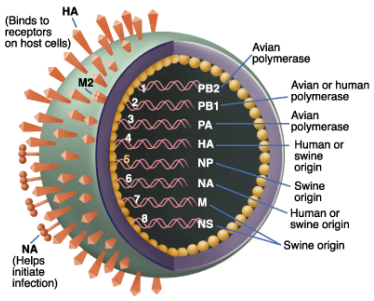
Connecticut Department of Public Health

IAP ON TIME

Volume 13.3 Summer 2009

Novel Influenza A (HINI)

Novel influenza A (H1N1) is a new flu virus of swine origin that first caused illness in Mexico and the United States in March and April, 2009. This virus was originally referred to as "swine flu" because laboratory testing showed that many of the genes in this new virus were very similar to influenza viruses that normally occur in pigs in North America. However, further study has shown that this new virus is very different from what normally circulates in North American pigs. It has two genes from flu viruses that normally circulate in pigs in Europe and Asia and avian genes and human genes. Scientists call this a "quadruple reassortant" virus. On June 11, 2009, the World Health Organization (WHO) raised the worldwide pandemic alert level to Phase 6 in response to the ongoing global spread of the novel influenza A (H1N1) virus. A Phase 6 designation indicates that a global pandemic is underway.



As of the middle of June, an unprecedented high level of late season influenza activity continued to be observed in Connecticut and through much of the region. This widespread level of activity has been documented by ongoing laboratory confirmation of the presence of the novel influenza A (H1N1) subtype. As of July 1st, there were 1244 confirmed cases reported among Connecticut residents. While most people who became ill with the virus in Connecticut experienced mild illness, there were 53 hospitalizations and 6 deaths. The age range of the confirmed cases in Connecticut is from <1–84 years (average age is 18 years).

It is thought that novel influenza A (H1N1) flu spreads in the same way that regular seasonal influenza viruses spread, mainly through the coughs and sneezes of people who are sick with the virus, but it may also be spread by touching infected objects and then touching your nose or mouth. Novel H1N1 infection has been reported to cause a wide range of flu-like symptoms, including fever, cough, sore throat, body aches, headache, chills and fatigue. In addition, many people also have reported nausea, vomiting and/or diarrhea.

Currently, it is not known how severe the virus will be to the general population as time moves on. Connecticut has several surveillance systems in place to continue to monitor the level and severity of activity of the virus as we move forward.

The Centers for Disease Control and Prevention (CDC) is working with vaccine manufacturers to produce a vaccine effective against this virus. Manufacturing an influenza vaccine is a multi-step process requiring several months to complete. At this time, it appears that the H1N1 vaccine will be manufactured and administered separately from the 2009-2010 seasonal influenza vaccine. The decision to manufacture H1N1 vaccine remains distinct from the decision to distribute and administer the vaccine, which will be made later in the summer based upon the

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Inside This Issue:

Connecticut Department of Public Health

410 Capitol Ave, MS#11MUN; Hartford, CT 06134-0308

www.ct.gov/dph/immunizations - (860) 509-7929

Commissioner J. Robert Galvin, MD, MPH, MBA

Immunization Update 2009

This live satellite program/webcast will provide up-to-date information on the rapidly changing field of immunization. Anticipated topics include influenza (including H1N1 influenza), rotavirus, vaccine safety and vaccine supply. So-called "alternative" vaccine schedules and other emerging vaccine issues will also be discussed. The 2.5-hour broadcast will occur live from 9:00 to 11:30 am and will be re-broadcast that day from 12:00 noon to 2:30 pm (Eastern Time). Both broadcasts will feature a live question-and-answer session in which participants nationwide can interact with the course instructors via toll-free telephone lines.

OBJECTIVES:
After this program, participants will be able to:

List two recent immunization recommendations made by the Advisory Committee on Immunization Practices.

Describe two emerging immunization issues.

Locate resources relevant to current immunization practice.

For pharmacists: Locate resources to assist with patient education in a pharmacy setting.

PRESENTERS:
Donna Weaver, RN, MN; Andrew Kroger, MD, MPH; Iyabode Akinsanya-Beysolow, MD, MPH, FAAP; & ***William Atkinson, MD, MPH;*** National Center for Immunization and Respiratory Diseases, CDC.

