

# Dickinson-Iron District Health Department

## THE PUBLIC HEALTH PRESS



Health Health Disease  
~Protection \* Education \* Prevention~

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~An Active Member of the Dickinson-Iron County Collaboratives~

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### Our Mission

**“To assure the highest possible level of health for the people of the communities we serve.”**

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## Lyme Disease Prevention and Control

(By Richard Thoune, Director)

### It's that time of year again!

We are all excited about the warm weather upon us, people are getting active, and spending more time outdoors in the beautiful UP environment. But the warmer weather also brings with it our insect friends, including ticks that can transmit the bacteria that causes Lyme disease. Locally, Lyme disease has not been a large threat to area residents. We have had just two confirmed cases of Lyme disease over the past five years, one in 2001 and one in 2004. What can we do to prevent and control Lyme disease?

**Avoid tick habitats:** Whenever possible, avoid entering areas that are likely to be infested with ticks, particularly in spring and summer when nymphal ticks feed. Ticks favor a moist, shaded environment, especially areas with leaf litter and low-lying vegetation in wooded, brushy or overgrown grassy habitat. Both deer and rodents must be abundant to maintain the cycle for the bacteria *B. burgdorferi*. The primary vector of concern, the deer tick, is present in Dickinson and Iron Counties.

### Use personal protection

**measures:** If you are going to be in areas that are tick infested, wear light-colored clothing so that ticks can be spotted more easily and removed before becoming attached. Wearing long-sleeved shirts and tucking pants into socks or boot tops may help keep ticks from reaching your skin. Ticks are usually located close to the ground, so wearing high rubber boots may provide additional protection.

The risk of tick attachment can also be reduced by applying insect repellents containing DEET (n,n-diethyl-m toluamide) to clothes and exposed skin, and applying permethrin (which kills ticks on contact) to clothes.

### Perform a tick check and remove attached ticks:

The transmission of *B. burgdorferi* (the bacteria that causes Lyme disease) from an infected tick is unlikely to occur before 36 hours of tick attachment. For this reason, daily checks for ticks and promptly removing any attached tick that you find will help prevent infection. Embedded ticks should be removed using fine-tipped tweezers. DO NOT use petroleum jelly, a hot match, nail polish, or other products. Grasp the tick firmly and as closely to the skin as possible. With a steady motion, pull the tick's body away from the skin. The tick's mouthparts may remain in the skin, but do not be alarmed. The bacteria that cause Lyme disease are contained in the tick's midgut or salivary glands. Cleanse the area with an antiseptic.

### What about taking preventive antibiotics after a tick bite?

The relative cost-effectiveness of post-exposure treatment of tick bites to avoid Lyme disease in endemic areas (areas where the disease is known to occur regularly) is dependent on the probability of *B. burgdorferi* infection after a tick bite. In most circumstances, treating persons who only have a tick bite is not recommended. Individuals who are bitten by a deer tick should remove the

tick promptly, and may wish to consult with their health care provider. Persons should promptly seek medical attention if they develop any signs and symptoms of early Lyme disease.

### Strategies to reduce tick abundance:

The number of ticks in endemic residential areas may be reduced by removing leaf litter, brush- and wood-piles around houses and at the edges of yards, and by clearing trees and brush to admit more sunlight and reduce the amount of suitable habitat for deer, rodents, and ticks. Tick populations have also been effectively suppressed through the application of pesticides to residential properties.

### Early diagnosis and treatment:

The early diagnosis and proper antibiotic treatment of Lyme disease are important strategies to avoid the costs and complications of infection and late-stage illness.

**Lyme disease vaccine:** As of February 25, 2002 the manufacturer announced that the LYMErix™ Lyme disease vaccine will no longer be commercially available.

### Additional information:

More information on Lyme Disease is available via the internet at <http://www.cdc.gov/ncidod/dvbid/lyme/prevent.htm>. The Health Department also has brochures and pamphlets on Lyme Disease and tick recognition tools.

