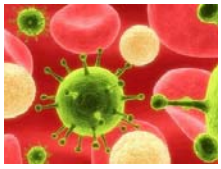
Waco-McLennan County Public Health District

Quarterly Report: Epidemiology & Public Health Preparedness

September-October-November 2014



Waco-McLennan County Public Health District
225 West Waco Drive, Waco, Texas 76707
P: 254-750-5450

The Waco-McLennan County Public Health District (WMCPHD) received 95 reports of communicable disease from September 1st through November 30th of 2014. Reported diseases for this time period are listed in Table 1. There were 101 reports of communicable disease reported in the previous quarter (June-August 2014). Seven animal rabies cases were identified from McLennan County this quarter by the Department of State Health Services - Zoonosis Control Department. The majority of reports consisted of gastrointestinal illnesses with 5 parasitic and 78 bacterial as causative agents. There were 9 vaccine preventable diseases reported during this quarter.

Table 1: Communicable Disease Statistics	Mar-May 2014	Jun-Aug 2014	Sep-Nov 2014
Amebiasis	1	0	**0**
Anaplasma phagocytophilum	0	1	**0**
Campylobacteriosis	9	8	**5**
Cryptosporidiosis	3	5	**5**
Cyclosporiasis	0	1	**0**
Encephalitis, West Nile	0	0	**1**
Haemophilus influenzae	0	2	**0**
Hepatitis B (Acute)	1	1	**0**
Legionellosis	1	1	**0**
Lyme Disease	0	1	**1**
Malaria	0	1	**0**
Pertussis	6	1	**0**
Salmonellosis	12	22	**45**
Shiga Toxin/Ecoli	0	0	**2**
Shigellosis	30	53	**26**
Spotted Fever Rickettsiosis	0	0	**1**
Streptococcal Invasive	1	2	**1**
Varicella (Chickenpox)	5	2	**8**
TOTAL	**69**	**101**	**95**

Overall, gastrointestinal (GI) disease activity due to bacterial infections was a high in this and previous quarters (Figure 1).

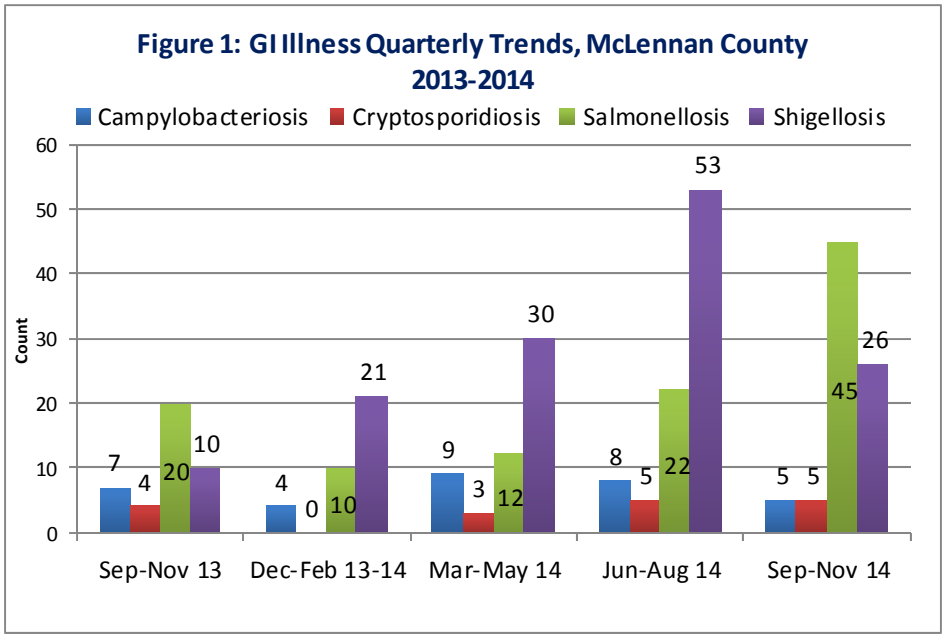


Figure 1: GI Illness Quarterly Trends, McLennan County 2013-2014

The Waco-McLennan County Public Health District monitors the State Notifiable Conditions on a 24/7 basis. This helps us in early identification and control of outbreaks.

