

EPI Update for Friday, May 23, 2008
Center for Acute Disease Epidemiology (CADE)
Iowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- **Prevention of pertussis, tetanus, and diphtheria among pregnant and postpartum women and their infants**
- **CDC recommends shingles vaccine**
- **May is National Hepatitis Awareness month**
- **WHO reports noncommunicable diseases now biggest killers**
- **Meeting announcements and training opportunities**

Prevention of pertussis, tetanus, and diphtheria among pregnant and postpartum women and their infants

In 2005, two tetanus toxoid reduced diphtheria toxoid, and acellular pertussis (Tdap) vaccines (ADACEL[®] and BOOSTRIX[®]) were licensed and recommended for use in adults and adolescents in the United States. Both Tdap vaccines are licensed for single-dose use to add protection against pertussis, and to replace the next dose of tetanus and diphtheria toxoids vaccine (Td)

Available evidence does not address the safety of Tdap for pregnant women, their fetuses, or pregnancy outcomes sufficiently. Available data also do not indicate whether Tdap-induced transplacental maternal antibodies provide early protection against pertussis to infants or interfere with an infant's immune responses to routinely administered pediatric vaccines.

Until additional information is available, CDC's Advisory Committee on Immunization Practices recommends that pregnant women who were not vaccinated previously with Tdap:

- Receive Tdap in the immediate postpartum period before discharge from hospital or birthing center.
- May receive Tdap at an interval as short as 2 years since the most recent Td vaccine.
- Receive Td during pregnancy for tetanus and diphtheria protection when indicated.
- Defer the Td vaccine indicated during pregnancy to substitute Tdap vaccine in the immediate postpartum period if the woman is likely to have sufficient protection against tetanus and diphtheria.

Although pregnancy is not a contraindication for receiving Tdap vaccine, health care providers should weigh the theoretical risks and benefits before choosing to administer Tdap vaccine to a pregnant woman.

For more information visit

[:www.cdc.gov/mmwr/preview/mmwrhtml/rr57e0514a1.htm?s_cid=rr57e0514a1_e](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr57e0514a1.htm?s_cid=rr57e0514a1_e)

CDC recommends shingles vaccine

CDC's Advisory Committee on Immunization Practices recommends a single dose of the zoster vaccine, Zostavax, for adults 60 years of age and older even if they have had a prior episode of shingles.

Zoster vaccination is not indicated for:

- Treatment of acute zoster, or ongoing post herpetic neuralgia (PHN).
- Preventing case patients with acute zoster from developing post herpetic neuralgia (PHN).

Before routine administration of zoster vaccine, it is not necessary to ask patients about their history of varicella (chickenpox) or to conduct serologic testing for varicella immunity.

For more information visit:

www.cdc.gov/mmwr/preview/mmwrhtml/rr57e0515a1.htm?s_cid=rr57e0515_e

May is National Hepatitis Awareness month

May is National Hepatitis Awareness month. In light of that, we'd like to give you some facts about hepatitis:

- There are five distinct types of hepatitis: A, B, C, D, and E. All cause inflammation of the liver.
- The hepatitis B virus is 100 times more infectious than HIV.
- It is estimated that there are 1.4 million Americans with chronic hepatitis B.
- Hepatitis B and C can lead to liver cancer.
- There are vaccines for hepatitis A and B. There is no vaccine for hepatitis C.
- Hepatitis C is the most common blood-borne infection in the United States.
- Almost 4 million Americans, or 1.8 percent of the U.S. population, are or have been infected with hepatitis C.
- Approximately 3.2 million Americans are chronically infected with hepatitis C.
- Hepatitis C is now the leading indication for adult liver transplantation in the U.S.
- There are an estimated 53,000 Iowans infected with hepatitis C.

What hepatitis resources are available for Iowans?

1. Hepatitis C testing services:

Free hepatitis C testing is offered to at-risk clients at thirteen health agencies across the state. High-risk populations include: people who have ever injected drugs, injecting drug users who share needles or other equipment, persons who received blood, blood products, or organ transplants prior to 1992, or persons ever on long-term Hemodialysis.

For more information about Hepatitis C testing sites visit:

www.idph.state.ia.us/adper/common/pdf/hepatitis/hep_c_testing_sites.pdf

2. Hepatitis A and B vaccination services:

Free hepatitis A and B vaccinations are offered to at-risk clients at thirteen health agencies across the state. High-risk populations include people who were diagnosed with a sexually transmitted disease in the past 90 days, men who have sex with men, injection and non-injection drug users, HIV- and/or hepatitis C-infected persons, and sexual partners of persons infected with HIV, hepatitis A (HAV), and/or hepatitis B (HBV).

For more information regarding Hepatitis A and B visit:

www.idph.state.ia.us/adper/common/pdf/hepatitis/hep_a_hep_b_vaccine_sites.pdf

3. Viral Hepatitis Physician Treatment Directory

The Iowa Department of Public Health has updated the Viral Hepatitis Physician Treatment Directory. This directory provides a list of physicians who see patients for medical evaluation and treatment of viral hepatitis.

For more information visit:

www.idph.state.ia.us/adper/common/pdf/hepatitis/directory_physicians_treating.pdf

4. Hepatitis educational materials

Need hepatitis educational materials? Visit the HIV/AIDS/Hepatitis Program clearinghouse form. Obtain free brochures, pamphlets, posters, and DVDs to help educate patients and community members.

For more information, visit:

www.idph.state.ia.us/adper/common/pdf/hepatitis/hiv-hep_clearinghouse_order_form.pdf

WHO reports noncommunicable diseases now biggest killers

The global burden of disease is shifting from infectious diseases to noncommunicable diseases (those that do not pass from person to person), with chronic conditions such as heart disease and stroke now being the chief causes of death globally, according to a new World Health Organization (WHO) report. The shifting health trends indicate that leading infectious diseases – diarrhea, HIV, tuberculosis, neonatal infections and malaria – will become less important causes of death globally over the next 20 years.

For more information visit:

www.who.int/mediacentre/news/releases/2008/pr14/en/index.html

Meeting announcements and training opportunities

None

Have a healthy and happy week!

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