*“Public Health: Knows no boundaries and helps all those in need.”*

# Dickinson and Iron County Women Receive Life-Saving Services through Breast and Cervical Cancer Control Program

(By Denise Berland, Office Supervisor)

The Dickinson-Iron District Health Department is one of 20 local health departments in Michigan that provides a comprehensive Breast and Cervical Cancer Control Program (BCCCP). Through the BCCCP low and moderate-income women have access to life-saving cancer screening services and follow-up care, including cancer treatment if that should be needed.

BCCCP services are provided and coordinated by the Health Department which has enlisted the cooperation and participation of physicians, hospitals, and other health care organizations in our community to assure that all necessary follow-up services are provided.

## Frequently Asked Questions

### Who is eligible for BCCCP services?

To be eligible for BCCCP services, women must meet the following criteria:

- Michigan resident
- Have an income ≤ 250% of federal poverty level (see chart below)
- Be uninsured or underinsured for these tests
- Be age 40-64

*Note: Women who are enrolled in a managed care program, a health maintenance organization or Medicare Part B are not eligible for the BCCCP.*

Federal Poverty Level (2005)	
Size of Family Unit	250% of Poverty Level
1	\$23,925
2	\$32,075
3	\$40,225
4	\$48,375
For family units of more than 4 members, add \$3,260 for each additional member.	

### What screening and diagnostic services are covered by BCCCP?

- Clinical breast exam
- Pap test
- Pelvic exam
- Screening mammogram

### What if a breast or cervical abnormality is detected?

If a breast and/or cervical abnormality is detected from the

screening test or exam, you will be referred to community providers for follow-up. Over 75 diagnostic services are covered through the BCCCP. Some of these include:

- Diagnostic mammograms
- Ultrasounds
- Breast biopsies
- Colposcopy services
- Medical consultations
- Selected anesthesia services.



### Does the BCCCP pay for cancer treatment if a breast or cervical cancer is diagnosed through the program?

In the event of a diagnosis of breast or cervical cancer through the BCCCP, you may be eligible for Medicaid coverage. If eligible, Medicaid will pay for all of your medical expenses for as long as you are being treated for cancer.

*Note: In order to be eligible for Medicaid through the BCCCP eligibility criteria, the diagnosis must be initially made by a BCCCP provider. For this reason, your usual health care provider may encourage you to take advantage of this program.*

### How long would I be eligible to receive Medicaid coverage for my cancer treatment?

You would remain eligible for Medicaid coverage until:

- ⇒ Your doctor deems that you are free from cancer and will not require continued cancer therapy or,
- ⇒ You no longer meet the eligibility criteria for the BCCCP program (e.g., has creditable insurance coverage, has reached the age of 65 and has Medicare Part B, or your income now exceeds 250% of the federal poverty level)

### How do I make an appointment or find out if I'm eligible for the BCCCP?

To make an appointment or for more information contact the Dickinson-Iron District Health Department at (906) 779-7237 or (906) 265-9913 to speak to the BCCCP clerk. She will assess your eligibility for the BCCCP based upon your age, income, and health insurance status.

Men who are occupied in the restoration of health to other men, by the joint exertion of skill and humanity, are above all the great of the earth. They even partake of divinity, since to preserve and renew is almost as noble as to create.

## Immunization Requirements for Children Entering Kindergarten, 6<sup>th</sup> Grade or a New School District

Vaccine-preventable diseases are still seen in Michigan, and may cause disability or death. Immunization is one of our most cost-effective measures to protect children from these diseases. A high proportion of children must be immunized to prevent outbreaks of disease in school settings and other places where children work and play closely together.

Since 1978, state law has required that each student entering kindergarten or a new school district be up-to-date on their immunizations. In addition, Michigan schools are required to assess and report the immunization status of all 6<sup>th</sup> grade students.

Below is a summary of the immunization requirements for children entering kindergarten, 6<sup>th</sup> grade or a new school district:



Immunizations	Age 4 – 6 years	Age 7 – 18 years
<b>Diphtheria, Tetanus, Pertussis</b>	4 doses	4 doses ▪Tetanus/Diphtheria (Td)
<b>Polio</b>	3 doses	3 doses
<b>Measles, Mumps, Rubella</b>	2 doses	2 doses
<b>Hepatitis B</b>	3 doses	3 doses
<b>Varicella (Chickenpox)</b> Or history of chickenpox disease	1 dose	1-2 doses

To schedule an appointment for immunizations or for more information, call your health care provider or the Dickinson-Iron District Health Department at (906) 779-7208 or (906) 265-9913.