WHO SHOULD ATTEND:
Physicians, Nurses, Physician Assistants, Nurse Practitioners, Pharmacists, Medical and Nursing Students, Health Educators, Public Health Providers and Administrators, and their colleagues who either give immunizations or set policy for their offices, clinics, communicable disease, or infection control programs.

TO VIEW THE WEBCAST FROM YOUR PC:
To access the webcast, go to: http://www2a.cdc.gov/phtn/webcast/immupdate2009/default.asp A replay of this program will also be available for viewing after the broadcast at the same URL.

REGISTRATION INFORMATION:
To register to attend the broadcast at a specific location, please see page 3. However, you do not need to register to view the broadcast from your own PC.

CONTINUING EDUCATION (CE) CREDIT:
You must register for CE credit using this online system and then complete the course evaluation found at http://www2a.cdc.gov/TCEOnline/. Continuing Education for this activity will expire on August 31, 2009.
For full accreditation statements, including information about pharmacy credit, go to the program website after July 15.

COURSE NUMBERS:
WC1527 -- 9:00 to 11:30 AM ET
WC1528 -- 12:00 to 2:30 PM ET

Continued on Page 3

Immunization Update 2009

It's time to "brush up" for Back to School Physicals!!

Join your colleagues for an interactive webcast presented by:
The *National Immunization Program and the Public Health Training Network*

THURSDAY, JULY 30TH , 2009

Choose the time and location that works for you…

Danbury Hospital *Creasy Auditorium* 24 Hospital Avenue Danbury, CT 06810 9 a.m. to 11:30 a.m. *Breakfast provided* RSVP to: Irene Litwak (203) 730-5240	**Naugatuck Valley Health District** 98 Bank Street Seymour, CT 06483 12 p.m. to 2:30 p.m. *Lunch provided* RSVP to: Elizabeth Green (203) 881-3255	**Waterbury Health Department** 95 Scovill St. Waterbury, CT 06706 9 to 11:30 a.m. AND 12 to 2:30 p.m. RSVP to: Randy York (203) 346-3907
Norwalk Health Department Library 137 East Ave. Norwalk, CT 06851 9 a.m. to 11:30 a.m. *Refreshments provided* RSVP to: Pam Bates (203) 854-7728	**Hartford Health & Human Services** 2 Holcomb St., 3rd Fl Conf. Rm. Hartford, CT 06112 12 p.m. to 2:30 p.m. *Light lunch provided* RSVP to: Tish Ricks or Sandra Abella (860) 547-1426 X 7048 or X7034	**Windham Hospital** Bernard Desrosier Room 112 Mansfield Ave. Willimantic, CT 06226 12 p.m. to 2:30 p.m. *Lunch provided* RSVP to: Andrea Rosario (860) 423-4534 X328
Stamford Hospital Whittington Pavillion, Rm #2 190 West Broad St. Stamford, CT 06904 12 p.m. to 2:30 p.m. *Lunch provided* RSVP to: Cinthia Vera (203) 977-5098	**Torrington Area Health District** 350 Main St., 1st Fl. Conf. Rm Torrington, CT 06790 12 p.m. to 2:30 p.m. *Lunch provided* RSVP to: Sue Sawula (860) 489-0436	**American Lung Association** 45 Ash St. East Hartford, CT 06108 9 a.m. to 11:30 a.m. *Breakfast provided* RSVP to: Marie Rorrio (860) 291-7322
Nutmeg Public Access TV Studio 58 West Main St. Plainville, CT 06062-1904 9am-11:30am *Refreshments provided* Contact: Ramona Anderson (860) 612-2777	**Or… If you can't make the live webcast, choose one of these dates, times and locations....**	
Southwestern AHEC 5520 Park Ave., 2nd fl conf. rm. Trumbull, CT 06611 **Aug 14th Archived Webcast** **12 p.m. to 3:15 p.m.** *Lunch provided* RSVP to: Joan L. or Millie S. (203) 372-5503	**Savin Rock Conference Center** 6 Rock St. West Haven, CT 06516 **Aug. 11th Archived Webcast** **8:30 a.m. to 11:30 a.m.** *Breakfast provided* RSVP to: Betty M (203) 937-3665 or Jennifer Hall (203) 946-7097	**Naugatuck Valley Health District** 98 Bank Street Seymour, CT 06483 **Sept. 14th Archived Webcast** **4:30 to 7 p.m.** *Light dinner provided* RSVP to: Elizabeth Green (203) 881-3255