The list of reportable conditions and disease reporting form are available on WMCPHD website link:

www.wacomclennanphd.org

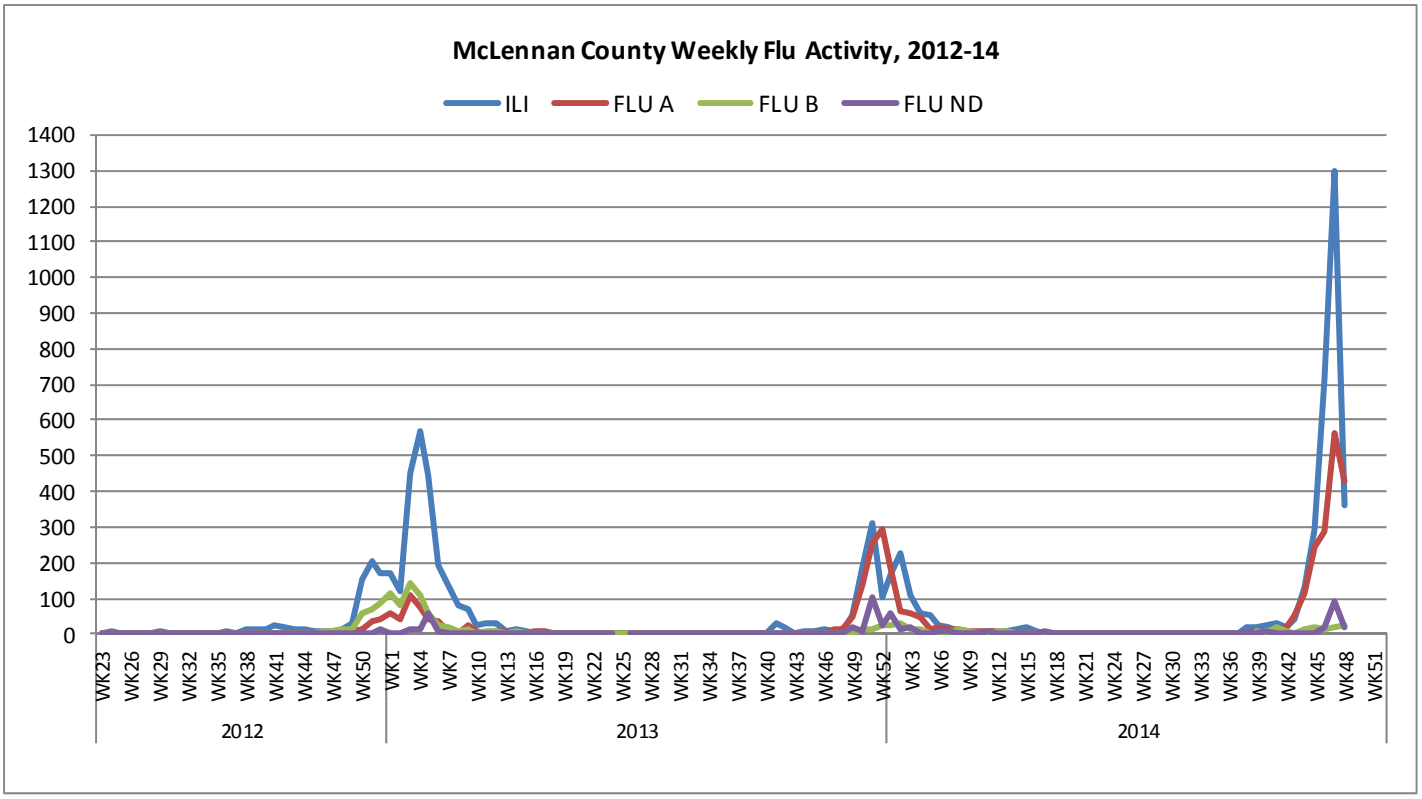
According to a CDC Health Advisory released on December 3rd, the influenza activity is currently low in the United States as a whole, but is increasing in some parts of the country. This season, influenza A (H3N2) viruses have been reported most frequently and have been detected in almost all states. Influenza viral characterization data indicates that 48% of the influenza A (H3N2) viruses collected and analyzed in the United States from October 1 through November 22, 2014 were antigenically "like" the 2014-2015 influenza A (H3N2) vaccine component, but that 52% were antigenically different (drifted) from the H3N2 vaccine virus. In past seasons during which predominant circulating influenza viruses have been antigenically drifted, decreased vaccine effectiveness has been observed. However, vaccination has been found to provide some protection against drifted viruses. Though reduced, this cross-protection might reduce the likelihood of severe outcomes such as hospitalization and death. In addition, vaccination will offer protection against circulating influenza strains that have not undergone significant antigenic drift from the vaccine viruses (such as influenza A (H1N1) and B viruses). Because of the detection of these drifted influenza A (H3N2) viruses, this CDC Health Advisory is being issued to re-emphasize the importance of the use of neuraminidase inhibitor antiviral medications when indicated for treatment and prevention of influenza, as an adjunct to vaccination. The two prescription antiviral medications recommended for treatment or prevention of influenza are oseltamivir (Tamiflu®) and zanamivir (Relenza®).

