

Communicable Disease Service Mission Statement

Our mission is to prevent communicable disease among all citizens of New Jersey, and to promote the knowledge and use of healthy lifestyles to maximize the health and well-being of New Jerseyans.

We will accomplish our mission through our leadership, collaborative partnerships, and advocacy for communicable disease surveillance, research, education, treatment, prevention and control.

Chris Christie, Governor Kim Guadagno, Lt. Governor Mary E. O'Dowd, MPH Commissioner

COMMUNICABLE DISEASE SERVICE

Christina Tan, MD, MPH State Epidemiologist/ Assistant Commissioner

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RX: Get Your Flu Shot to Protect Yourself and Your Patients

nfluenza (the flu) can be a serious disease that can lead to hospitalization and sometimes even death. Anyone can get very sick from the flu, including people who are otherwise healthy. The Centers for Disease Control and Prevention (CDC) recommends an annual flu vaccine as the first and best way to protect against influenza for all people six months of age and older. This recommendation has been in place since February 24, 2010 when the CDC's Advisory Committee on Immunization Practices (ACIP) voted for "universal" flu vaccination in the United States to expand protection against flu to more people.

While everyone should get a flu vaccine this season, it's especially important for some people to get vaccinated. Older adults, pregnant women, very young children and people with certain long-term medical conditions are at high risk from serious complications from the flu. These medical conditions include chronic lung diseases, such as asthma and chronic obstructive pulmonary disease (COPD), diabetes, heart disease, and neurologic conditions.

Since health-care workers may care for or live with people at high risk for influenza-related complications, it is especially important for them to get



vaccinated annually. To protect health-care personnel (HCP) and their patients, the ACIP recommends that all HCP be vaccinated against influenza during each influenza season. To estimate influenza vaccination coverage among HCP during the 2012–13 season, CDC conducted a voluntary survey of 1,944 HCP during April 1–16, 2013. Overall, 72.0% of HCP reported having had an influenza vaccination for the 2012-13 season, an increase from 66.9% vaccination coverage during the 2011–12 season. By occupation type, coverage was 92.3% among physicians, 89.1% among pharmacists, 88.5% among nurse practitioners/physician assistants, and 84.8% among nurses. By occupational setting, vaccination coverage was highest among hospital-based HCP (83.1%) and was lowest among HCP







Get more information at <u>http://nj.gov/health/cd/ha</u>ndwashing.shtml.

The NJDOH Communicable Disease Service includes:

Infectious and Zoonotic Disease Program (IZDP): 609-826-5964

Vaccine Preventable Disease Program (VPDP): 609-826-4860

We're on the Web! <u>www.nj.gov/health/cd</u>

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New Regionalization to Streamline Epidemiology Services in New Jersey

ederal funding from Public Health Emergency Preparedness (PHEP) funds has supported several positions, including epidemiologists, in the LINCS agencies designed to support public health response. A number of PHEP capability evaluations indicate that epidemiology defined by this grant is critical and needs to be maintained. However, continued decreases in PHEP funding make the current system of staffing unsustainable without change. A mechanism needed to be developed to maintain this resource and sustain this valued capacity long term.

The New Jersey Department of Health (NJDOH) drafted a plan to ensure adequate epidemiology coverage for the state. This plan includes removal of support for LINCS epidemiologists in PHEP funding for 2014 and seeks to:

• Reduce the number of LINCS epidemiologists from 21 to 11

- Move positions from LINCS agency to NJDOH
- Establish MOA with Rutgers University to hire new staff

A series of meetings and conference calls with public health stakeholders have been scheduled throughout the months of December and January to explain this plan, the roles and responsibilities of the new NJDOH staff, and to address questions and concerns.

While NJDOH acknowledges that this will be an adjustment for the public health workforce, it has identified some clear benefits of this approach including the ability to better foster training and mentorship to create a more consistent approach to communicable disease epidemiology, provide stable and consistent access to epidemiologic services for all local health departments, and ensure assets can be appropriately deployed as needed.



Contact Suzanne Miro at suzanne.miro@doh.state.nj.us



Scan the QR code to see what's available.







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Don't Get Blindsided by Vaccine Preventable Diseases—**Get Your Shots**

Super Bowl XLVIII will take place on February 2, 2014 at the MetLife Stadium in East Rutherford, New Jersey (NJ). This event is expected to draw over 82,000 attendees from all over the United States and even world-wide. The New Jersey Department of Health (NJDOH) would like to take this opportunity to remind everyone that



MetLife Stadium

when large numbers of individuals gather in close settings, such as sporting events, there is an increased potential for the spread of infectious diseases. All athletes, spectators, trainers, and medical support personnel should make sure their immunizations are up-to-date to prevent illness and outbreaks of vaccine-preventable diseases.

