



HEALTH  
DEPARTMENT  
of Northwest Michigan

# Physicians' Update

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## Influenza Update

As a prelude to this year's influenza season some data from the 2010-2011 Seasonal Influenza in Michigan:

- The 2010-2011 influenza season had a moderate level of activity. The first positive specimen was announced on October 18, 2010 and activity showed a gradual rise with widespread activity reported for the six weeks between February 12, 2011 and March 19<sup>th</sup>, 2011.
- The 2010-2011 season saw a mix of Influenza A (H3N2), 2009 Influenza A (H1N1), and Influenza B viruses.
- There were 6 Pediatric Deaths due to Influenza in Michigan during the last flu season. Five were associated with Influenza B infection and one with H1N1. Two cases were less than 6 months old and not eligible for vaccination. A 9 month, 6 year, and 13 years old who died from flu had not been vaccinated during the current or previous seasons and an 8 year old who had been vaccinated also died. Many of the cases had underlying risk factors such as cardiac disorders or asthma but some had no known risk factors.
- Twenty-five outbreaks were reported to the State from all regions. Twenty were from long term care or assisted living facilities, three from schools, and two from universities. Outbreak reports peaked in March.

### Did you know?

- Women whose providers offered them a flu shot were **five times more likely** to get vaccinated than women who did not receive a provider offer but only 62% reported receiving a provider recommendation. Overall vaccination rates of pregnant women have improved from less than 20% in 2008-9 to almost 50% in 2010-2011.
- Last year 63.5% of HCP were vaccinated. Physicians had the highest rates (85%). Facilities with an employer requirement averaged 98%, those without averaged 60%. (Source MMWR, August 19, 2011). According to a fall 2011 survey of Michigan hospitals by the Michigan Department of Community Health (MDCH), 41 percent of Michigan hospitals have in place some kind of mandatory influenza vaccine policy for health care personnel.

## What's new for Flu 2011-2012

- Michigan's first few influenza cases have been confirmed at the State lab in early October. Vaccine supply seems adequate this year with 166-173 million doses produced.
- The 2011-12 Vaccine contains the same strains as last year's vaccine. Because immunity declines over the course of a year (especially in the elderly) an annual flu vaccine is recommended for everyone (over 6 months) every year regardless if the strains have changed or not.
- The recommendations regarding flu vaccine and egg allergy have changed. A prior severe (anaphylaxis, angioedema, respiratory distress, etc.) is a contraindication to receipt of flu vaccine. More mild reports of allergies are precautions to flu vaccine. In general if a person can eat lightly cooked eggs without reaction they can receive flu vaccine. The published MMWR on Influenza Vaccine Recommendations of the ACIP (August 26, 2011) has more information on this subject.
- Children 6 months through 8 years need 2 doses (separated by 4 weeks) of vaccine if they have never received a flu vaccine before or if they did not receive any doses last year. If they received one or more doses last year they need only one dose this year.
- A new formulated Intradermal (ID) Flu Vaccine is available this year for 18-64 year olds. It uses less antigen than a regular flu shot but produces a comparable immune response. Fluzone Intradermal comes in a prefilled syringe with ID needle with a smaller 0.1ml volume. And for the second season there is a high dose flu vaccine for persons over 65 years, but at this time there is no stated preference for this formulation over any other.



Linda Yaroch Appointed Health Officer of HDNW  
After 37 years as the Administrator and Health Officer of the Health Department of NW Michigan, Gerald Chase retired in August of this year. Linda Yaroch, the acting Deputy Health Officer, has taken over this position and I again am fortunate to work with a very dynamic and capable leader.

## Colorectal Screening Program

The American Cancer Society recommends regular colorectal cancer screening beginning at age 50. In order to help reduce the economic disparity of screening the Health Department is offering free at-home colorectal cancer screening kits for men and women age 50 to 64 from Antrim, Charlevoix, Emmet, and Otsego counties who are uninsured or whose health insurance does not cover colorectal cancer screening. Clients can call the Health Department to check eligibility and request an at-home screening kit. Further testing may be covered by the Colorectal Cancer Early Detection Program. If needed, the Health Department helps coordinate treatment with local hospitals and physicians.

During the last year the Health Department has facilitated screening 130 people including 22 colonoscopies.

## Communicable Diseases Jan—Sept 2011

<u>Disease</u>	<u>Antrim</u>	<u>Charlevoix</u>	<u>Emmet</u>	<u>Otsego</u>	<u>Total</u>
Campylobacter	<5	0	<5	5	7
Cryptosporidiosis	0	0	0	<5	<5
Salmonellosis	0	<5	<5	<5	<5
Shiga toxin-producing Escherichia coli --(STEC)					
	<5	0	0	0	<5
Shigellosis	0	<5	0	0	<5
Flu Like Disease*	83	57	449	242	831
Influenza	0	0	0	0	0
Influenza, 2009	0	0	0	0	0
Influenza, Novel	0	0	0	0	0
Meningitis -	<5	0	0	<5	<5
Streptococcus	0	0	<5	0	<5
Blastomycosis	0	0	<5	0	<5
Head Lice	6	6	0	0	12
Kawasaki	0	<5	0	0	<5
Strep Throat	7	22	17	41	87
Streptococcal Dis,	0	<5	0	0	<5
Animal Bite	0	<5	0	0	<5
Chlamydia	16	14	11	8	49
Gonorrhea	<5	<5	0	0	<5
Chickenpox	0	<5	0	0	<5
Lyme Disease	0	<5	0	0	<5
Hepatitis C,	5	6	5	<5	17
Total	121	115	486	303	1025