Local IAP Coordinators

Bridgeport
Joan Lane
203-372-5503

Danbury
Irene Litwak
203-730-5240

East Hartford
Marie Rorrio
860-291-7322

Hartford
Tish Rick Lopez
Sandra Abella
860-547-1426 x7048

Ledge Light
Martin Tolentino
Katie Baldwin
860-448-4882 x356

Meriden
Ana Guajardo
203-630-4251

Naugatuck Valley
Elizabeth Green
203-881-3255

New Britain
Ramona Anderson
860-612-2777

New Haven
Jennifer Hall
203-946-7097

Norwalk
Pam Bates
203-854-7728

Stamford
Cinthia Vera
203-977-5098

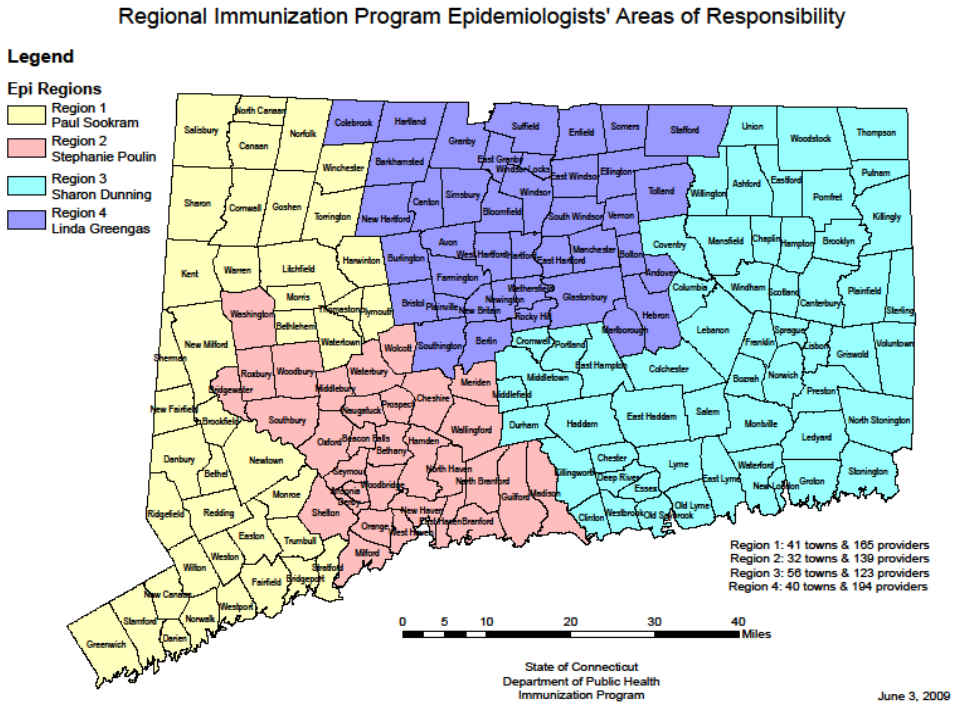
Torrington
Sue Sawula
860-489-0436

Waterbury
Randy York
203-346-3907

West Haven
Betty Murphy
203-937-3665

Windham
Andrea Rosario
860-423-4534

Other areas
Vacant
860-509-7241



Regional Epidemiologists

The Immunization Program has four Regional Epidemiologists responsible for immunization-related activities in the state. The above map shows the area of responsibility for each epidemiologist. See larger viewing map attached to this newsletter, epi reg June 2009.pdf

Region I – Western CT	Paul Sookram	860-509-7835
Region II – Greater New Haven	Stephanie Poulin	860-509-7811
Region III – Eastern CT	Sharon Dunning	860-509-7757
Region IV – Greater Hartford	Linda Greengas	860-509-8153

Please contact your Regional Epidemiologist to:

- report cases of vaccine-preventable diseases
- request in-service training for new staff or refresher training for existing staff
- discuss day care, school or college immunization entry requirements
- to request vaccine thermometers or educational materials

Continued from Page 1 Novel Influenza A(H1N1)

southern hemisphere influenza season experience. The Connecticut Department of Public Health has been planning with our community partners for the logistical challenges of distributing, tracking, and administering two different influenza vaccines during the 2009–2010 season.

