



O R E G O N

QUARTERLY REPORT

Marion County Health Department
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**3rd Quarter
September 2006**

To report a communicable disease
(24 hours a day, 7 days a week)

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Vital Statistics Quarter Ending: Sept. 2006	3rd Quarter		Year to Date	
	2006	2005	2006	2005
BIRTHS				
TOTAL DELIVERIES	1514	1366	4298	3978
Delivery in Hospital	1507	1351	4271	3931
Teen Deliveries (10-17)	41	63	155	164
DEATHS				
TOTAL	580	595	1821	1866
Medical Investigation	58	61	163	149
Homicide	3	2	7	6
Suicide	11	9	29	25
Accident – MVA	7	4	16	17
Accident – Other	14	19	43	36
Natural / Undetermined / Pending	23	27	68	65
Non-Medical Investigation (all natural)	522	534	1658	1717
Infant Deaths	13	3	19	8
Fetal Deaths	4	10	12	18
COMMUNICABLE DISEASES				
E-Coli: 0157	3	5	7	7
Hepatitis A	0	1	3	1
Acute Hepatitis B	0	3	2	11
Chronic Hepatitis B	9	8	30	28
Meningococcus	1	2	3	2
Pertussis	0	39	5	123
Tuberculosis	3	6	8	15
SEXUALLY TRANSMITTED DISEASE				
PID (Pelvic inflammatory Disease)	0	1	2	1
Chlamydia	212	206	698	649
Gonorrhea	40	21	113	56
Syphilis	1	0	5	2
AIDS	7	5	9	9
HIV Positive	5	2	12	8

What's New with Flu?

Karen Landers MD MPH, Marion County Health Officer

Once again, we are approaching the time of year when influenza is expected to circulate among us. Here are some highlights of what's new for the coming 2006-2007 influenza season:

Vaccine Supply and Distribution

Although the influenza vaccine supply has been characterized by shortages and delays in distribution in recent past years, the U.S. is projected to have a record 100 million doses of vaccine this season (17 million more than in any previous season). Vaccine manufacturers expect to distribute 75 million doses of influenza vaccine by the end of October; however, as much as 50% of the supply in Oregon may not arrive until November and December. Providers are encouraged to continue influenza vaccination through December and January. If not yet vaccinated, persons can continue to receive influenza vaccine, even after flu activity has been documented in the community. Adults have peak antibody protection two weeks after vaccination. Oregon SafeNet and the Lung Association of Oregon have joined forces to post Oregon flu clinics on the Lung Association of Oregon web site at www.lungoregon.org. Other resources to locate available flu vaccine include SafeNet's toll free number, 1-800-723-3638, and www.getaflushot.com.

Recommendations for Use

The age range of children recommended to receive influenza vaccination has been expanded to 5 years for this year's flu season. Vaccinate all children 6-59 months of age for influenza. If receiving flu vaccine for the first time, children less than 9 years of age should receive two doses of vaccine separated by at least one month.

Continued

In the event of limited quantities of pediatric vaccine, children aged 6-23 months should be prioritized for influenza vaccination due to the increased risk of influenza-associated hospitalization in that age group.

All health care workers should be vaccinated against influenza annually. In 2005, only 44% of survey respondents who stated they worked in a health care facility in Oregon reported receiving an influenza vaccination in the past twelve months. Of this group, only 47% of persons with direct patient contact had received an influenza vaccination. Health care workers without risk factors for complications due to influenza and who are less than 50 years of age, are candidates to receive live attenuated influenza vaccine (LAIV). Advantages of LAIV include the potential to develop broad mucosal as well as systemic immunity, the ease and acceptability of the administration route (intranasal rather than intramuscular), and the opportunity to reserve available inactivated vaccine for high risk persons unable to receive LAIV. Only health care workers who will be in close contact with **severely immunocompromised** (e.g., patients with hemopoietic stem cell transplants) need to receive inactivated vaccine due a theoretical risk of viral transmission after vaccination with LAIV.

Antiviral Use

Due to documented widespread resistance, amantidine and rimantidine should **NOT** be used for treatment or prophylaxis of influenza this season. When flu vaccination is not an option, oseltamivir is approved for treatment or prophylaxis of influenza in persons aged one year and older. Zanamivir can be used for treatment of flu in persons seven years of age and older and for prophylaxis in persons 5 years of age and older.

Pandemic Flu – How Ready Are You?

The next flu pandemic **IS** coming, although it is impossible to predict when or where it will start. To gauge your progress at preparing for this significant public health event, ask these questions about your medical practice or facility:

Do **ALL** medical staff and employees have an individual/family emergency plan? Having such a plan is critical to maintaining the health care work force during a community health emergency, and is valuable for other natural and manmade disasters as well. A planning checklist is available at www.pandemicflu.gov.

Has your office or facility developed an infection control plan with guidelines for stockpiling needed supplies, protecting staff while at work, separating ill and well patients in waiting areas, or cohorting by scheduling patients with respiratory illnesses and patients with other medical issues to be seen at different times of the day?

Does your office or facility have a plan for communicating with patients in the event of staffing shortages or changes in care that may occur during an influenza pandemic (e.g., canceling routine health maintenance visits or elective surgery)? Posting general information on a website or having automated phone messages may assist in managing patient care during peaks of illness in the community.

Has your office or facility completed an assessment of your staff and patient needs for influenza vaccine in a pandemic based on the prioritization guidelines? Knowing the total amount of vaccine needed to cover staff and patients will facilitate distribution of influenza vaccine once it becomes available during a pandemic. Go to the Marion County Health Department website at <http://health.co.marion.or.us/ph/epid/For%20Clinicians.T.htm>. A three-part tool to assist in the assessment of needed influenza vaccine for medical offices and facilities can be found under pandemic influenza. Please complete the forms and fax back to Marion County Health Department at (503) 566-5020. The local health departments will likely have responsibility for distributing influenza vaccine during a pandemic.

A comprehensive planning checklist for medical offices and clinics to use in preparing for the next influenza pandemic is available at www.pandemicflu.gov.