Texas MMWR Week 48 (November 23, 2014 – November 29, 2014): Influenza activity continues to increase across Texas. According to Texas influenza laboratory data, the percentage of specimens positive for influenza increased compared to last week. ILI activity increased compared to last week and is above the 2014-2015 state ILINet baseline of 5.42%.

Table 2: Influenza Testing Performed by Texas Laboratories for the Current Week

	Week 48
Number of labs reporting flu tests	19
Number of specimens tested	4004
Number of positive specimens (%)†	1225 (30.59%)
Percentage of total tests that were antigen detection tests	73.68%
Positive specimens by type/subtype [n (%)]	
Influenza A	**1116 (91.10%)**
Subtyping performed	246 (22.04%)
A (H1N1)	1 (0.41%)
A (H3N2)	245 (99.59%)
Subtyping not performed	870 (77.96%)
Influenza B	**109 (8.90%)**

(table source http://www.dshs.state.tx.us/idcu/disease/influenza/surveillance/2015/)



Influenza-like illness activity (ILI): ILI is defined as fever over 100F and cough and/or sore throat in the absence of another diagnosis.

Cold Weather Safety

When winter temperatures drop significantly below normal, staying warm and safe can become a challenge. Extremely cold temperatures often accompany a winter storm so you may have to cope with power failures and icy roads. Although staying indoors as much as possible can help reduce the risk of car crashes and falls on the ice, you may also face indoor hazards. Many homes will be too cold—either due to a power failure or because the heating system isn't adequate for the weather.

When people must use space heaters and fireplaces to stay warm, the risk of household fires increases, as well as the risk of carbon monoxide poisoning. Exposure to cold temperatures, whether indoors or outside, can cause other serious or life-threatening health problems. Infants and the elderly are particularly at risk, but anyone can be affected. To keep yourself and your family safe, you should know how to prevent cold-related health problems and what to do if a cold-weather health emergency arises.

Prepare for extremely cold weather every winter—it's always a possibility.

Heat your home safely. Keep space heaters away from things that can catch fire, such as drapes, furniture or bedding, and do not place them on furniture. Never leave children unattended around space heaters and avoid running cords where they may be tripping hazards.

Do not use charcoal or gas grills or generators indoors. Fumes can be deadly.

Conserve heat by closing doors to rooms that are not being used. Roll towels and place under doors. Cover windows with drapes or blankets.

Protect your pipes. Leave a slow drip and open cabinets with pipes.

Recognizing Hypothermia

Adults:
- shivering, exhaustion
- confusion, fumbling hands
- memory loss, slurred speech
- drowsiness

Infants:
- bright red, cold skin
- very low energy

If a person's temperature gets below 95° seek medical attention immediately.

Plan Ahead

Keep several days' supply of these items:

- Food that needs no cooking or refrigeration, such as bread, crackers, cereal, canned foods, and dried fruits. Remember baby food and formula if you have young children.
- Water stored in clean containers, or purchased bottled water (5 gallons per person) in case your water pipes freeze and rupture.
- Medicines that any family member may need.

If your area is prone to long periods of cold temperatures, or if your home is isolated, stock additional amounts of food, water, and medicine.

