

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

January 2007 Topics

- Influenza Update
- Immunization Legislative Activities
- Second Day Care Meningococcal Case in Fargo, N.D.
- National Black HIV/AIDS Awareness Day



Influenza Update

As of Jan. 31, 2007, a total of 75 laboratory-identified influenza cases have been reported to the North Dakota Department of Health (NDDoH). The 22 counties with reported influenza activity include Barnes, Burleigh, Cass, Cavalier, Dickey, Dunn, Grand Forks, Grant, LaMoure, McLean, Mercer, Morton, Mountrail, Nelson, Oliver, Richland, Rolette, Stark, Steele, Traill, Ward and Williams.

Of the 75 reported cases, 88 percent were identified as type A (n=66), 8 percent as type B (n=6) and 4 percent unknown type (n=3). In addition, of the 66 influenza A cases, nine have been sub-typed; five have been identified as H1 and four as H3. There have been no influenza-associated pediatric deaths reported to the NDDoH so far this season.

The NDDoH wants to remind people that it is not too late to get the flu shot. Peak influenza activity has yet to take place in North Dakota – get vaccinated now for protection when peak activity arrives.

For more information about influenza or to order free educational materials, visit the NDDoH influenza website at www.ndflu.com.



Immunization Legislative Activities

Several immunization-related bills have been proposed this legislative session. Those that were passed by the House of Representatives will go to the Senate. Immunization-related bills include:

- **House Bill 1136** would add immunization requirements for pneumococcal disease, meningococcal disease, rotavirus and hepatitis A for entry into schools and day cares.
- **House Bill 1435** is similar to House Bill 1136 but was proposed by a representative. The bill would add the second dose of varicella vaccine and the meningococcal vaccine to the school and day-care requirements. It also adds appropriations of \$4.3 million for the NDDoH to continue to supply all childhood vaccinations in North Dakota for one year. If both bills pass, it is unknown at this time how House Bill 1435 and 1136 will be combined.
- **House Bill 1434** would establish a viral hepatitis program at the NDDoH, including testing and vaccination of individuals at high risk. The original bill was amended to include an appropriation of \$301,403 and one full-time equivalent (FTE) for the NDDoH.
- **House Bill 1471** would require the NDDoH to educate the public about human papillomavirus (HPV) and the availability of HPV vaccine. The bill also appropriates \$100,000 for an educational campaign.

The NDDoH has also requested appropriations for two full-time employees to assist in implementing the state health department's new vaccine supply policy. Please contact Molly Sander at 701.328.2378 with any questions regarding immunization-related legislation.



Second Day Care Meningococcal Case in Fargo, N.D

In January 2007, a child was diagnosed with meningococcal meningitis caused by the infectious and sometimes fatal bacteria *Neisseria meningitidis*. The child presented with high fever and petechial rash, was hospitalized and treated with intravenous rocephin. The child has since recovered and was discharged.

The child attended the same day care where a previous case of meningitis, an adult staff member who died, had been reported approximately six months before. One case was laboratory confirmed by culture and both were found to have the same strain of meningococcal, Group B. For more information about the previous case investigation, see the Pump Handle August 2006 archived issue at www.ndhealth.gov/Disease/Documents/pump%20handle/08-06.pdf. For the second time, all day-care staff and children attending the day care were notified to receive prophylaxis. Drugs that provide equally effective prophylactic treatment include rifampicin, ceftriaxone and ciprofloxacin. However, the bacteria cultured from the case reported in January was found to be resistant to ciprofloxacin; therefore, anyone who had received ciprofloxacin was notified to return to their health-care provider to receive an alternate prophylactic treatment.

Meningococcal meningitis spreads by direct contact and respiratory droplets from the nose and mouth of infected people. Some people carry the bacteria in their nasal passages but do not get sick, yet they can still spread the bacteria to others. Prophylactic antibiotics will clear this carrier state. Two meningococcal vaccines are available in the United States. Meningococcal conjugate vaccine (Menactra) is routinely recommended for adolescents ages 11 and 12, unvaccinated adolescents upon entry into high school and college freshmen living in dormitories. Meningococcal polysaccharide vaccine (Menomune) should be used for people at increased risk for meningococcal disease who are ages 2 through 10 and older than 55 or when

meningococcal conjugate vaccine is unavailable. Neither vaccine protects against Group B meningococcal disease.

The incubation period for meningococcal disease may range from one to 10 days, but usually occurs less than four days after exposure. The six-month time frame between the two cases associated at the same day care is too long to be considered a common, point source exposure. The NDDoH is currently working with the day-care provider and local public health officials to ensure all day-care staff and children have received appropriate prophylactic treatment. Information about the disease and prevention measures underway to control further exposure was mailed to the parents and/or guardians of the children who attend the day care.

For more information about meningococcal meningitis, visit www.ndhealth.gov/Disease/Documents/faqs/Meningococcal.pdf.



National Black HIV/AIDS Awareness Day

February 7, 2007, is National Black HIV/AIDS Awareness Day. For more information please visit www.cdc.gov/hiv/nbhaad.htm.

Contributing authors of The Pump Handle include Michelle Feist, Molly Sander, Kimberly Weis, 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 701.328.2375 or by email at jgoplin@nd.gov.

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



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