Tdap in Pregnancy And INH Shortage Information



Spring 2013 Issue 1





COMMUNICABLE DISEASENEWSLETTER

Tdap in Pregnancy

The guidelines of the Advisory Committee on Immunization Practices (ACIP) now recommend the administration of one dose of Tdap (Tetanus Toxoid, Reduced Diphtheria Toxoid, and Acellular Pertussis) vaccine to pregnant women during each pregnancy. Provisional case counts for pertussis in the United States for 2012 have surpassed the last peak year (2010) with 41,880 pertussis cases and 14 deaths in infants age less than 12 months. It is expected that administration of Tdap during pregnancy will yield the passage of maternal pertussis antibodies on to the baby. This will likely provide newborns with protection against pertussis until they are old enough to be vaccinated themselves. However, data suggests that maternal antibodies are shortlived; therefore, Tdap vaccination in one pregnancy will not provide antibody levels high enough to protect newborns during subsequent pregnancies. According to the recommendations, Tdap is to be administered irrespective of the patient's prior vaccination history. In addition, the vaccine may be administered at any time during pregnancy; however, the preference is for administration between 27 and 36 weeks gestation. If Tdap is not administered during pregnancy, it should be administered immediately postpartum.

For more information on Tdap vaccination during pregnancy, contact your primary care provider or the Saginaw County Department of Public Health's Immunization Program at (989)758-3840.

Reference:

MMWR. Updated Recommendations for Use of Tetanus Toxoid, Reduced Diphtheria Toxoid, and Acellular Pertussis Vaccine (Tdap) in Pregnant Women—Advisory Committee on Immunization Practices (ACIP), 2012. February 22, 2013; 62(07); 131-135.



ISONIAZID (INH) SHORTAGE

Isoniazid or INH is a mainline anti-bacterial drug used to treat tuberculosis in both the latent and active forms. Since late last year INH has been in short supply. The following recommendations are for use during this time of short supply.

Active Tuberculosis Disease (Cases or Suspects)

Client	Regimen(s)
Tuberculosis cases and/or suspect causes with clini-	Multi-drug regimen including INH, RIF, EMB and PZA
cal signs of disease	

Latent Tuberculosis Infection, Already Receiving Isoniazid Treatment

Client	Regimen(s)	
HIV(+)	INH daily to complete total of 9 months.	
All children <5 yrs.		
Other immune-suppressed	If completed ≤ 3 months INH, consider change to RIF	
Homeless	daily for 4 months. If completed \geq 3 months but \leq 6 months of INH, continue INH daily to complete total of	
Substance Abuse	6 months. If completed \geq 6 months INH, consider	
Recent contact to pulmonary case	treatment complete.	
Not identified with risk factors above and likely to be accessible for future treatment	If completed \leq 3 months INH, consider postponing treatment until adequate INH supply. If completed \geq 3 months but \leq 6 months INH, continue INH daily to complete total of 6 months. If completed \geq 6 months INH, consider treatment complete.	

Latent Tuberculosis Infection Not yet Receiving Isoniazid Treatment

Client	Regimen(s)
HIV (+)	INH daily to complete total of 9 months.
All children < 5 yrs.	
Other immune-suppressed	RIF daily for 4 months. If drug interactions preclude use of RIF, consider INH for 6 months.
Homeless	
Substance Abuse	
Recent contact to pulmonary case	
Not identified with risk factors above and likely to be accessible for future treatment	Consider postponing treatment until adequate INH supply. Maintain record of client info to follow-up for treatment when INH is available.

Communicable Disease

REPORTED FOR SAGINAW COUNTY

For the Quarter

01/01/2013-03/31/2013

Disease	No. Reported
AIDS, AGGREGATE	4
ANIMAL BITE	7
CHLAMYDIA (Genital)	304
CRYPTOSPORIDIOSIS	1
DENGUE FEVER	1
FLU LIKE DISEASE	6603
GASTROINTESTINAL ILLNESS	2490
GONORRHEA	49
HEAD LICE	225
HEPATITIS B ACUTE	1
HEPATITIS B CHRONIC	4
HEPATITIS C ACUTE	2
HEPATITIS C CHRONIC	39
HISTOPLASMOSIS	5
INFLUENZA	272
MENINGITIS-ASEPTIC	3
NOROVIRUS	1
PERTUSSIS	0
SALMONELLOSIS	3
STREP THROAT	547
STREPTOCOCCAL PNEUMONIA, INVASIVE	5
SYPHILLIS-EARLY LATENT	2
SYPHILLIS-LATE LATENT	1
TUBERCULOSIS	0



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Please visit our website at 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: kburlingame@saginawcounty.com

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