

# COMMUNICABLE DISEASE



FALL 2016

NEWSLETTER

## IN THIS EDITION:

⇒ **INFLUENZA (FLU)**

⇒ **MRSA**



## INFLUENZA (“FLU”)

### DISEASE

Influenza (flu) is a contagious respiratory illness caused by various influenza viruses. The flu can cause mild to severe illness, and even death. Each year in the United States, up to 20% of the population is infected with influenza accounting for greater than 200,000 hospitalizations and 3,300 – 49,000 related deaths.

### SYMPTOMS

Signs and symptoms of flu infection include:

- abrupt onset of fever (101-102°F)
- chills
- dry cough
- sore throat
- runny or stuffy nose
- muscle or body aches
- headaches
- fatigue (very tired)

### COMMUNICABILITY

Most often, the “flu” is spread by direct contact with droplets transferred from one person to another through coughing, sneezing and talking. Flu viruses can also be spread by touching surfaces or objects with flu virus on them and then touching one’s own mouth, eyes or nose.

It is possible for a sick individual to infect others before showing signs and symptoms of illness. Healthy adults may be able to infect others beginning 2 days before symptoms develop and up to 5-7 days after becoming ill. Adults and children with weakened immune systems may be able to infect others for an even longer period of time.

### TREATMENT

Flu symptoms can be managed with or without medication. The most common treatments include:

- Over-the-counter medications (pain reliever/fever reducer, cough suppressants, etc.)
- Rest
- Drinking plenty of fluids like water, broth, and sports drinks/electrolyte beverages
- Gargling with warm salt water to soothe a sore throat

Your healthcare provider may also opt to prescribe an antiviral medication which can decrease the length and severity of the illness (if diagnosed within the first 2 days of exhibiting symptoms).



## **PREVENTION**

One of the best ways to prevent the flu is to receive a flu vaccination. Vaccination is universally recommended for all persons 6 months of age and older without contraindications to vaccination, and should take place using injectable vaccine\* (the “flu shot”). During the 2016-2017 flu season, flu vaccine will be manufactured containing either 3 (trivalent) or 4 (quadrivalent) viral strains, representing viruses recently circulating world-wide. Due to the varying composition of the vaccine each year, and declining immunity throughout the season, annual vaccination using the current vaccine is required.

Full antibody protection develops against influenza virus infections about two weeks after vaccination. It is important to remember that flu vaccination will not cause flu infection or stop any infectious process already in progress. Yearly flu vaccination should begin in September, or as soon as vaccine is available, and continue throughout the flu season. The flu season can begin as early as October with seasonal flu activity peaking in January or later. You should contact your healthcare provider to receive the flu vaccine as soon as it becomes available. Flu vaccine is also available at the Saginaw County Department of Public Health (SCDPH) for individuals 6 months of age and older. The SCDPH accepts Medicaid, Medicare, Blue Care Network, HealthPlus/HAP, Priority Health and some Blue Cross Blue Shield plans for flu vaccine administration. For clinic hours or more information call (989) 758-3840 or visit [www.saginawpublichealth.org](http://www.saginawpublichealth.org).

***\*Due to concerns regarding the effectiveness of live attenuated influenza vaccine (LAIV – FluMist®; “nasal spray”) during the 2013-2014 and 2015-2016 seasons, the Advisory Committee on Immunization Practices (ACIP) has made the interim recommendation that LAIV not be used during the 2016-2017 flu season.***

## **REFERENCES:**

Centers for Disease Control and Prevention. *Epidemiology and Prevention of Vaccine-Preventable Diseases* 13<sup>th</sup> ed. Hamborsky, J., Kroger, A., & Wolfe, S. eds. Washington DC: Public Health Foundation, 2015.

Centers for Disease Control and Prevention. Influenza (Flu). Retrieved from <http://www.cdc.gov/flu/index.htm>.

U.S. Department of Health and Human Services. Know What to Do About the Flu. Retrieved from [www.flu.gov](http://www.flu.gov).

## **SENTINEL FLU PROVIDERS**

The Saginaw County Department of Public Health (SCDPH) is seeking providers to participate in the Michigan Influenza Sentinel Provider Surveillance Program. This is a collaborative effort between the Centers for Disease Control and Prevention (CDC), the Michigan Department of Health and Human Services (MDHHS), local health departments, and volunteer sentinel clinicians for the purposes of influenza surveillance. As a sentinel site, clinicians report the total number of patient visits to their facilities each week, as well as the number of patient visits for influenza-like illness (ILI) within five age categories (0-4 years, 5-24 years, 25-49 years, 50-64 years, and 65+ years). Additionally, sentinel sites collect respiratory specimens from a sample of patients with ILI for respiratory virus panel testing at no charge by the MDHHS (lab kits and shipping paid for by MDHHS).

Medical providers of any specialty (e.g., family medicine, internal medicine, pediatrics, infectious disease) in

nearly any setting (e.g., private practice, public health clinic, urgent care center, emergency room, university student health center) who are likely to see patients with influenza-like illness can be flu sentinel sites. The only exception is for those providers who primarily care for institutionalized populations (e.g., nursing homes, prisons). The advantages of being a sentinel provider include: free laboratory testing (respiratory virus culture) for approximately 11 specimens per site per year, weekly feedback on submitted data, free online subscriptions to the CDC’s *Emerging Infectious Diseases* and *Morbidity and Mortality Weekly Report*, and two (2) free registrations to an MDHHS Fall Regional Immunization Conference (reporting for ½ the weeks of the year required).