As we have followed the progression of the novel H1N1 virus, the one thing that is very clear is that it is an evolving situation. We continue to learn more about the virus. There are many resources available for professionals to continue to monitor this emerging virus. Several web addresses are provided here for professionals to continue following the illness.

- CDC http://www.cdc.gov/h1n1flu
- Connecticut Department of Public Health http://www.ct.gov/ctfluwatch/
- World Health Organization http://www.who.int/en/

Results of 2008 Day Care, School and College Surveys

Each year the Immunization Program is required to conduct assessments of immunization coverage levels in all day cares, schools and colleges throughout the state. The results of the 2008 surveys are shown below.

Day Care (n = 59,706)

vaccine	*% coverage*
3 Polio	99.6
4 DTP/DTaP/DT	99.3
1 MMR	99.5
1 Hib	98.9
3 Hepatitis B	99.5
1 Varicella	99.1
1 Pneumococcal	99.1

The exemption rate (medical and religious) was 0.8%.

Kindergarten (n = 47,320)

vaccine	*% coverage*
4 Polio	98.3
5 DTP/DTaP/DT	98.3
2 MMR	98.4
3 Hepatitis B	98.2
1 Varicella	98.4

The exemption rate (medical and religious) was 1.0%

7th Grade (n = 49,067)

vaccine	*% coverage*
3 Hepatitis B	99.4
2 MMR	98.8
1 Varicella	97.2

The exemption rate (medical and religious) was 0.5%.

College (n = 51,482)

vaccine	*% coverage*
2 Measles/1 Rubella	92.0
Meningococcal	99.2

The Immunization Program appreciates all the hard work put forth by providers and their staff in maintaining such high immunization coverage levels. Your outstanding efforts in keeping children and adolescents up-to-date on their vaccinations do not go unnoticed! Thanks to providers statewide Connecticut continues to maintain one of the highest immunization rates for their two year old population in the country.

Risk of Pertussis Infection 23 Times Higher When Parents Refuse Immunizations

The June issue of *Pediatrics* reported on a study of children with pertussis enrolled in a Colorado health plan from 1996 to 2007. 156 children with laboratory-confirmed pertussis were compared to 595 randomly selected controls. All of the children's medical records were reviewed. Children were classified as "vaccine refusers" if that was recorded in their records or "vaccine accepters" if they were immunized or if the reason they were not immunized was not due to vaccine refusal such as if the child was sick. After controlling for gender, age, season of infection and other factors, the researchers found that the unvaccinated children were 23 times as likely as vaccinated children to contract pertussis. They found that one in 500 vaccinated children came down with pertussis, while about one in 20 unvaccinated children contracted the disease.

Pertussis can cause serious illness, especially in children. The most common complication of pertussis is secondary bacterial infection, which is the cause of most pertussis-related deaths. Pneumonia occurs in one out of 20 cases. Infants are more likely to suffer from such neurologic complications as seizures and encephalopathy. Nationwide there were 10,454 cases of pertussis reported to the CDC in 2007, and ten children died. In Connecticut there were 89 pertussis cases in 2007 and 55 cases in 2008.

Below is a quick review of recent changes at McKesson, the DPH statewide vaccine distribution company. Please refer to the June 3, 2009 blast fax for more detailed information. A copy of the information from the June 3rd blast fax is available at :www.ct.gov/dph/ immunizations under <Vaccine Policy Memos> section

New Shipping Boxes: McKesson has begun shipping vaccine in new boxes. The biggest change is that providers will no longer be required to return the shipping containers to McKesson. Therefore, the new boxes will no longer have pre-printed return address labels. McKesson recommends providers keep one or two boxes on hand for expired or non-viable vaccine returns. If providers need to return vaccines and do not have a box on hand, they can call McKesson Customer Service at 1-877-822-7746 to schedule a pick up or have a return address label sent to them. The new shipping containers should be in full use by 8/14/2009.

