

The Update: Huron County

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Prevention

Preventing the Spread of Influenza

Most people with influenza will be able to remain at home while they are sick. They can care for themselves or be cared for by others who live in the household. This information is intended to help people recognize the symptoms of influenza and care for ill people in the home during a typical influenza season.

Know the symptoms of influenza, which may include:

Sudden onset of illness, chills, headache, stuffy nose, feeling of weakness, fever higher than 100.4 degrees Fahrenheit, cough, sore throat, and muscle aches. In children, symptoms may include diarrhea, vomiting, stomach pain and/or feeling really tired.

Prevent the spread of illness in the home

Influenza viruses are spread from person to person primarily through sneezing and coughing. The virus may also be spread through contact with germs on the hands of a sick person or by touching objects or surfaces that have been touched by a sick person. For this reason, it is important to take steps to prevent the spread of influenza to others.

Seasonal influenza vaccine

It's a good idea to get a seasonal influenza vaccine (a shot or nasal mist) to give some protection to an influenza outbreak in the community. For more information on seasonal flu vaccine, please call 1-800-232-4636, go to the Michigan Department of Community Health (MDCH) Seasonal Influenza Page (www.michigan.gov/flu), or call the Huron County Health Department at 989-269-9721.

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A monthly newsletter providing local health department reports and information about communicable diseases and community health issues. Our resources include publications by the Centers for Disease Control and Prevention (CDC), such as the Morbidity and Mortality Weekly Report (MMWR);

the Michigan Department of Community Health (MDCH) and other sources. If you would like more information, or have questions about the above topics or other public health issues, please contact Peggy Miller at 989-269-9721, ext 141.

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Our Mission Statement

“We are dedicated to promoting and protecting the health of individuals and families in our service jurisdiction by providing a wide range of quality health and human services”

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What caregivers can do

Caregivers need to physically separate those who are ill with influenza from other people as much as possible. When practical, the ill person should stay in a separate room away from other people. Other people living in the home should limit contact with the ill person as much as possible. One person in the household should be the main caregiver for the ill person. Ideally, this caregiver should be healthy, be capable to take personal precautions, and not have medical conditions that would put him or her at risk of severe influenza disease.

Medical conditions considered “high risk” include the following:

Pregnancy, heart problems, disease or treatment that suppresses the immune system, chronic lung diseases, diabetes, kidney disease, over the age of 65.

What everyone in the household can do:

- Wash hands with soap and water. If soap and water is not available, use an alcohol-based cleaner/hand sanitizer (like Purell or a store-brand) after each contact with a person with influenza or with objects in the area where the person is located. WASHING YOUR HANDS IS THE SINGLE BEST PREVENTITIVE MEASURE FOR EVERYONE IN THE HOUSEHOLD.
- Do not touch your eyes, nose, or mouth without first washing your hands for 20 seconds (sing Happy Birthday twice). Wash hands before and after using the bathroom.
- Wash dirty dishes either in a dishwasher or by hand with warm water and soap. It's not necessary to separate eating utensils used by a person with influenza.
- It's not necessary to separate soiled linen and laundry used by a person with influenza from other household laundry. Laundry can be washed in a standard washing machine with warm or cold water and detergent. Do not hold or carry the laundry close to your body or face, in order to avoid contamination. Wash hands with soap and water after handling soiled laundry.
- Place tissues used by the ill person in a bag and throw it away with other household trash. Consider placing a bag at the bedside of the ill person for this purpose. There is no requirement for special handling of this trash.
- Clean counters, surfaces and other areas in the home regularly using normal cleaning products.

Other household members with influenza:

If possible, contact your health care provider if you have questions about caring for the ill person. If there is widespread illness in your community or region, it may be difficult to contact your usual healthcare provider. The Michigan Department of Community Health will provide frequent updates, including where to get medical advice. If special telephone hotlines are used, these numbers will be announced through the media.

Wearing surgical masks (with ties) or procedure masks (with ear loops) may be useful in decreasing spread of influenza when worn by the ill person and/or caregiver during close contact (within 6 feet).

