

EPI Update for Friday, December 4, 2009
Center for Acute Disease Epidemiology (CADE)
Iowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- **H1N1 quick points for health care providers**
- **ALERT: Beware of bogus email for H1N1 vaccination registry**
- **Virology Journal report on possible 2009 H1N1 origins**
- **Remember to consider testing for enteric illness**
- **Meeting announcements and training opportunities**

H1N1 quick points for health care providers

- November 20, 2009 OSHA issued a compliance directive to address flu prevention for health care workers whose occupational activities involve contact with patients or contaminated material. See www.osha.gov/OshDoc/Directive_pdf/CPL_02_02-075.pdf
- To date, 644,100 doses of H1N1 influenza vaccine have been shipped to Iowa health care providers. Over the next several weeks it is anticipated that approximately 100,000 doses of vaccine will be available weekly.
- As of November 20, 2009, 46 million doses of 2009 H1N1 influenza vaccine have been shipped to vaccination providers in the United States. The H1N1 vaccine safety monitoring system, vaccine adverse event reporting system (VAERS), has received 3,182 reports of adverse events following H1N1 vaccination; 94% of these reports were not serious (e.g., encompass things like soreness at the injections site). The percentages of reports for H1N1 influenza vaccine are consistent with what is seen with seasonal influenza vaccine. No new or unusual events or pattern of adverse events have emerged from the H1N1 influenza vaccine. See: vaers.hhs.gov/resources/h1n1update#top.
- CDC has updated its guidance on H1N1 influenza in dental health care settings. See: www.cdc.gov/OralHealth/infectioncontrol/factsheets/2009_h1n1.htm
- Antiviral medications distributed in Iowa
 - Antivirals (Relenza and Tamiflu 75mg capsules) have been released from the state stockpile to local public health agencies to be used for patients who meet the CDC guidance for antiviral use in treatment or chemoprophylaxis of 2009 H1N1, and who are underinsured or uninsured.
 - Due to the national shortage of Tamiflu for oral suspension, supplies of oral Tamiflu suspension have been distributed for use in patients 2 years of age and younger, who meet the CDC guidance for antiviral, regardless of their insurance status or ability to pay.
 - Contact your Local Public Health agency for more information.
 - The CDC guidance for antiviral use found at www.cdc.gov/H1N1flu/recommendations.htm.

ALERT: Beware of bogus email for H1N1 vaccination registry

Beware of a bogus e-mail telling Iowans that they must sign up for a state H1N1 flu vaccination registry. The Iowa Department of Public Health and the federal Centers for Disease Control and Prevention say the e-mail is bogus. They said no such registry exists, and they warned that people who click on the link could wind up having their computers infected with a virus.

Virology Journal report on possible 2009 H1N1 origins

The Virology Journal published a very interesting article this month speculating on the origins of the 2009 H1N1 virus, and cites evidence that the virus had three parents: 1) a surface protein similar to 'avian-like' H1N1 isolates from Europe sampled around 1991, 2) a second protein, also 'avian-like', but identified in Asia around 1999, and 3) a third protein similar to the North American 'triple reassortant' virus sampled around 1999. The authors propose the virus reassorted once in Mexico at the beginning of 2009.

The existence of 2009 H1N1 highlights the importance of influenza surveillance, especially monitoring performed by local-level health care providers. To view the abstract on this article, go to www.virologyj.com/content/6/1/207.

Remember to consider testing for enteric illnesses

Many clinics are continuing to see patients with influenza-like symptoms. However, if you see a patient with symptoms not entirely compatible with influenza and with enteric symptoms only or predominately, consider the possibility of enteric illness. Over the past two months, there has been a decrease in the numbers for enteric pathogens reported. Hopefully this is due to many people practicing better hand hygiene. However, some instances of true GI illness may be missed. Please consider testing for enteric diseases if you believe your patients may not be ill with influenza.

Meeting announcements and training opportunities

2009 National Laboratory Network Flu Update: Utility of Research Influenza Diagnostic Tests (RIDTs) for H1N1 & Seasonal Influenza. Are Rapid Influenza Diagnostic Tests (RIDTs) useful in diagnosing influenza A (H1N1) and seasonal influenza? Audience: This intermediate-level program is appropriate for clinicians, laboratory personnel and physicians from physician office laboratories and medical clinics. This program is available 24/7. Register online at www.nltn.org/210-09.htm.

G-290 Public Information Officer (PIO). Dec. 10-11, 8 a.m. to 4 p.m. Atlantic, Iowa. This free 16-hour course will assist participants with building the skills needed to be a full or part-time public information officer. Skills addressed include oral and written communications, understanding and working with the media, and the basic tools, latest technology and techniques PIOs need. Register by contacting Lindsay Bollard at 515-574-1263 or bollard@iowacentral.com Space is limited, so please register as soon as possible.

Biosafety and Biosecurity: Minimizing the Risks in the Laboratory. On January 13, 2010, at the University Hygienic Laboratory Ankeny facility, this course will cover the

differences between biosafety and biosecurity, utilizing biosafety level (BSL) 3 practices in a BSL2 lab, and information on conducting risk assessments for both biosafety and biosecurity. For more information contact Rich Bonar at 319-335-4500 or richard-bonar@uiowa.edu.

Have a healthy and happy week!

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