

# COMMUNICABLE DISEASE NEWSLETTER

September 2019 • Issue 3

NEWSLETTER FOR HEALTH PARTNERS IN CONTRA COSTA COUNTY, CALIFORNIA

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## Disease Reporting

- [List of Reportable Diseases](#)
- [Confidential Morbidity Reports](#)
- [List of Laboratory Reportable Diseases](#)

### Communicable Diseases

8am – 5pm, M-F  
Phone: (925) 313-6740  
Fax: (925) 313-6465

### Sexually Transmitted Diseases

8am – 5pm, M-F  
Phone: (925) 313-6750  
Fax: (925) 313-6758

### Public Health Laboratory

8am – 5pm, M-F  
Phone: (925) 370-5775  
Fax: (925) 370-5252

### After Hours Public Health

5pm – 8am, M-F and  
24hrs, Sat and Sun  
Call County Sheriff's Dispatch  
Phone: (925) 646-2441  
Ask for Health Officer On-Call

## To Our Health Partners in the Community

Please visit <https://cchealth.org/providers/> to subscribe to our electronic version of this newsletter and view local health alerts and advisories. Please contact us at [CoCoCD@cchealth.org](mailto:CoCoCD@cchealth.org) with suggested newsletter topics and comments. For urgent questions or to report a communicable disease, please call us at (925) 313-6740.

## International Travel Planning

The Holidays are a popular time for extended international travel to visit friends and family. Measles, typhoid fever, and vector-borne diseases are some of the conditions we see in Contra Costa County residents returning from abroad. For more information, check the CDC Travelers' Health webpage for country travel advisories and disease specific health recommendations: <https://wwwnc.cdc.gov/travel>

### Measles

Make sure your patients who are traveling internationally are protected from measles. There are measles outbreaks occurring in many areas of the world, including the US, Europe, Asia and Africa. The CDC recommends that all international travelers be protected against measles. Before traveling internationally,

- **Infants (6-11 months):** one doses of measles-mumps-rubella (MMR) vaccine.
- **Children (1 year or older):** 2 doses MMR vaccine. The doses can be given outside routine schedule and as close as 28 days apart.
- **Adults:** documentation of 2 doses of measles-containing vaccine or evidence of immunity.

For more information: <https://www.cdc.gov/measles/hcp/index.html>

### Typhoid Fever

Typhoid fever is common worldwide except in industrialized regions such as the US, Canada, western Europe, Australia, and Japan. US travelers to typhoid-endemic regions should receive pre-travel vaccination at least 1-2 weeks before traveling. US travelers to typhoid-endemic regions should also be advised regarding safe food and water practices while abroad.

### Other Routine Vaccinations

Travelers may also need routine (non-travel) vaccines or boosters before travel including: influenza, tetanus (Td or Tdap), varicella, pneumococcus, and polio.

### Malaria

It is important to discuss malaria prophylaxis with **ALL** travelers who are going to areas with malaria transmission, regardless of previous travel or habitation in that area. All travelers going to malaria-endemic countries, which include parts of Africa, Latin America, the Caribbean, Asia, the Middle East, Eastern Europe, and the South Pacific are at risk for contracting the disease. Almost all the approximately 1,700 cases of malaria per year in the United States are imported cases of disease.

### General Mosquito-Borne Disease Precautions

To decrease risk of all mosquito-borne diseases (e.g. chikungunya, dengue, yellow fever, zika, etc.) advise patients to prevent mosquito bites by using insect repellents, wearing long-sleeve shirts and pants, and sleeping under a mosquito bed net if sleeping outside or in a room that does not have screens or air conditioning.

## Immunization Updates

### School Entry Immunizations

Students entering childcare, preschool, transitional kindergarten and grades K-12 will need proof of vaccination for admission per California law.

Parents must show their child's Immunization Record as proof of immunization.

For more information on requirements by age/grade level, visit:  
<https://www.shotsforschool.org/>

### Required Immunizations for School Admissions: Guidance Changes as of July 1, 2019:

- **NEW!**  
**Varicella**  
(Chickenpox)  
2 doses are now required for 7<sup>th</sup> grade



## Influenza 2019-2020 Season Updates

Routine annual influenza vaccination is recommended for **all persons aged 6 months and above** who do not have contraindications to vaccination. Optimally, vaccination should occur before the onset of influenza activity in the community. Health care providers should offer vaccination by the end of October, if possible. Vaccination should continue through the spring.