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If masks are recommended by the Michigan Department of Community Health (MDCH) or the Centers of Disease Control and Prevention (CDC), they must be worn at all time when in close contact with the ill person to be effective. Wearing gloves and gowns are not recommended for household members providing care in the home.

Prevent the Spread of Illness in the Community

Stay at home if you are sick. Ill persons should not leave the home until they have recovered, because they can spread the infection to others. You and your loved ones may want to use the Internet as a primary resource. The internet can serve as a link to outside resources such as: up-to-date information on influenza, medical and social services, and access to food delivery services. The internet will help reduce the spread of influenza by allowing ill persons to stay home. If the ill person must leave home (such as for medical care), he or she should wear a surgical or procedure mask, if recommended, and do the following:

Seasonal Influenza

Cover mouth and nose when coughing and sneezing, using tissues or the crook of the elbow instead of hands.

Use tissue to contain mucous and watery discharge from the mouth and nose.

Dispose of tissues in the nearest waste bin after use or carry a small plastic bag (like a Zip-loc bag) for used tissues.

Wash hands with soap and water or use a alcohol-based hand cleaner after covering your mouth for a cough or sneeze, after wiping or blowing your nose, and after handling contaminated objects and materials including tissues.



Source: MDCH, OPHP
March 2009



School Reports */**/+

Disease	Jul/Aug/Sept 2010
Head Lice	0
Strep Throat	1



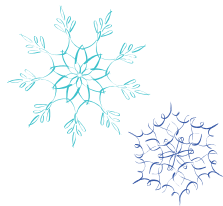
*All schools may not have reported

**Diagnosis is not always made by a health care professional

+ Influenza reports will now be found on the quarterly summary reports because MDCH also enters influenza reports that may not be from school-aged children

Source: Huron County Schools Weekly Communicable Disease Reports/MDSS

COMMUNICABLE DISEASE REPORTING	July/Aug/Sept 2010
Rabies Investigations Received and Investigated	18
Rabies Number Receiving Rabies Prophylactic Treatment	1
Communicable Disease Reports Received and Investigated	22
TB Tests Given	68
TB Tests Reactors/Converters	1/0
TB Active Cases (newly diagnosed)	0
TB Receiving Treatment	1



Source: Agency Logs

IMMUNIZATION UPDATE	July/Aug/Sept 2010
Children ages Birth to 18 years How many vaccines were administered How many flu vaccines were administered	678 people received 1,754 vaccines
Adults 19 years and older How many vaccines were administered	92 people received 100 vaccines

Source: MCIR & Agency Logs



Winter



Mom. Dad. Have you been Vaccinated for Whooping Cough?

Pertussis, more commonly known as whooping cough, is a highly contagious bacterial disease that can be fatal for infants. When a source could be identified, about 75% of babies contract this disease from a household member, with around half of the cases coming from parents. Pertussis is often thought of being only a childhood disease, when in fact, adults and adolescents are capable of contracting and spreading this serious disease. When you get vaccinated, you're doing more than protecting your health, you're helping to protect the health of your child.

What is **PERTUSSIS**? Pertussis is a contagious disease that creates sticky, thick, mucus in the airways that makes it hard to breathe, eat, and drink. Infants with serious pertussis can have trouble breathing and turn blue. Pertussis is also known as whooping cough because people with the disease often make a loud "whoop" sound as they struggle to breathe through their narrowed airways between coughing spasms. It can present sometimes as a mild cough which is often undiagnosed as a common cold or bronchitis. Adults and adolescents can spread pertussis to others, including babies, even if they only have very mild symptoms.

STAGE 1

Usually lasts 1-2 weeks. When a person first contracts pertussis, symptoms can be very mild and may resemble a common cold or bronchitis. Most people do not even know they have pertussis and usually go undiagnosed. These mild symptoms may include:

- sneezing
- runny nose
- low-grade fever
- mild, occasional coughing

STAGE 2

Usually lasts 1-6 weeks. After 1-2 weeks, some people develop a more serious version of pertussis, which can cause severe coughing episodes and even hospitalization. Severe coughing episodes can cause:

- vomiting
- cracked ribs
- a hernia

STAGE 3

Usually lasts 2-3 weeks. In this stage, coughing spasms gradually decrease in intensity and usually disappear after 2-3 weeks.