### Hornet Health Center hours expanded

The Health Department of Northwest Michigan has awarded \$141,853 in grant funding from the U.S. Health Resources & Services Administration (HRSA) to improve access to basic primary health care for school-aged children, many of whom have no other sources of care. The Health Department requested funding to: 1) renovate the Hornet Health Center, adding a small group room and a second exam room in the clinic in the Pellston Middle/High School; 2) purchase new equipment to replace outdated equipment at the Ironmen Health Center in Mancelona; and 3) purchase electronic medical record software for use at both student health centers. Funding has also made it possible to expand the hours of the Pellston based Hornet Health Center from 3 days a week to a full time 5 days a week center offering both medical care and mental health services.

### School Wellness Program begins in Boyne City

Michigan Department of Community Health (MDCH) has awarded a five-year \$500,000 grant to the Health Department of Northwest Michigan for a School Wellness Program at Boyne City Elementary and Middle Schools beginning in September 2011. School Wellness Programs include nursing services, individual and group health education using evidence-based curricula and interventions, school staff training and professional development, and mental health services. Similar programs have shown positive impact on school attendance, school achievement, and school completion.

Tami Frampus, the long-time Boyne City School Nurse, will serve as the School Wellness Program Nurse. Though she will continue to see students who become sick or hurt at school, the project will also focus on nutrition and physical activity. For example, Frampus will lead a research-based project to make changes in the middle school cafeteria with the goal to increase student consumption of fruits and vegetables.

### Building Healthy Communities

The Health Department has received \$31,000 in grants for Building Healthy Communities and Safe Routes to School projects. The projects are designed to reduce rates of chronic disease through proven strategies for systems, environmental and policy change. In other words, the goal is to help make the healthy choice the easy choice. The Health Department is leading the Pellston Building Healthy Communities coalition to increase fruit and vegetable consumption and increase the number of outdoor smokefree environments. We are also partnering with the school districts in Boyne City, Gaylord, and Pellston to develop Safe Routes to School Action Plans. Communities that develop strong plans are eligible for state and federal funding for sidewalks, bike trails, traffic lights and other improvements to the built environment that make it safer to walk and bike to school. Please contact Jane Sundmacher at [j.sundmacher@nwhealth.org](mailto:j.sundmacher@nwhealth.org) or 231-347-5041 for more information.

### Community Health Assessment

The Health Department is launching a comprehensive community health assessment project. Over the next 12 months, we'll be implementing the "gold standard" framework, Mobilizing for Action through Planning & Partnerships (MAPP) in partnership with Charlevoix Area Hospital, Northern Michigan Regional Hospital, and Otsego Memorial Hospital. We'll be forming advisory committees soon in Antrim, Charlevoix-Emmet, and Otsego counties to customize four assessments for the first phase of the project: Community Health Status Assessment, Public Health System Assessment, Themes & Strengths Assessment, and Forces of Change Assessment. We welcome your involvement! If you're interested in serving on a MAPP Committee, please contact Jane Sundmacher at [j.sundmacher@nwhealth.org](mailto:j.sundmacher@nwhealth.org) or 231-347-5041.

### HPV4 (Gardasil) for Males

The use of HPV4 in males is a *permissive* recommendation, which means that it can be given to any male age 9-26 years to reduce their risk of genital warts. It would be most effective if given before the onset of sexual activity. A permissive recommendation means that a provider has the option of actively promoting the vaccine for males or administering the vaccine only to males who ask to be vaccinated.

Furthermore, because it is a permissive recommendation the Vaccine For Children (VFC) rules are slightly different compared to other vaccines. Males 9-18 years of age who are enrolled in Medicaid are uninsured, or are Native American/Alaskan Native can receive HPV4 in a private provider office using VFC vaccine. However, *uninsured* clients may only receive VFC HPV4 vaccine at a Local Health Department, Federally Qualified, Tribal, or Migrant Health Center.

Remember that HPV2 (Cervarix) is not recommended or licensed for use in males.

### Near Elimination of U.S. Varicella Deaths

A study by Marin, *et al* published in the August 2011 *Pediatrics* looked at mortality due or related to varicella disease in the U.S in the time periods 1990-1994 (prevaccine) and 2005-2007 (1 Dose Regimen). Deaths attributable to varicella declined 88% overall and 96% in subjects under 50. The number of deaths has declined from an average of over one hundred annually prevaccine to under 20 annually in the 2002-2007 range. Among children under 9 there were a total of 6 deaths due to varicella over the entire 6 year span of 2002-2007 (an average of one per year), compared to an annual average of 29 deaths per year in the 1990-1994 era. The authors conclude that with the current 2 dose regimen there is potential that mortality from varicella in the U.S could be eliminated.

**To report STDs or HIV, contact Bert Notestine at 347-5022, or use our secure fax 231-547-0460.**

**To report a Communicable Disease to the Health Department:**

**Emmet County:**

Pat Guillaume, RN  
231-347-5636

**Charlevoix County:**

Marley Niewendorp  
231-547-7631

**Antrim & Otsego Counties:**

Sandy Tarbuton, RN  
989-732-6869

**OR**

**Send a secure fax 24 hours / day:  
231-547-0460**