Updated Temperature Monitors: New temperature monitors are being used to assure vaccines are shipped under manufacturer-recommended conditions. On arrival, providers should remove the instruction card from the shipping container right away. Follow the instruction guide on the back of the card to read the monitor. Examine the vaccines and the shipping container for any damage. If you have questions or concerns when reading the monitor, if the monitor was not activated, or if you see damage to the package call McKesson at 877-836-7123. **According to the CDC contract with McKesson, providers must contact McKesson with vaccine viability concerns within two hours of receiving their shipments.**

Vaccine Deliveries: With summer vacation approaching, providers MUST notify the Immunization Program whenever their office will be closed on a day they would normally be open. Your business hours are shared with McKesson and Merck for vaccine delivery times. Once your order has been submitted your vaccine can be delivered on any day or time you have listed to be open. Do not assume vaccines will be delivered the same time and day each month. Providers will be held accountable for replacing spoiled vaccines on a dose-for-dose basis if your office is closed for vacation or other reasons and did not notify the Immunization Program prior to the closure. **If your shipping information has recently changed or your office will be closed for any unscheduled period of time, please contact the Department of Public Health Immunization Program immediately with any updated information.**

IAP Editors: Vincent Sacco, MS
Melinda Mailhot, MSPH

Test Your Knowledge on Basic Vaccine Storage Procedures

Attached is a Quick Quiz to test your knowledge of Vaccine Storage and Handling Procedures. This should not take more than a couple minutes to complete. See vaccine storage and handling quiz attached to this newsletter.

When completed, please fax your answers to 860-509-8371 or email to claudia.soprano@ct.gov.

Reinstatement of Hib Booster Dose at Ages 12--15 Months

Effective immediately, CDC, in consultation with ACIP, AAFP, and AAP, is recommending reinstatement of the booster dose of Hib vaccine for children aged 12--15 months who have completed the primary 3-dose series. Infants should continue to receive the primary Hib vaccine series at ages 2, 4, and 6 months. Children aged 12--15 months should receive the booster dose on time. Older children for whom the booster dose was deferred should receive their Hib booster dose at the next routinely scheduled visit or medical encounter. **Although supply is sufficient to reinstate the booster dose and begin catch-up vaccination, supply is not yet ample enough to support a mass notification process to contact all children with deferred Hib booster doses.**

