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PROVIDER NEWSLETTER
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Note from the Medical Director:

I would like to thank area medical providers for their assistance in helping to make H1N1 vaccine available to county residents this year. Although the pandemic has turned out to be milder than it initially appeared, it has caused a significant amount of morbidity and mortality, particularly in younger populations. The most important legacy of H1N1 may be that it provided all of us with an opportunity to test our readiness to handle a pandemic and make changes where needed. There will be important lessons learned from H1N1 which will prove invaluable when another, potentially more virulent bug, arrives on our doorstep.

H1N1 Update:

Well it's over….or is it? A third wave of H1N1 flu is beginning to look unlikely however, there is clear evidence that this virus is persisting at low levels across the country. Meanwhile, seasonal flu has yet to make a big appearance. A small number of influenza B cases have been seen nationally but nearly all A viruses are still H1N1. This makes treatment with Oseltamivir still appropriate for those requiring treatment. The CDC and MDCH have promised to let us know if this scenario changes, requiring a change in anti-viral treatment guidance.

For now, H1N1 is looking like the mildest pandemic of the past 100 years. The 1918 flu caused approximately 50 deaths per 2,000 cases, the 1957 and 1968 flu bugs caused approximately 2 deaths per 2,000, while H1N1 has caused more on the order of 1 death per 2,000 cases. Of course, the groups affected by H1N1 have been very different from its predecessors - with the bulk of hospitalizations and deaths occurring in children and adults under 65 years.

Locally, through the combined efforts of private medical providers and local public health, nearly 8,300 doses of H1N1 vaccine were given in Dickinson and Iron Counties. In Dickinson County, 63% of doses were given by the health department and in Iron County, 75% of doses were given by the health department.

Because H1N1 is persisting in the population, the CDC and MDCH still recommend H1N1 vaccination for everyone in the community. Vaccine safety for H1N1 looks very comparable to the safety profile for seasonal influenza vaccine. This information should be reassuring to those who held off on vaccinating early in the season, due to safety concerns. There is plenty of vaccine now available and providers may contact the health department for additional doses or refer their patients to the health department.

Michigan Businesses Going Smoke-Free:

As you are probably aware, Michigan's Congress has passed legislation that will make nearly all workplaces, including restaurants and bars, smoke-free. The new law, which takes effect May 1, 2010, adds to the growing momentum around the globe to reduce exposure to second hand smoke. Michigan will become the 27th state in the U.S. to pass strong smoke-free legislation. Although it appears MDCH (via local public health departments), will be charged with enforcing this law, it is not yet clear how the enforcement process will work. More to follow this spring…

Vaccine Available at Health Department for Uninsured and Under-Insured Individuals:

Through a special program funded by the CDC, local health departments in Michigan will be able to temporarily expand their vaccination programs this year. Vaccine will be targeted to individuals who are uninsured or have insurance that does not cover vaccination (or a particular vaccine). For example, zoster vaccine will be available to individuals 60 years of age and older who fit the above criteria. Tdap will also be offered and HPV 4 vaccine will be available to males 19-26 years, as well as females. Meningococcal and varicella vaccine are also included in this program. Please feel free to refer patients needing vaccine to the health department offices in Iron River or Kingsford.

Upper Peninsula Reportable Communicable Diseases:

Region 8 Communicable Disease Summary

November 1st, 2009 through December 31st, 2009

Notes: Flu-like Disease category contains cases of unconfirmed illness reported from schools
Summary includes cases under active investigation at the time the report was created