Startling statistics:

- in 2004-2005, 66 deaths from pertussis were reported.

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Quarterly Summary of Reportable Communicable Diseases in Huron County
July, August, September 2009 and
July, August, September 2010

DISEASE GROUP	DISEASE	Jul/Aug/Sept 2009	Jul/Aug/Sept 2010
FOODBORNE	Campylobacter	3	5
	Cryptosporidiosis	1	0
	E. coli 0157:H7	1	3
	E. coli, Shiga Toxin, non 0157:H7 or unspecified	0	3
	Salmonella	0	3
	Shigellosis	0	1
	VIRAL HEPATITIS	Hepatitis C, Chronic	5
MENINGITIS	Meningococcal Disease	0	1
	Streptococcus Pneumoniae, Invasive	0	1
OTHER	Creutzfeldt– Jakob Disease	1	0
	*Flu-like Disease	72	9
	Hemolytic Uremic Syndrome (HUS)	0	3
	Legionellosis	1	0
	SEXUALLY-TRANSMITTED INFECTION	Chlamydia (Genital)	11
	Syphilis, latent of unknown duration	0	1
VACCINE-PREVENTABLE DISEASE (VPD)	Pertussis	2	0
	Varicella (Chicken Pox)	0	3

*NOTE: The discrepancy in number of reported diseases may be due to changes in reporting procedures or the addition or reporting fields.



Source: MDSS & Agency Logs

(Startling statistics (continued from page 5))

- 90% of reported pertussis deaths are among babies under 4 months of age.
- 72% of babies under 6 mo. of age reported to have3 pertussis are hospitalized
- 1 in 10 children reported to have pertussis also have pneumonia
- 1 in 50 children reported to have pertussis will have seizures or convulsions
- Pertussis affects the brain in 1 out of 250 reported cases.

source: pamphlet on pertussis from March of Dimes and Sanofi Pasteur, 04/09

Are you prepared?

An emergency can happen at any time, be it weather, pandemics, or terrorist attacks. The Emergency Preparedness program at the Huron County Health Department develops protocol, coordinates trainings and collaborates with community, regional, and state stakeholders to prepare for and protect the public in a disaster or emergency situation.

However, the more prepared each individual, household, or business is the better they will be able to help neighbors, first responders and the community during a disaster. Preparing for an emergency can be overwhelming. Disaster plans need to be developed, emergency kits made, food and water stored. We all want to be better prepared for emergencies and disasters, but emergency preparedness can be overwhelming.

www.do1thing.us is a program to make emergency preparedness easier by helping people take small steps toward being prepared for a disaster. Breaking emergency preparedness into monthly topics makes it easier to get started and stay committed. Check out **www.do1thing.us** and get started!

Source: www.do1thing.com, 2010



Cholera Epidemic in Haiti

Epidemic cholera appeared in Haiti in October 2010. Epidemic-associated *Vibrio cholerae* infections may occur in the United States as a result of persons traveling to affected areas. The risk of cholera to the American traveler in areas with endemic and epidemic disease has been extremely low. Nevertheless, careful attention to food and water sources is the most important preventive measure. This includes not drinking unboiled or untreated water, and not eating uncooked vegetables, food and beverages from street vendors, and raw fish and shellfish. More detailed advice is at www.cdc.gov/cholera/general.

For Primary Care Providers: Cholera should be considered in any patient, especially an older child or adult, presenting with severe watery diarrhea and vomiting with severe dehydration. The illness is often accompanied by marked leg cramps because of electrolyte disturbances. Clinical suspicion should be increased, and milder diarrheal illnesses more suspect, in persons returning from areas known to have epidemic cholera, or in persons with a recent history of ingestion of raw or undercooked shellfish. More detailed guidelines including antibiotic treatment are posted on CDC's website at: <http://www.cdc.gov/haiticholera/clinicalmanagement>.

Source: Notice from the Director, National Center for Emerging and Zoonotic Infectious Disease; November 16th, 2010

