

The Pump Handle



"I had an interview with the Board of Guardians of St. James's parish, on the evening of Thursday, 7th September, and represented the above circumstances to them. In consequence of what I said, the handle of the pump was removed on the following day."

John Snow, 1855

August 2005 Topics

- West Nile Virus Update
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West Nile Virus Update

As of Aug. 30, 2005, 22 dead birds and 46 horse samples have been submitted for testing, with three horses and 12 dead birds testing positive for West Nile Virus (WNV). An additional 100 dead birds from across the state have been reported online. Five hundred and thirty-six sentinel chicken serums have been tested, with 24 positive samples identified.

Eight hundred and fifty-five human samples have been tested at the Division of Microbiology. There have been 48 positive human cases reported in North Dakota as of Aug. 30, 2005.

Counties reporting positive WNV activity include Barnes, Benson, Bowman, Burleigh, Cass, Dickey, Divide, Emmons, Grand Forks, Grant, McHenry, McIntosh, McKenzie, McLean, Mercer, Morton, Mountrail, Pembina, Rolette, Sargent, Sioux, Stutsman, Traill, Walsh, Ward and Williams.

For more information about WNV, county-specific numbers or to order free educational materials, visit the health department website at www.ndwnv.com.



Educational Materials for Influenza Available Online

Influenza season typically begins October 1. Every season, schools, workplaces, clinics, long term care facilities, etc., begin looking for education materials to be handed out or displayed at their place of business.

Influenza campaign materials are now available **free of charge** on the influenza website at www.ndflu.com. There is a button at the top labeled “Campaign Materials.” This will take you to the order form for both influenza and pneumonia materials. General education materials about hand washing or recommendations for schools, business, etc., are also available on this site. Click on the button at the top labeled “Fact Sheets and Education.”

Check these sites periodically. As new materials are developed, they will posted on the ndflu.com website.

For more information about influenza education materials, contact Tracy Miller (tkmiller@state.nd.us) or Molly Sander (msander@state.nd.us).



Mid-Year Rabies Report

As of Aug. 17, 2005, 24 animals have tested positive for rabies in North Dakota.

Animal Type	Number Positive*	
	2005†	2004
Bat	1	1
Cat	7	7
Cow	2	5
Dog	1	2
Horse	0	3
Skunk	13	34
Total	24	52

*Year-to-date data

†Provisional data

The Division of Microbiology provides free rabies testing on animals if human exposure to the animal has occurred. **An exposure is defined as a bite that breaks the skin or saliva that comes in contact with an open cut, sore or wound or to a mucous membrane such as the mouth, nose or eyes.** If there has been no human exposure, samples for animal rabies testing should be sent to the North Dakota Veterinary Diagnostic Laboratory at North Dakota State University.

Post-exposure prophylaxis (PEP) may be required for humans who experience an animal exposure. If the exposure involves a wild carnivorous animal or a bat that is unavailable to be tested, the person should receive PEP. Depending on the circumstances, PEP may be deferred if the animal is available for prompt testing.

If a person is exposed to a healthy dog, cat or ferret, the animal should be either euthanized and tested for rabies or evaluated by a veterinarian to confirm that it is healthy. The animal should be confined and observed daily for 10 days. If the animal becomes ill or there is a change in behavior during the 10-day isolation period, it should

be euthanized immediately and tested for rabies. The decision to initiate PEP should be based on the circumstances of the exposure and when rabies testing results will be available.

If there is no change in the animal's health during the 10-day confinement, which is verified by a veterinarian's evaluation at the end of the 10 days, the animal can be released and PEP does not need to be initiated or can be discontinued if it had been initiated.

If an unvaccinated dog, cat or ferret is exposed to a wild carnivorous animal or a bat, it should be euthanized immediately. **Rabies exposure can be reduced by properly vaccinating pets.**

An algorithm to help determine appropriate actions to follow when an exposure to an animal has occurred can be viewed at www.health.state.nd.us/disease/Rabies/RabiesPublications.htm.



Tdap Availability in North Dakota

The incidence of pertussis (whooping cough) in the United States more than doubled from 11,647 cases in 2003 to 25,827 cases in 2004. In North Dakota, 757 cases were reported in 2004 compared to seven in 2003. There have been 100 pertussis cases reported thus far in 2005. For more information on pertussis activity in North Dakota, visit the North Dakota Department of Health (NDDoH) Immunization Program website at www.health.state.nd.us/disease/Immunization/Pertussis/PertussisMain.htm.

The greatest burden of pertussis is on adolescents, who account for almost 50 percent of pertussis cases in North Dakota. Adolescents and adults are a primary source of the disease in vulnerable infants. Two new tetanus, diphtheria and acellular pertussis (Tdap) vaccines were approved by the Food and Drug Administration in 2005. The first, by GlaxoSmithKline, is Boosterix®; the second, by Sanofi-Pasteur, is Adacel™. Both vaccines are currently available for ordering from the manufacturers.

The Advisory Committee on Immunization Practices (ACIP) met in June to discuss recommendations for the use of Tdap vaccine. The following draft recommendations for the use of Tdap were made:

- Adolescents ages 11 to 12 should receive a single dose of Tdap instead of Td for booster immunization if they have previously completed the recommended childhood DTP/DTaP series and have not received Td.
- Adolescents ages 11 to 18 who received Td are encouraged to receive a single dose of Tdap to provide protection against pertussis if they have completed the recommended childhood DTP/DTaP series.
- Vaccine providers should administer Tdap (or Td) and meningococcal vaccine during the same visit if both vaccines are indicated and available.
- Recommendations for use of Tdap in special circumstances (outbreaks, pregnancy, tetanus prophylaxis, incomplete vaccination history of pertussis, shortage of Tdap) are still being developed.
- Adult and pregnancy recommendations will be discussed at the October ACIP meeting.

The NDDoH expects to receive funding for Tdap in early September. The NDDoH will notify providers when Tdap is available for ordering. Tdap from the NDDoH will be available only for Vaccines For Children (VFC) eligible children. To be eligible for the VFC program, the child must be younger than 18 and meet one of the following requirements:

- Be Native American
- Be covered by Medicaid
- Be underinsured
- Have no insurance

Providers should order private supplies of Tdap for adolescents with insurance.

For more information about Tdap, visit the CDC National Immunization Program website at www.cdc.gov/nip/vaccine/tdap/default.htm.

Contributing authors of The Pump Handle include Molly Sander, Julie Goplin, Tracy Miller and Kirby Kruger. For questions, suggestions or inquiries, or to be removed from the mailing list, please contact Julie Goplin of the Division of Disease Control at 701.238.2375 or by email at jgoplin@state.nd.us.

The pump handle picture in the title was obtained from the website www.ph.ucla.edu/epi/snow.html.



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