Emergency Supplies List:

- an alternate way to heat your home during a power failure:
  - dry firewood for a fireplace or wood stove, or
  - kerosene for a kerosene heater
- furnace fuel (coal, propane, or oil)
- electric space heater with automatic shut-off switch and non-glowing elements
- blankets
- matches
- multipurpose, dry-chemical fire extinguisher
- first aid kit and instruction manual
- flashlight or battery-powered lantern
- battery-powered radio
- battery-powered clock or watch
- extra batteries
- non-electric can opener
- snow shovel
- rock salt
- special needs items (diapers, hearing aid batteries, medications, etc.)

Prepare Your Home for Winter

Although periods of extreme cold cannot always be predicted far in advance, weather forecasts can sometimes provide you with several days' notice. Listen to weather forecasts regularly and check your emergency supplies whenever a period of extreme cold is predicted.

If you plan to use a fireplace or wood stove for emergency heating, have your chimney or flue inspected each year. Also, if you'll be using a fireplace, wood stove, or kerosene heater, install a smoke detector and a battery-operated carbon monoxide detector near the area to be heated. Test them monthly, and replace batteries twice yearly.

Your ability to feel a change in temperature decreases with age, and older people are more susceptible to health problems caused by cold. If you are over 65 years old, place an easy-to-read thermometer in an indoor location where you will see it frequently, and check the temperature of your home often during the winter months.

Insulate any water lines that run along exterior walls so your water supply will be less likely to freeze. To the extent possible, weatherproof your home by adding weatherstripping, insulation, insulated doors and storm windows, or thermal-pane windows.

If you have pets, bring them indoors. If you cannot bring them inside, provide adequate shelter to keep them warm.

Source: "Extreme Cold: A Prevention Guide to Promote Your Health and Safety" http://www.bt.cdc.gov/disasters/winter/pdf/extreme-cold-guide.pdf

PERINATAL HEPATITIS B PREVENTION PROGRAM
WACO-MCLENNAN COUNTY PUBLIC HEALTH DISTRICT

Texas law requires all pregnant women be screened for Hepatitis B at the first prenatal visit and at the time of delivery for each pregnancy (Texas Administrative Code Title 25, Part 1 Chapter 97, subchapter F, §97.135)

Role of Health Care Providers:

- Mandatory reporting of all positive HBsAg mothers to WMCPHD (according to Texas Administrative Code Title 25, Part 1 Chapter 97, subchapter A, §97.3)
- Screen all pregnant women for HBsAg at the first prenatal visit and at delivery
- Report all HBsAg-positive women to the Waco McLennan County Health District (WMCPHD) P: 254-750-5493 or 254-750-5775 F: 254-750-5405
- **Administering Hepatitis B Vaccine (HBV) 1st dose and Hepatitis B Immunoglobulin to the infants born to HBsAg-positive women within 12 hours of birth**
- **Administering Hepatitis B Vaccine 1st dose and Hepatitis B Immunoglobulin to the infants born to women whose HBsAg status is UNKNOWN**
- Not counting 1st dose of Hepatitis B vaccine if baby's weight is <2000 grams in above two highlighted scenarios and administering four doses of HBV: at Birth, 1 month, 2 months and 6 months of age

The Waco-McLennan County Public Health District offers the following free and confidential services to pregnant women who are diagnosed with Hepatitis B infection:

- Testing of all household and sexual contacts
- Hepatitis B vaccination for all contacts who test negative for Hepatitis B virus
- Case management services for the mother and infant for up to the first 2 years of life
- Education for the pregnant woman and her family on Hepatitis B
- Hepatitis B vaccination and serology testing of the infant at 12-15 months if the client chooses not to use a private provider.

Training for Providers:

We also offer training for Physicians, Nurses or other staff on Perinatal Hepatitis B. Please feel free to contact Hammad Akram at 254-750-5493 or Email: hammada@ci.waco.tx.us if you have any questions.

DISEASE REPORTING

The Waco-McLennan County Public Health District has a 24-hour a day/ 7 days a week number that can be utilized to report any cases of disease.

The 24/7 disease reporting number is (254) 750-5411

On a daily basis the epidemiology department reviews, investigates, and reports all cases of communicable disease recognized as Notifiable Diseases in Texas. This allows for monitoring of disease trends and detection of outbreaks. Reporting may also be done directly to Epidemiology at (254) 750-5493 or fax reports to (254) 750-5405.