

EPI Update for Friday December 17, 2004
Center For Acute Disease Epidemiology
Iowa Department of Public Health

Items for this week's EPI Update include:

- Season's Second Flu Case in Iowa
- Important Health Information about Influenza Vaccine
- Update on Wisconsin Teenager Recovering from Rabies
- The Epidemiology of Christmas Fever
- Meeting Announcement and Training Opportunities

Season's Second Flu Case in Iowa:

A second case of flu has been confirmed in a child from Eastern Iowa. University Hygienic Lab performed confirmation testing, and the second case was determined to be Influenza A (H3N2).

Important Health Information about Influenza Vaccine:

The flu vaccine is now available to more Iowans. Beginning December 15, the revised list of priority groups will include:

New:

- All adults 50 years or over
- All household contacts of high-risk persons

Current:

- All adults 65 years and over
- All children 6 months through 23 months
- Individuals 2 years through 50 years with underlying chronic medical conditions
- All women who will be pregnant during the influenza season
- All children 6 months through 18 years on chronic aspirin therapy
- Residents of nursing homes and other long term care facilities
- Out of home caregivers and household contact of children under 6 months of age
- All health-care workers involved in direct patient care

Reminder:

□ The second dose of influenza vaccine for children under nine years of age receiving the vaccine for the first time

This press release was issued by the Iowa Department of Public Health Yesterday.

After two months of targeting available flu vaccine to high-risk patients, the Iowa Department of Public Health has approved a limited expansion of the priority list to now include Iowans aged 50 or older and all household contacts of people in the high priority groups. Also, children who have received the flu vaccine for the first time in their lives need two doses. Those children who have received only one dose so far this year should now receive their second dose.

This decision was made to ensure that available vaccine is used to protect as many Iowans as possible and doesn't go unused at the end of the flu season. Any Iowans included in the expanded high priority groups should get their vaccination immediately while limited supplies are available. The department is constantly receiving updates on vaccine availability statewide and will consider further expansion of vaccine recommendations based on vaccine supply and demand. The department has been in regular contact with local public and private public health partners throughout this flu season. Vaccine availability does vary from county to county. While some counties and private physician offices report ample supplies, others are reporting few, if any, available doses. Iowans seeking a vaccination may need to call surrounding county health departments or health-care providers other than the ones they are accustomed to find available vaccine. The FluMist vaccine is also available for those healthy Iowans aged 5 to 49 seeking influenza protection.

"I want to thank the entire health-care community, both public and private, for the hard work in getting flu vaccine this year to our most vulnerable residents," said Dr. Mary Mincer Hansen, director of the Iowa Department of Public Health. "A special thank you also goes to those Iowans wanting a flu shot who have stepped aside and allowed the high-risk residents priority access to the vaccine. Those priority patients who have also declined the vaccination should no longer do so, and get vaccinated as soon as possible"

State health officials have also announced an additional case of influenza. Both cases so far this year have been in children in Eastern Iowa.

For more information on influenza please see: <http://www.idph.state.ia.us/>

Rabies Update: Wisconsin Teenager Recovering

The Wisconsin teenager who was bitten by a bat on September 12, and then hospitalized and treated for rabies in mid-October is now recovering. She is the first human to survive rabies without being treated with human rabies immune globulin and rabies vaccinations. Once a person develops rabies, it is usually too late to treat the person with human rabies immune globulin and rabies vaccinations to try to save them. Although rabies virus has not been found to cause permanent brain damage, death occurs because the virus impairs

areas of the brain that are responsible for breathing and swallowing. Because it was too late to treat her with the rabies immune globulin and vaccinations, doctors at the Children's Hospital of Wisconsin in Wauwatosa chose to put her into a drug-induced coma and use antiviral drugs. Drug induced comas (also known as “artificial hibernation”) have been used with success for many years in people who have had severe brain injury from trauma, infection, or stroke. The doctors expect a good recovery for the teenager and also report she has been responsive to questions by pointing to a message board and nodding her head.