	Chippewa		Delta Menominee		Dickinson Iron		LMAS		Marquette		Western UP		UP Total	
Disease	Period	YTD	Period	YTD	Period	YTD	Period	YTD	Period	YTD	Period	YTD	Period	YTD
Campylobacter	0	3	3	10	0	2	1	3	0	1	3	5	7	24
Cryptosporidiosis	2	11	0	15	0	1	0	2	0	1	0	1	2	31
Escherichia coli 0157:H7	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Giardiasis	0	1	0	7	0	0	0	6	0	5	1	4	1	23
Listeriosis	0	0	0	1	0	0	0	0	0	0	0	0	0	1
Norovirus	0	0	0	0	0	0	0	0	0	0	2	2	2	2
Salmonellosis	0	6	2	9	0	5	0	5	0	6	0	4	2	35
Shiga toxin, E. Coli, Non O157	0	1	0	0	0	0	0	0	0	0	0	1	0	2
Shiga toxin, E. Coli, Unsp	0	0	0	0	0	1	0	0	0	2	0	1	0	4
Shigellosis	0	0	0	0	0	0	0	0	0	1	0	0	0	1
Typhoid Fever	1	1	0	0	0	0	0	0	0	0	0	0	1	1
Meningitis - Aseptic	0	1	0	1	0	1	0	1	0	3	0	1	0	8
Meningitis - Bacterial Other	0	0	0	1	0	1	0	1	0	1	1	1	1	5
Streptococcus pneumoniae, Inv	0	2	1	4	1	2	1	1	1	7	0	1	4	17
Blastomycosis	0	0	1	3	0	0	1	2	0	0	0	2	2	7
Coccidioidomycosis	0	0	0	0	0	0	0	0	0	1	0	0	0	1
Cryptococcosis	0	0	0	0	0	0	0	1	0	1	0	1	0	3
Flu Like Disease*	372	959	1026	4954	762	2542	697	1351	724	1949	1389	4952	4970	16707
Guillain-Barre Syndrome	0	0	0	1	1	1	0	0	0	2	0	0	1	4
Histoplasmosis	0	0	0	1	0	0	0	0	0	0	0	0	0	1
Influenza	2	8	0	1	0	4	0	8	1	13	1	18	4	52
Influenza, 2009 Novel	41	44	8	73	6	8	8	11	19	35	16	33	98	204
Influenza, Novel	0	2	0	0	0	0	0	0	0	3	0	3	0	8
Legionellosis	0	3	1	1	1	1	0	0	0	2	0	1	2	8
Streptococcal Dis, Inv, Grp A	0	0	0	0	0	0	0	0	1	2	0	0	1	2
Unusual Outbreak or Occurrence	0	0	0	0	0	0	0	0	2	3	0	0	2	3
Chlamydia (Genital)	3	50	3	73	7	55	5	28	19	117	15	97	52	420
Gonorrhea	0	0	1	6	0	2	1	6	0	2	0	1	2	17
Syphilis - Secondary	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Tuberculosis	0	0	0	0	0	0	0	0	0	0	0	1	0	1
Chickenpox (Varicella)	0	9	2	24	0	11	0	1	0	8	0	32	2	85
H. influenzae Disease - Inv.	1	2	0	0	0	0	0	0	0	0	0	0	1	2
Mumps	0	0	0	1	0	0	0	0	0	0	0	1	0	2
Pertussis	0	4	0	0	0	0	0	3	1	4	0	1	1	12
Shingles	0	0	1	1	0	0	0	0	0	0	0	0	1	1
VZ Infection, Unspecified	0	0	0	0	0	0	0	0	0	2	0	0	0	2
Ehrlichiosis, Ehrlichia chaffeensis	0	0	0	1	0	0	0	0	0	0	0	1	0	2
Lyme Disease	0	0	0	30	0	2	0	0	0	1	0	3	0	36
Malaria	0	0	0	0	0	0	0	0	0	0	0	1	0	1
Typhus	0	0	0	0	0	0	0	0	0	0	0	1	0	1
Hepatitis A	0	1	2	2	1	1	0	0	0	0	0	1	3	5
Hepatitis B, Acute	0	0	0	0	0	0	0	0	0	0	0	2	0	2
Hepatitis B, Chronic	4	10	0	1	0	1	0	1	0	1	1	7	5	21
Hepatitis C, Acute	1	10	3	3	0	2	0	1	2	2	0	11	6	29
Hepatitis C, Chronic	13	80	1	19	2	11	5	29	6	48	2	42	29	229
Hepatitis C, Unknown*	0	0	0	0	1	1	0	0	0	0	0	0	1	1