Over the years, vaccines have prevented countless cases of infectious diseases and saved millions of lives. Due to the success of immunizations, the public sometimes questions the necessity of vaccination since we rarely see the dire consequences of these diseases today. However, recent outbreaks of vaccine-preventable diseases serve as a reminder of the importance of up-to-date immunizations.

Although measles was declared eliminated in the U.S. in the year 2000, it is periodically imported by international travelers returning from, or visiting from, other countries including countries in Europe and Southeast Asia. During 2001-2011, the median annual number of measles cases in the U.S. was 60. Since elimination, the highest number of U.S. cases were reported in 2008 (140 cases) and 2011 (220 cases). During January 1 – August 24, 2013, a total of 159 measles cases were reported. Most cases have been among individuals who were unvaccinated or had unknown vaccination status.

More recently, New York City experienced a measles outbreak in a Brooklyn community which began when an unvaccinated adolescent returned to New York City from London while infectious with measles. New Jersey had four reported measles cases in 2011, two cases were reported in 2012.

The Super Bowl, with its large crowds of tourists and visitors, is an event that is







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Rx, continued from page 1

at long-term care facilities (LTCF) (58.9%). Vaccination coverage increased among all occupational settings over the last three flu seasons except for coverage in LTCF.

Influenza vaccination of HCP in LTCF is extremely important given that influenza vaccine effectiveness is generally lowest in the elderly, making vaccination of close contacts even more critical. Multiple studies have demonstrated health benefit to patients with vaccination of HCP in LTCF, including reduced risk for death. More efforts are needed to implement evidence-based strategies to increase influenza vaccination coverage among HCP working in LTCF. In response to the CDC's voluntary survey, a total of 10.1% of LTCF HCP reported that their facility made vaccine available at no cost for >1 day and 30.5% reported that their facility neither required nor promoted vaccination. In contrast, 58.0% of hospital HCP reported that their facility made vaccine available at no cost for >1 day and 19.4% reported their facility neither promoted nor required vaccination. These results indicate that a comprehensive intervention strategy that includes education and promotion to encourage vaccination along with easy access to vaccination at no cost on multiple days might increase HCP vaccination coverage.

Widespread implementation of comprehensive influenza vaccination strategies that focus on improving access is needed to improve HCP vaccination coverage. Influenza

vaccination of HCP in all health-care settings might be increased by providing 1) HCP with information on vaccination benefits and risks for themselves and their patients, 2) vaccinations in the workplace at convenient locations and times, and 3) influenza vaccinations at no cost. The role that you and other health care workers play in helping prevent influenza-related illness and death-especially in high-risk patients—is invaluable. By setting a good example and spreading flu facts (instead of the flu itself) among your colleagues and patients, you have the opportunity to save even more lives.

Resources:

CDC

Influenza Vaccination Information for Healthcare Workers http://www.cdc.gov/flu/healthcareworke rs.htm

National Adult and Influenza Immunization Summit website contains resources for best practices for increasing influenza vaccination rates among healthcare workers. http://www.preventinfluenza.org/profs

workers.asp

Source:

Influenza Vaccination Coverage Among Health-Care Personnel — United States, 2012–13 Influenza Season. MMWR Morb Mortal Wkly Rep 2013;62(38);781-786



Winter 2014



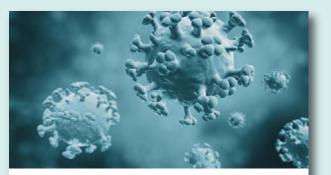
lt is cold and flu season.

Be sure to promote good handwashing among the public and health care providers! If you would like to order free handwashing posters, please contact Suzanne Miro at suzanne.miro@doh.state.nj.us.



NEW!

Communicable Disease Outbreak Manual Available on the NJ Learning Management Network at: <u>http://njlmn2.rutgers.edu/</u> <u>exchange/njaccho-outbreak-inv</u> <u>estigation-manual</u>



COMMUNICABLE DISEASE OUTBREAK MANUAL New Jersey's Public Health Response





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Get Your Shots, continued from page 3

not immune from the possibility of measles exposures. In 2012, just days before the Super Bowl in Indianapolis, two people with measles visited the Super Bowl Village while infectious, potentially exposing thousands of people to the virus. There were no cases of measles directly attributed to this visit. However, during the same time period, an outbreak of measles in the Indianapolis area resulted in 16 confirmed measles cases. These cases and outbreaks demonstrate that unvaccinated people place themselves and their communities at risk for measles. High vaccination coverage is important to prevent the spread of measles after being introduced by those residing in or visiting other countries.

