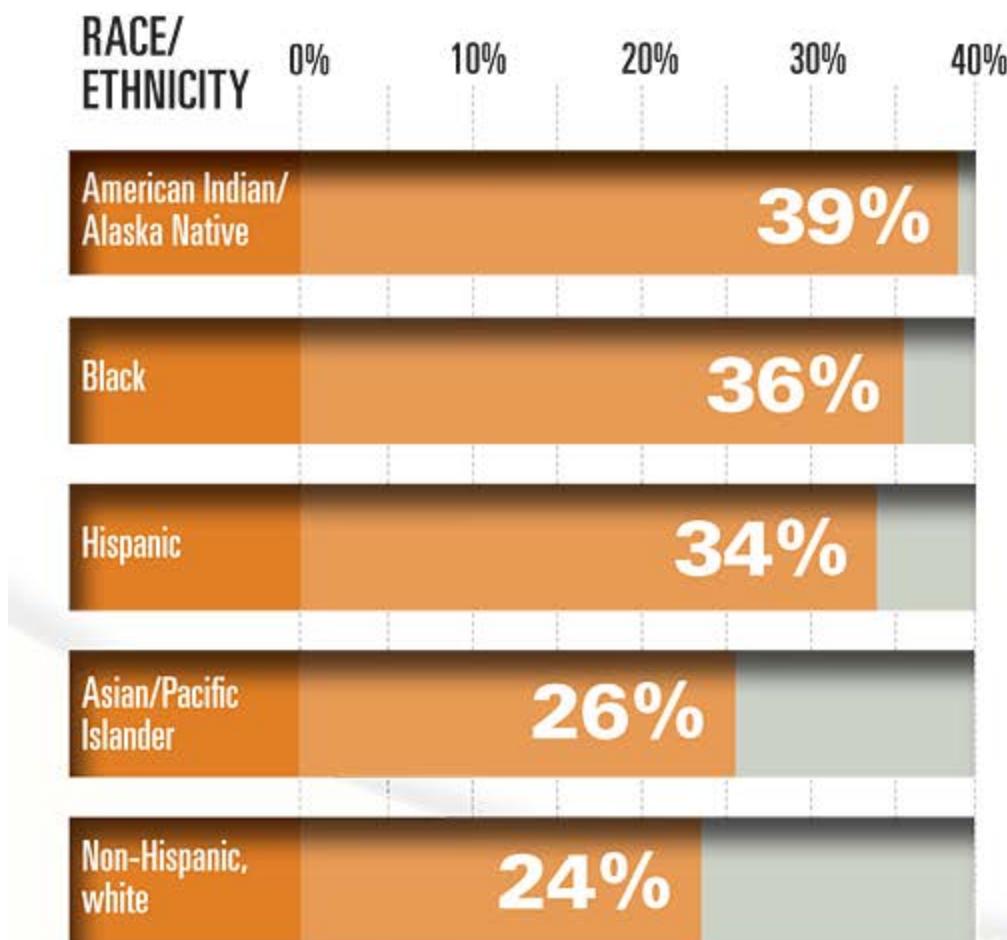
Healthcare systems are encouraged to continue working with patients to make taking medications easier. Suggestions include:

- Decreasing the frequency in which refills are needed (prescribing 90-day refills when possible).
- Coordinating pill refills for the same date.
- Prescribing generic medicines.
- Involving the entire healthcare team at several points of care to ensure patients are taking medicine as directed and to address patient concerns about side effects.
- Encourage the use of home blood pressure monitors and easy-to-use tools (e.g. blood pressure logs and mobile apps) to track and share blood pressure readings.

For more information, visit www.cdc.gov/vitalsigns/blood-pressure/index.html.

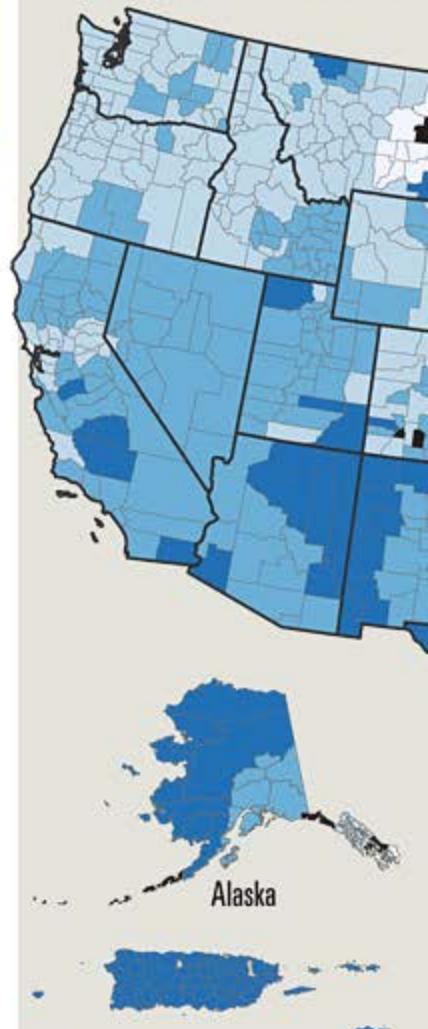
Infographic: Blood Pressure Control

The percent of Medicare Part D enrollees **not taking** their blood pressure medicine **is higher** among certain race/ethnic groups.



SOURCE: Medicare Part D Beneficiaries, 65 or older, Medicare Claims Data, 2014.
To learn more about Medicare Part D, visit: www.medicare.gov/part-d.

There are differences
enrollees who aren't t



NOTE: Data are spatially smoothed.
Additional maps are available on the

The southern US, Puerto Rico, and the US Virgin Islands have the highest percentages of people not taking blood pressure medicine. **1.4 million more people** in all states plus Puerto Rico have higher percentages (North Dakota has the lowest percentage).

Infographic available at www.cdc.gov/vitalsigns/blood-pressure/infographic.html#graphic .

Meeting announcements and training opportunities

2016 Iowa Environmental Health Association Fall Conference - Marshalltown, Iowa
October 18-19. For more information, visit www.ieha.net/2016FallIEHConference.

Have a healthy and happy week!

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