*For more information, please visit the Michigan Department of Health and Human Services Influenza Sentinel Provider website at [www.michigan.gov](http://www.michigan.gov) or contact Jalyn Ingalls, Influenza Epidemiologist, at [IngallsJ@michigan.gov](mailto:IngallsJ@michigan.gov) or the SCDPH immunization program at (989) 758-3840.*

## **MRSA: METHICILLIN-RESISTANT STAPHYLOCOCCUS AUREUS**

Staph bacteria can commonly cause skin infections. MRSA is a type of staph bacteria that is resistant to several kinds of antibiotics. Boils, impetigo, food poisoning, cellulitis, and toxic shock syndrome are all examples of diseases that can be caused by Staphylococcus. If not properly treated a MRSA infection can cause sepsis (which is a life threatening infection in the body). One out of every 3 people can carry staph in their noses without illness. Two out of every 100 people carry MRSA.

### **SYMPTOMS**

The first sign of a MRSA skin infection can appear like a small pimple or boil. Many people think it could be a spider bite. The area will be red, swollen and painful. The pimple will fill with pus or have drainage. The person may have a fever. You cannot tell by looking at the sore if it is MRSA.

### **COMMUNICABILITY**

The incubation period for most Staph infections is 1-10 days after exposure. MRSA is spread from person-to-person through hands and skin-to-skin contact. Drainage from a MRSA infected site can spread to other parts of the body and to other people. MRSA can live months on uncleaned surfaces. MRSA transmission has 5 C's: Crowding, Contact (Skin), Compromised skin (cuts), Contaminated surface, Cleanliness (lack of). The 5 C's are common in schools, gyms, daycares, correctional facilities and homes.

### **TREATMENT**

Contact your healthcare provider if you have an infection. Seeking care early will prevent MRSA from becoming severe. Your provider may treat the site by draining the wound or doing a culture of the drainage to see what antibiotics will treat the infection. The wound should be cleaned frequently and kept covered with a bandage to prevent spreading MRSA. If your provider does prescribe antibiotics, it is important to complete the prescription.

### **PREVENTION**

Wash your hands often with soap and hot water. Do not share personal items such as towels, razors or clothing. If you have a wound keep it covered with clean dry bandages until healed. Drainage from a MRSA wound is contagious. Properly dispose of any bandages used on wound. Wash all bedding and clothing in hot water and high heat in the dryer. Clean all high-touch surfaces frequently with 1:100 bleach solution which should be made up daily. Persons with MRSA should not participate in contact sports or swimming until they have clearance from their health care provider. Persons who have MRSA and can maintain wound coverage at all times may attend work or school. DO NOT treat MRSA on your own; see your healthcare provider.

### **SOURCE:**

[www.cdc.gov](http://www.cdc.gov)



**COMMUNICABLE DISEASE  
REPORTED FOR SAGINAW COUNTY  
FOR THE QUARTER  
07/01/2016-09/30/2016**

Disease	No. Reported
AIDS, AGGREGATE	0
ANIMAL BITE	57
CAMPYLOBACTER	6
CHIKUNGUNYA	0
CHLAMYDIA (Genital)	261
CRYPTOSPORIDIOSIS	4
<b>FLU LIKE DISEASE</b>	<b>299</b>
GASTROINTESTINAL ILLNESS	165
GIARDIASIS	3
GONORRHEA	106
HEAD LICE	35
HEPATITIS B ACUTE	1
HEPATITIS B CHRONIC	4
HEPATITIS C ACUTE	0
HEPATITIS C CHRONIC	25
INFLUENZA	0
LEGIONELLOSIS	4
MENINGITIS-ASEPTIC	3
MENINGITIS-BACTERIAL OTHER	0
MUMPS	0
MYCOBACTERIUM	1
PERTUSSIS	0
RABIES	1
SALMONELLOSIS	11
SHIGELLOSIS	18
SHINGLES	1
STREP THROAT	30
STREPTOCOCCUS PNEUMONIA, INVASIVE	3
SYPHILLIS-LATE LATENT	0
TUBERCULOSIS	0
VZ INFECTION, UNSPECIFIED	0
YERSINIA ENTERITIS	0
ZIKA	0

**COMMUNICABLE DISEASE YTD  
REPORTED FOR SAGINAW COUNTY  
01/01/2016-09/30/2016**

Disease	No. Reported
AIDS, AGGREGATE	0
ANIMAL BITE	122
CAMPYLOBACTER	13
CHIKUNGUNYA	0
CHLAMYDIA (Genital)	794
CRYPTOSPORIDIOSIS	11
<b>FLU LIKE DISEASE</b>	<b>3965</b>
GASTROINTESTINAL ILLNESS	2780
GIARDIASIS	3
GONORRHEA	272
HEAD LICE	146
HEPATITIS B ACUTE	1
HEPATITIS B CHRONIC	11
HEPATITIS C ACUTE	1
HEPATITIS C CHRONIC	95
INFLUENZA	576
LEGIONELLOSIS	6
MENINGITIS-ASEPTIC	12
MENINGITIS-BACTERIAL OTHER	1
MUMPS	0
MYCOBACTERIUM	4
PERTUSSIS	0
RABIES	1
SALMONELLOSIS	17
SHIGELLOSIS	48
SHINGLES	7
STREP THROAT	321
STREPTOCOCCUS PNEUMONIA, INVASIVE	18
SYPHILLIS-LATE LATENT	1
TUBERCULOSIS	2
VZ INFECTION, UNSPECIFIED	0
YERSINIA ENTERITIS	0
ZIKA	0



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Please visit our website at [www.saginawpublichealth.org](http://www.saginawpublichealth.org) where our communicable disease pamphlets are available.

This newsletter is provided to all Saginaw County healthcare providers, hospitals, schools, local colleges, universities, urgent care facilities and local media centers.  
**If you would like to receive this newsletter by e-mail please submit your e-mail address to: [sellison@saginawcounty.com](mailto:sellison@saginawcounty.com)**

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