### Influenza Vaccine Formulation for 2019-20:

- A/Brisbane/02/2018 (H1N1)pdm09-like virus\*
- A/Kansas/14/2017 (H3N2)-like virus\*
- B/Colorado/06/2017-like virus (Victoria lineage)
- B/Phuket/3073/2013-like virus (quadrivalent formulations only)

\*new for this year

### Vaccination Recommendations

**Children Aged 6 Months Through 8 Years\*\*:** For optimum protection the Advisory Committee on Immunization Practices (ACIP) recommends that children aged 6 months through 8 years who have **not** previously received  $\geq 2$  doses of trivalent or quadrivalent influenza vaccine before July 1, 2019 (these doses do not need to be administered in consecutive seasons) receive 2 doses for the 2019-20 season. The interval between the 2 doses should be at least 4 weeks.

**Pregnant Women\*\*:** Pregnant and postpartum women are at higher risk for severe illness and complications from influenza, particularly during the second and third trimesters. ACIP and the American College of Obstetricians and Gynecologists recommend that all women who are pregnant or who might be pregnant during the influenza season receive influenza vaccine. Any licensed, recommended, and age-appropriate preservative-free flu vaccine may be used. Intranasal flu vaccine (FluMist) should not be used during pregnancy. Influenza vaccine can be administered at any time during pregnancy.

\*\*Per [California law](#), pregnant women and children under 3 years of age may only receive preservative-free vaccine.

**Older Adults:** Because of the vulnerability of this population to severe influenza illness, hospitalization, and death, influenza vaccination among older adults is recommended. High dose and adjuvanted flu vaccine have better effectiveness in this population, however there is no formal preference for any vaccine product by the ACIP. For persons aged  $\geq 65$  years, any age-appropriate influenza formulation (standard-dose or high-dose, trivalent or quadrivalent, unadjuvanted or adjuvanted) or recombinant inactivated influenza vaccine are acceptable options. Vaccination should not be delayed if a specific product is not readily available.

For more information, see the recent report 'Prevention and Control of Seasonal Influenza with Vaccines' (CDC MMWR, August 23, 2019)

[https://www.cdc.gov/mmwr/volumes/68/rr/rr6803a1.htm?s\\_cid=rr6803a1\\_w](https://www.cdc.gov/mmwr/volumes/68/rr/rr6803a1.htm?s_cid=rr6803a1_w)

### Prevention & Control Activities

#### Outbreak Detection and Reporting

**Report** to Public Health (per Title 17, California Code of Regulations (CCR) §2500 & 2505)

1. **Laboratory-Confirmed** influenza-related pediatric deaths (ages 0-17 years)
2. **Acute Respiratory Outbreaks** in **both** healthcare **and** congregate living settings, such as residential living facilities (retirement community, assisted living, board & care, skilled nursing facilities, rehabilitation centers, homeless and evacuation shelters, camps, jails, etc.)

#### An outbreak is defined as:

- One lab-confirmed influenza case in a healthcare or congregate living setting.
- 2 or more cases of new onset respiratory illness within 72 hours (3 days) in a healthcare or congregate living settings.
- Any influenza illness associated with animal exposure (pigs, poultry, and other animals that can be infected with variant influenza viruses).

## Botulism

### Reporting, Antitoxin Release, Lab Testing & Public Health Investigation

Botulism is a neuroparalytic illness caused by *Clostridium botulinum* neurotoxins. Early symptoms may include double/blurred vision, drooping eyelids, slurred speech, difficulty swallowing, dry mouth, and muscle weakness. Neurologic symptoms generally begin 12 to 36 hours after ingestion of toxin and can progress to a symmetric, descending flaccid paralysis that begins in the cranial nerves.

Untreated, botulism can progress to respiratory paralysis and death. If administered early in the course of illness, botulism antitoxin can stop the progression of, but cannot reverse, paralysis. Antitoxin is available exclusively from public health authorities.

### How to Obtain Antitoxin

As soon as botulism is suspected, call the Public Health Communicable Disease (CD) to start the process of obtaining antitoxin. CD staff can be reached at 925-313-6740 or, after-hours (M-F 5pm to 8am and 24hrs Sat. & Sun.), call County Sheriff's dispatch at 925-646-2441 and ask for the Health Officer on-call.

If infant botulism is suspected, contact the California Infant Botulism Program directly to obtain infant antitoxin (BabyBIG) <http://www.infantbotulism.org/physician/obtain.php>

Serum samples along with stool specimens should be collected prior to antitoxin administration for botulism testing, but do not wait for the results of testing before administering antitoxin. Patients should be given antitoxin as soon as it is available. Laboratory info: [www.cdph.ca.gov/Programs/CID/DCDC/Pages/TestOrderAdultBot.aspx](http://www.cdph.ca.gov/Programs/CID/DCDC/Pages/TestOrderAdultBot.aspx)

### Three Main Types of Botulism

- **Foodborne botulism** – acquired by eating food contaminated with botulinum toxin. Common food sources include: home-canned, preserved or fermented foods. Commercial foods that are improperly prepared or stored can also be a source of toxin.
- **Wound botulism** – wounds can become infected with *C. botulinum* bacteria. Persons who inject drugs are at increased risk of becoming infected with wound botulism.
- **Infant botulism** – spores get into intestines where they grow and produce toxin and subsequent illness.

