EPI Update for Friday, December 11, 2009 Center for Acute Disease Epidemiology (CADE) lowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- H1N1 vaccine available to the general public beginning Dec. 14, 2009
- H1N1 quick points for health care providers
- National 2009 H1N1 phone survey
- CDC update on erythromycin ophthalmic ointment
- Carbon monoxide exposure during winter weather
- Shovel snow safely
- Meeting announcements and training opportunities

H1N1 vaccine available to the general public beginning Dec. 14, 2009

Beginning Monday, December 14, 2009, all lowans will be eligible to receive an H1N1 flu vaccination. While H1N1 vaccinations will now be available to all lowans, IDPH continues to encourage those at highest risk of complications to make sure they are vaccinated.

Public health officials predict that another wave of H1N1 illness will occur during the usual time lowa sees the highest rates of influenza activity – late January and February. Thus being immunized as soon as possible will give Iowans protection against this possible third wave of illness.

For a list of public H1N1 vaccination sites and clinic times, visit www.idph.state.ia.us/webmap/default.asp?map=h1n1_vaccine_sites.

H1N1 quick points for health care providers

 As was noted last week, VAERS received 3,783 reports of adverse events after receipt of H1N1 vaccine, of which 204 were categorized as serious and 4,672 reports after receipt of seasonal influenza vaccines, of which 283 were serious. During October 5 through November 20, a total of 46.2 million doses of H1N1 vaccines (11.3 million LAIV and 34.9 million flu shots) and 98.9 million doses of seasonal influenza vaccines were distributed. The overall VAERS adverse event reporting rates were 82 per 1 million H1N1 vaccine doses distributed and 47 per 1 million seasonal influenza vaccine doses distributed. Serious adverse event reporting rates were 4.4 and 2.9 serious adverse events per 1 million doses respectively. The percentage of serious adverse events after receipt of seasonal influenza vaccines was slightly higher (6.1 percent), compared with the percentage of serious adverse events after receipt of H1N1 vaccines (5.4 percent), and this finding was consistent for inactivated (5.8 percent versus 5.5 percent) and live attenuated (7.3 percent versus 4.7 percent) vaccines. See

 $\underline{www.cdc.gov/mmwr/preview/mmwrhtml/mm58e1204a1.htm?s_cid=mm58e1204}\\ \underline{a1_e}\ .$

 CDC has released Updated Interim Recommendations for the Use of Antiviral Medications in the Treatment and Prevention of Influenza for the 2009-2010 Season. See www.cdc.gov/H1N1flu/recommendations.htm

National 2009 H1N1 survey

The IDPH Immunization Program has received calls concerning receipt of telephone calls on the "National 2009 H1N1 Flu Survey". This is a legitimate CDC survey, as opposed to a recently circulated fraudulent email (phishing scam) asking people to register their vaccination status.

The National 2009 H1N1 Flu Survey is a random-digit-dialing telephone survey of both landline and cell telephones across the Unites States. In addition to questions about H1N1 and seasonal flu vaccination status of adults and children, the survey also asks about flu-related behaviors, opinions about flu vaccine safety and effectiveness, recent respiratory illness, and pneumococcal vaccination status. See: www.cdc.gov/NIS/h1n1_introduction.htm.

CDC update on erythromycin ophthalmic ointment

Updated information is available describing the current status of erythromycin ophthalmic ointment primarily used for prevention of ophthalmia neonatorum. See www.cdc.gov/std/treatment/2006/erythromycinOintmentShortage.htm.

Snow shoveling safely

lowans need to remember to be careful as they clear driveways and sidewalks of snow. While show shoveling can be a good workout, it can increase the risk of a heart attack in individuals who had a previous heart attack, people with a history of heart disease, those with high blood pressure, smokers, and people who don't exercise on a regular basis. There are tips to follow for safe shoveling:

- Use a smaller shovel
- Use light weight plastic shovels rather than metal shovels
- Pick up smaller loads of snow. Shovel by sections.
- Take frequent breaks, even if only for a couple of minutes
- Stop and go inside if you become overheated or become too cold
- Drink plenty of fluids to stay hydrated
- Don't try to fling snow long distances
- Stop any time you feel pain

Warning signs that you should stop shoveling include shortness of breath, heavy sweating, or pain. For more information about winter weather safety, visit www.idph.state.ia.us/adper/winter_weather.asp.

Carbon monoxide exposure during winter weather

Carbon monoxide (CO) is an odorless, colorless, poisonous gas that can cause sudden illness and death. During severe winter storms, power outages may occur, and alternative sources of fuel may be used. Also, during cold weather, people may leave cars idling in attached garages to "warm up," which can cause CO poisoning to those within the home. Before idling a car to warm it up, back it out of the attached garage.

Symptoms and signs of carbon monoxide poisoning include headache, dizziness, weakness, nausea, vomiting, chest pain, and altered mental status. The Iowa Statewide Poison Control Center (800-222-1222) offers 24/7 consultation to the public and physicians on CO treatment.

Unintentional CO exposure accounts for about 15,000 emergency department visits and 500 unintentional deaths in the United States each year. See www.cdc.gov/mmwr/preview/mmwrhtml/mm5402a2.htm

Meeting announcements and training opportunitiesNone

Have a healthy and happy week! Stay warm! Center for Acute Disease Epidemiology lowa Department of Public Health 800-362-2736