A great deal of history and other useful information on rabies is available at the CDC’s web site: <http://www.cdc.gov/ncidod/dvrd/rabies/>

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THE EPIDEMIOLOGY OF CHRISTMAS FEVER

Christmas Fever is a disease, though its annual appearance and widespread incidence make it seem a normal seasonal condition.

The disease appeared suddenly in the Near East about 2,000 years ago. Early outbreaks were sporadic and localized. Early spread was around the Mediterranean, becoming regular and epidemic. Later spread into Europe and then the rest of the world brought the disease to its present pandemic proportions.

As new populations were affected, mutations apparently occurred in the original virus. In some cases, the mutant viruses have remained relatively population specific (e.g. Pinata syndrome in sections of the Mediterranean subgroup), but in many cases the original mutant viruses have proved stronger than the original strain and have become worldwide. In this connection it should be noted that concurrent infection with more than one strain of the Christmas virus is not unusual.

Description of the Disease

Identification: An acute illness, usually febrile, varying in early symptomatology, but usually with compulsive buying and almost always characteristic color fixations in the red-green spectrum. Presumptive diagnosis may be made when the above are observed alone or in conjunction with sub-clinical signs such as eating large amounts of candy. If the patient is seen during the acute stage, a marked tendency to sing will be observed. A predisposition to buy trees will also be noted. Radical changes in behavior in some cases may be observed in the direction of volubility. Depression is rarely noted. Clinical cases exceed in-apparent infections at least several hundred-fold.

Etiologic Agent: Christmas virus.

Source and reservoir of infection: Department stores have been implicated as possible sources. Man is the only known reservoir.

Mode of transmission: Unknown; presumably by contact with an infected person or with articles associated with the season, such as conifers and tinsel.

Incubation period: Usually short.

Period of communicability: Throughout infection.

Meeting Announcement and Training Opportunities:

Agroville Exercise: Infectious Animal Disease Response Training and Exercise

A one-day training session offered at six sites throughout Iowa, which focuses on Agriculture Emergency Response.

Individuals who should consider attending are:

- Veterinarians
- Federal, state, and local emergency management personnel
- Farmers and producers
- Agriculture industry representatives
- Public health officials
- EMS, fire, and law enforcement personnel

The one-day training session consists of:

Morning session covering topics including:

- Incident command system
- Overview of State Infectious Animal Disease Response Plan
- Understanding an Agriculture Disease Investigation
- Iowa DNR Carcass Disposal Plan

Working Lunch: Discussion of Roles and Responsibilities

Afternoon session:

- Participants break into groups and work through a scenario based on a terrorist incident affecting agriculture

Registration and additional details are available online, at:

<http://www.iowahomelandsecurity.org/asp/Agroville/Agroville.asp>

Public Health Grand Rounds

"Vaccine Shortages: Protecting the Public's Health amid Strategic and Ethical Concerns"
January 28, 2005, 2:00 - 3:00 p.m. Eastern Time

This is the 21st broadcast in a series dedicated to increasing awareness of today's public health challenges. This program will seek to increase awareness of the local, state, and

federal response to vaccine shortages and the strategic and ethical concerns for public health.

Objectives:

- Identify two key factors that influence the stability of the vaccine supply.
- Describe the role of public health in responding to vaccine shortages.
- Identify three strategic concerns posed by vaccine shortages.
- Describe an ethical concern posed by vaccine shortages.
- Identify three lessons learned in the local response.

Audience:

Public health leaders, managers, and professionals from local and state health departments, boards of health, hospitals, community-based health organizations, academic institutions, federal agencies, vaccine producers and distributors, physicians and other health-care providers who are concerned about vaccine shortages and seek to understand the strategic and ethical implications for public health.

Registration for this series is only available online at the newly redesigned web site:

<http://www.publichealthgrandrounds.unc.edu/>

Have healthy and happy holidays!
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