### Timely Public Health Investigation

Although foodborne botulism remains a rare occurrence in California, each case represents a medical and public health emergency. The CD Programs conduct a thorough investigation of every botulism case to determine the source. If foodborne botulism is suspected, the CD Programs work with the Contra Costa Environmental Health Program to identify the food item and remove it from distribution as quickly as possible.

## Rabies


### Timely Reporting to Animal Services & Administration of Postexposure Prophylaxis

Rabies virus is transmitted when a rabid animal bites a human or another mammal and virus-laden saliva enters the wound, incubating in the muscle tissue before making its way through the nervous system to the brain. Although rabies is almost always fatal, rabies postexposure prophylaxis (PEP) is extremely effective at preventing disease. Rabies PEP consists of infusing rabies immunoglobulin directly around the wound and administering the rabies vaccine series.

In California, rabies can be found in certain wildlife species and has the potential to spread to pets, farm animals, and people. Bats are most commonly found to be infected with rabies, but rabies has also been detected in other wild animals such as skunks and foxes. Rabies is rarely identified in domestic animals such as dogs and cats due to routine vaccination, but unvaccinated domestic animals who have had contact with wildlife can become infected.

### Postexposure Prophylaxis (PEP): Urgency of RIG and Rabies Vaccine Administration

Rabies PEP, administered after a possible exposure, is highly effective at preventing the progression to rabies disease. However, once an infected person develops symptoms of rabies there is no effective treatment and the infected person will likely die within a few days.

**RABIES**   
Postexposure Prophylaxis (PEP)  
From the 2010 recommendations of the Advisory Committee on Immunization Practices (ACIP)

**What is rabies PEP?**  
Rabies PEP includes:  
• Wound cleaning  
• Rabies immune globulin (RIG)  
• A series of rabies vaccinations\* For persons who have not previously been vaccinated against rabies  
\*For persons who have NOT previously been vaccinated against rabies

**When is it indicated?**  
PEP should be given to anyone with suspected exposure to the rabies virus. Exposure usually occurs via bites from wildlife such as bats and skunks, but dogs, cats, and other mammals can also transmit the virus. Call Contra Costa Public Health at 925-313-6740 if you would like help in assessing exposure risk.

**How should rabies PEP biologics be administered?**

Not previously vaccinated	RIG (20 IU/kg) Vaccine (1 mL)	Infiltrate wounds with full dose, if possible. Inject remaining volume IM in a site distant from vaccine. Inject IM in deltoid on days 0, 3, 7, and 14.
Previously vaccinated	RIG (20 IU/kg) Vaccine (1 mL)	Do not administer. Inject IM in deltoid on days 0 and 3.

**Important Dos and Don'ts!**

Do	Don't
<input checked="" type="checkbox"/> Infiltrate all wounds with RIG, unless patient was previously vaccinated.	<input checked="" type="checkbox"/> Inject any rabies biologic in the gluteus unless the record is located there.
<input checked="" type="checkbox"/> Put as much of the RIG as anatomically feasible at the site of the wound(s).	<input checked="" type="checkbox"/> Give RIG to a previous recipient of PEP or pre-exposure vaccination.
<input checked="" type="checkbox"/> Inject vaccine in deltoid (or thigh in children).	<input checked="" type="checkbox"/> Inject RIG and vaccine at the same site, in the same limb or using the same syringe.
<input checked="" type="checkbox"/> Report PEP to Contra Costa Animal Services at 925-313-6740.	<input checked="" type="checkbox"/> Give more than the recommended dose of RIG.
<input checked="" type="checkbox"/> Call Contra Costa Public Health at 925-313-6740 with questions about rabies PEP questions.	

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Download a copy of this poster:

<https://cchealth.org/rabies/pdf/bites-from-wildlife.pdf>

### Bite Report: Initiation of Animal Services Investigation & Quarantine of Implicated Animal

Submit a 'Bite Report' form to Contra Costa Animal Services. The form can be found at:

<https://cchealth.org/rabies/pdf/bite-report.pdf>

More resources at [cchealth.org/providers/](https://cchealth.org/providers/)



[Contra Costa Health Services](https://www.contracostacounty.org/health-services)



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