Possible disease transmission is not limited to measles. NJ has also experienced outbreaks of mumps and pertussis in recent years. The Super Bowl is taking place in February, which is also typically the peak of influenza season.

Flu seasons are unpredictable and can be severe. Over a period of 30 years,

between 1976 and 2006, estimates of flu-associated deaths in the U.S. range from a low of about 3,000 to a high of about 49,000 people. Pregnant women, young children, older people, and people with certain chronic medical conditions like asthma, diabetes and heart disease are at increased risk of serious flu-related complications, so getting a yearly flu vaccine is especially important for them. Everyone six months of age and older is recommended to get the 2013-2014 flu vaccine, with rare exceptions. NJ residents can visit http://nj.gov/health/ flu/findflushot.shtml to find flu clinics near them.

Increases in vaccine preventable diseases demonstrate that unless all vaccine preventable diseases are eliminated, it is important to keep immunizing. Even if there are only a few cases of disease today, if we take away the protection provided by vaccination, more and more people will be infected—spreading disease to others and eliminating the progress we have made over the years. Intercept these diseases, get vaccinated. Make vaccines the first line of defense!









New Safe Injection Practices Infographic Available! The Safe Injection Practices Coalition (SIPC), a national group led by the Centers for Disease Control and Prevention (CDC), created a new interactive infographic to promote safe injection practices specific to single-use and multi-use vials among health care professionals. The

In The NEWS



material identifies various settings and different injection safety concerns and issues in each setting.

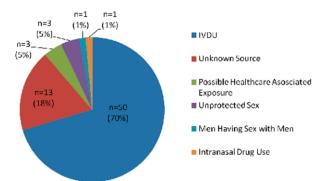
Health professionals are encouraged to promote injection safety to others. And remember, we are all health care consumers. Make sure your health care providers follow safe injection practices, too! To view, go to: <u>http://www.one</u> <u>andonlycampaign.org/content/single-dose-and-multi-dose-vial-infographic</u>

"New Jersey Viral Hepatitis Resource" Guide Now Updated and Posted on the NJDOH Website

This resource was developed for patients and providers to locate free or low-cost vaccination for hepatitis A and B, find clinical resources and other local, state and federal resources.

Follow this link to the resource guide: http://nj.gov/health/cd/hepatitis_viral/index.shtml

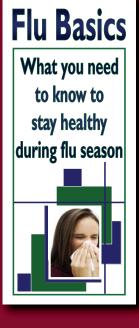
Hepatitis C Infection Among Injection Drug Users: An Emerging Trend There is an emerging trend among injection drug users (IDU) or intravenous drug users (IVDU) and the increase of hepatitis C across the country. Massachusetts and Indiana have analyzed surveillance data to uncover



increased rates among IDU/IVDUs. New Jersey's Communicable Disease Reporting and Surveillance System (CDRSS), also reveals similar findings.

The chart shows that of the 71 reported cases of acute hepatitis C in 2012, the exposure risk factors for IDU/IVDU are the highest category. Injection drug use is recognized as a major vehicle for disease transmission of the hepatitis C virus.

This shows that New Jersey has opportunities to work with addictions and other health professionals to prevent disease transmission. As a result, NJDOH has partnered with the NJ Department of Human Services' Division of Addictions to offer education workshops for addictions professionals to educate them about viral hepatitis prevention, transmission and client resources in 2014.



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NJ Communi-CABLE Page 8

Continuing Nursing Education Credits

We are pleased to announce that the New Jersey State Nurses Association has approved the Communicable Disease Service as a provider of continuing nursing education credits. The Communicable Disease Service offers educational activities throughout the year for public health nurses in NJ. These programs are designed to increase knowledge about communicable disease, epidemiology, environmental and occupational health. The provider unit also works toward advancing the practice of public health nurses by promoting their proficiency in the control of communicable diseases and emerging infectious diseases.

CDS Staff Member Receives Award

Suzanne Miro, Senior Health Communication Specialist for the NJDOH Communicable Disease

Service, was honored by the New Jersey Society for Public Health Education (NJSOPHE) with the "2013 Health Educator of the Year Award." The awards were presented on December 5 as part of the NJSOPHE annual meeting and conference.



Robin Vlamis (right), NJSOPHE Awards Committee Chair, presents Suzanne Miro (left) with the Health Educator of the Year award.

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