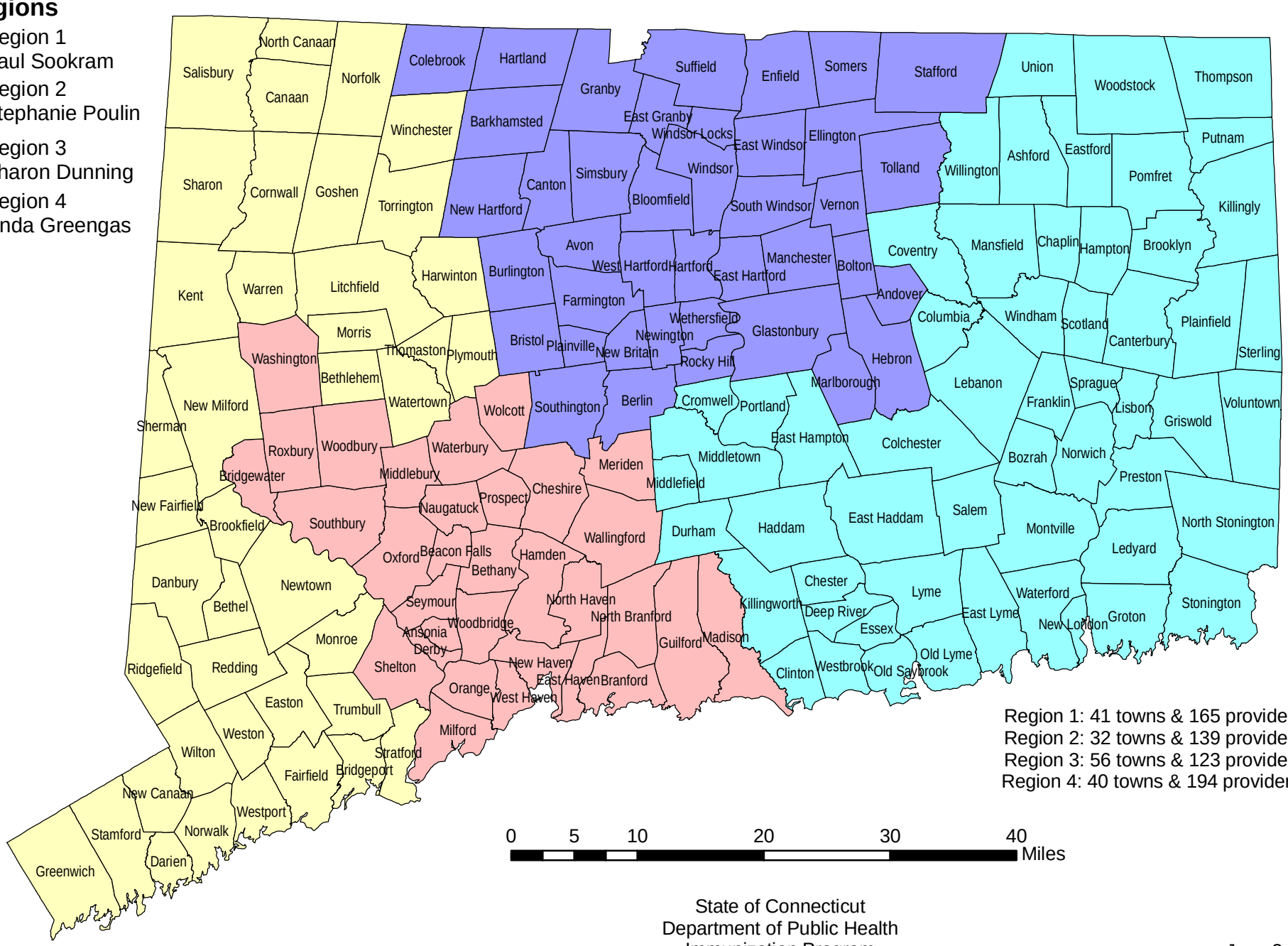
For more information see the CDC Morbidity and Mortality Weekly Report dated June 26, 2009 at: http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5824a5.htm?s_cid=mm5824a15e

Regional Immunization Program Epidemiologists' Areas of Responsibility

Legend

Epi Regions

- Region 1
  Paul Sookram
- Region 2
  Stephanie Poulin
- Region 3
  Sharon Dunning
- Region 4
  Linda Greengas



Region 1: 41 towns & 165 providers
Region 2: 32 towns & 139 providers
Region 3: 56 towns & 123 providers
Region 4: 40 towns & 194 providers

State of Connecticut
Department of Public Health
Immunization Program

June 3, 2009

Vaccine Storage and Handling:

Pin #_____ Date:_____

Name (VFC contact):_____

Facility Name:_____

What is the proper refrigerator temperature range for maintaining vaccines?

What is the proper freezer temperature range for maintaining vaccines?

What time(s) of the day should you monitor and record refrigerator and freezer temperatures?

Why is it important that vaccines are maintained at a certain temperature range?

What should you do if your refrigerator or freezer is out of temperature range, or if you have a power failure?

What should you do if you have vaccine you can't use before the expiration date?

How should you return spoiled or expired vaccines?

How soon should you unpack and inventory your state supplied vaccine order?

How soon should you call McKesson if there is damage to your vaccine storage container or if you have questions about a vaccine shipment's viability?

What day of the month must your state vaccine order form be submitted by to the Immunization Program?

Who should you notify if your shipping information has recently changed or the office will be closed for vacation or for any unscheduled period of time?

How many people in your office should you share this information with?

When complete, please fax your answers to 860-509-8371 or email to claudia.soprano@ct.gov