

The Vaccinator

A NEWSLETTER OF THE VACCINE PREVENTABLE DISEASE PROGRAM
AT COLUMBUS PUBLIC HEALTH -- FOURTH QUARTER, 2014

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National Influenza Vaccination Week: December 7–13

Vaccine

This week highlights the importance of continuing flu vaccination through the holiday season and beyond.

Please remind your patients that it is not too late to get a flu shot.

Ebola Outbreak in West Africa and Local Response

The 2014 Ebola outbreak is the largest in history, affecting multiple countries in West Africa. The risk of an Ebola outbreak in the U.S. is very low and there are no cases or potential cases of Ebola in Ohio. CPH has partnered with local hospital systems, healthcare providers, and first responders to ensure all needed systems are in place to protect the public.

Local Public Health Role

Columbus Public Health is monitoring daily all travelers coming to Columbus from the affected countries of West Africa for 21 days. Currently this includes Guinea, Liberia, Sierra Leone, and most recently added Mali. More on this at www.publichealth.columbus.gov.

Role of Healthcare Providers

- Universal screening for Ebola is recommended for all patients to your practice. Screening guidelines for outpatient settings are available from Columbus Public Health and CDC.
- Providers should help educate their staff on the best ways of protecting themselves, their clients, and the public.
- · Providers should help educate their patients and help dispel misconceptions and fear.

Key Resources for Clinicians

- CDC disease information, guidance and diagnostic tools: www.cdc.gov/vhf/ebola/hcp
- Local advisories and information for providers: http://idrsinfo.org.
- Consultation for Columbus healthcare providers: (614) 645-1474
- Ohio Ebola Information Line (8 am 5 pm): 1-866-800-1404
- Columbus Public Health: www.publichealth.columbus.gov

2014-15 Season Flu Early Indicators

Columbus-area hospitals are already seeing serious cases of flu this season and early indicators show many are working-age adults. In Franklin County, at least 30 influenza associated hospitalizations have been reported this season as of November 8, more than double compared to this time last season. In the week ending on October 25, there were upticks in pediatric visits for flu-like illness and respiratory illness, and in over-the-counter sales of cold and cough remedies. Columbus Public Health looks at several factors to track flu, including laboratory-test results, emergency-department visits and medication sales. View weekly reports here: www.columbus.gov/influenza-surveillance.aspx

The Advisory Committee on Immunization Practices (ACIP) stresses that providers should not delay vaccination for patients if only trivalent formulation is available. Live-attenuated influenza vaccine (LAIV) should be considered for healthy children 2 to 8 years of age who have no contraindications or precautions to the intranasal vaccine. If LAIV is not readily available, inactivated influenza vaccine (IIV) should be used and vaccination should not be delayed in order to obtain LAIV.

Fluzone high dose vaccine produces higher antibody levels in persons > 65 years, however the ACIP expresses no preference for use of high dose or standard dose flu vaccine in adults >65 years. Again, vaccination should not be delayed if only trivalent formulation is available.

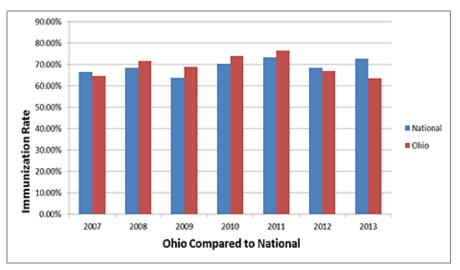
For more information please refer to the August 15, 2014 MMWR at http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6332a3.htm

Immunization Rates for Ohio Fall While Nation Rises

The National Immunization Survey (NIS) data is released annually by CDC. The 2013 NIS data was published in MMWR on August 29, 2014. According to the 2013 NIS data showing national, regional, and state vaccination coverage rates for children 19-35 months old, Ohio's rate is below the national rate and compared to previous years, the gap has been widening. More at http://www.cdc.gov/vaccines/imz-managers/coverage/imz-coverage.html.

What Are Your Rates?

Providers have the responsibility to do what they can within their practice to improve childhood immunization rates. A good place to start is by knowing what the immunization rate for your practice actually is. Columbus



Centers for Disease Control and Prevention, National Immunizations Survey, 2007

Public Health's Immunization Program, in partnership with ODH and AAP, offers two programs free of charge that will identify your rates, as well as provide education for your office staff on best practices for achieving high immunization rates. Please call our coordinator about these programs: Maximizing Office Based Immunizations (MOBI); and Assessment Feedback Incentive Exchange (AFIX) at (614) 645-1479 to schedule a time that is convenient for you.

Adult Vaccination Website Gets Facelift

Adult Immunization Coalition of Central Ohio (AICCO) is a collaborative effort of concerned partners committed to increasing adult immunization rates. AICCO's **Vaccine4Me.com** connects adults to vaccination information and resources, especially around flu season. The site was recently revised to update the look and make it easier to use. Please check it out and share this resources with your patients.

CDC Releases Updated Pediatric Multi-Vaccine VIS

"Your Baby's First Vaccines *What You Need to Know*" is a vaccine information sheet covering five different vaccinations. Recently released by CDC, it can make educating parents easier when getting multiple vaccinations and also save on your printing costs.

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CDC Urges Healthcare Professionals to Recommend Influenza and Tdap to Pregnant Patients

On October 9, CDC released a "Dear Colleague" letter that encourages influenza and Tdap vaccination of pregnant women. The CDC provides important recommendations for providers to achieve this goal. In summary, the key points are:

- Assess the immunization status of each patient.
- Recommend the indicated vaccines to each patient.
- Administer any necessary vaccines or, if you do not stock the vaccine, refer the patient to a provider or location that can.
- Document the vaccinations that your patient is given, ideally in your state or local immunization registry.

New ACIP Pneumococcal Vaccination Recommendations for Adults age 65 years and Older

Adults aged 65 or older are now recommended to get the pneumococcal conjugate vaccine (PCV13, Prevnar-13®) and then be vaccinated with the pneumococcal polysaccharide vaccine (PPSV23, Pneumovax®23) 6-12 months later. Both PCV13 and PPSV23 provide good protection against invasive forms of pneumococcal infection. Although PPSV23 protects against more serotypes than PCV13, studies do not consistently show effectiveness against non-bacteremic pneumonia. More information at http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6337a4.htm.