## Health Department Recommends Meningococcal Vaccinations for College Students

*(By Denise Berland, Office Supervisor)*

Why is the meningococcal vaccination so important for college students? Meningococcal disease is a serious bacterial infection. It can cause meningitis, a severe swelling of the brain and spinal cord. It can also lead to sepsis, a life-threatening blood infection. Although meningococcal disease is uncommon, the risk for this disease is higher for young people living on campus. College freshmen living in dormitories have a 6-times greater chance of meningococcal disease than other college students, according to data from the Centers for Disease Control and Prevention (CDC).

Meningococcal disease is very difficult to diagnose and treat, because it often begins with symptoms that can be mistaken for the flu or another respiratory infection. Meningococcal disease can get worse very rapidly and can kill a healthy young adult in 48 hours or less. In fact, up to 1 out of 5 people who develop meningococcal disease will die. Of those who survive, 1 in 5 will suffer permanent disabilities such as amputation, severe scarring, brain damage, and hearing loss.

Early recognition of the characteristic signs and symptoms of meningococcal disease is critical and potentially lifesaving. The most common early symptoms of meningitis are similar to the flu. Many people complain about having a headache, fever, stiff neck, extreme fatigue, nausea, vomiting, and sensitivity to light. Some people also develop a pur-

plish, black-red rash of small dots (petechiae), mainly on their arms and legs.

Vaccination is recommended to reduce the risk of acquiring meningococcal disease. Fortunately, 68-83% of meningococcal disease in college students is caused by strains of bacteria that are potentially vaccine-preventable. Meningococcal vaccination helps protect against the most common forms of the bacteria (N meningitides strains A, C, Y, and W-135). However, the meningococcal vaccine does not protect against infection by other strains and no vaccine is guaranteed to protect 100% of susceptible individuals.

The meningococcal vaccination is well tolerated. Soreness or redness at the injection site is the most common side effect. It can be administered at the same time as other immunizations. Protective antibody levels may be achieved within 7 to 10 days after vaccination.

Other vaccinations recommended for young adults are Td (tetanus/diphtheria) – a dose within the last 10 years; MMR (measles/mumps/rubella) 2 doses; Hepatitis B – 3 doses; and Varicella – 1-2 doses or have had the chickenpox disease.

To make an appointment for immunizations or for more information, call the Dickinson-Iron District Health Department at (906) 779-7208 or (906)265-9913 or contact your health care provider.

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**DICKINSON-IRON DISTRICT  
HEALTH DEPARTMENT**

601 Washington Ave.  
Iron River, MI 49935  
and  
818 Pyle Drive  
Kingsford, MI 49802

Phone:  
(906) 265-9913  
(906) 774-1868

Fax:  
(906) 265-2950  
(906) 774-9910

E-mail: [rumpf@hline.org](mailto:rumpf@hline.org)

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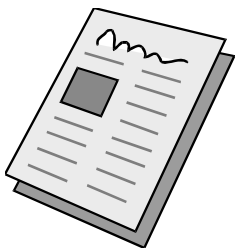
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trict Health Department

**Richard J. Thoune,**  
Director/Health Officer

**Kelly Rumpf,** Editor  
Health Educator

**Health Department Newsletter Questionnaire  
Response from Community**



Recently, the health department distributed a questionnaire to all of our newsletter recipients. We requested feedback from our readership to determine if we are being effective with the quality, content and usefulness of this publication. The consensus is yes, we seem to be meeting several of your needs through the health department newsletter. The feedback received indicates that it is a

reliable and valuable health education resource, that several of you are using the publication for your own internal use, and that it has helped you to better understand what the public health mission is, how we serve you, and what services we offer. With this positive and receptive feedback, we will continue with the publication of our newsletter, *The Public Health Press*. Thank you to all who responded to the questionnaire. We will do our best to continue to educate you on the issues, topics and services that affect public health and keep you abreast of what the health department is doing on a quarterly basis.



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Richard J. Thoune, RS, MS, MPH  
Director/Health Officer

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