

The Public Health View

A publication of the South Health District

Winter 2006
Newsletter

GlaxoSmithKline Child Health Recognition Awards

Members of the local Children's Medical Services staff and a Valdosta area pediatrician are being honored with The Public Health Staff Recognition Award given by the GlaxoSmithKline Child Health Recognition Awards. The award is given to full-time or part-time employees of local health departments in recognition of outstanding service in preventive health activities in their local communities. This year's recipients are Patti Curington, RN, Sandee Simmons, RN and Alan Alvarado, MD.

The awards are designed to showcase exceptional and innovative programs that improve the lives of Georgia's children. With childhood asthma on the rise in Lowndes County, public health staff recognized that additional services were needed to combat the problem, which had been largely left to overworked pediatricians and school personnel without specialized training. In 2000, a new position was added by the Lowndes County Board of Health to develop an asthma educational and case management program for children, families, school nurses, teachers and day care personnel. In five years, more than 1,300 people have been trained in asthma management, with the result being that hospitalizations declined dramatically.

Each year, the asthma program has expanded its scope, adding entire counties, reaching out to pediatricians and teachers, sponsoring Asthma Day Camps and teaching more and more families and children how to better manage their asthma and be more productive students and healthier kids. The three recipients have worked together to ensure that this successful program continues to demonstrate that education about the disease, linkage with physicians to develop individualized asthma action plans and follow up of high risk children can have a major positive impact in children's lives.

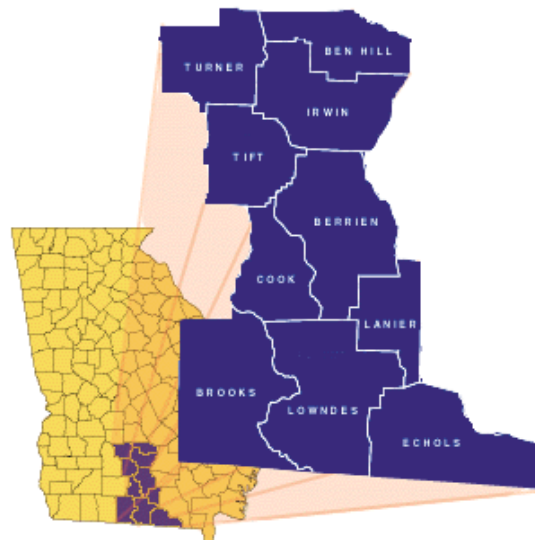
The GlaxoSmithKline Child Health Recognition Awards were established in Georgia in 1998 to honor local health departments, public health staff and individual citizens for their dedication to improving child health. A committee of health care professionals chosen by the Task Force for Child Survival and Development selects the award recipients. The Task Force is an Atlanta based nonprofit public health organization that focuses on both international and domestic health and human development.

For more information on the asthma educational programs within the South Health District call Children's Medical Services at 229.245.4310 or the South Health District toll free at 866.801.5360.



(From L – R Patti Curington, RN, Alan Alvarado, MD, Sandee Simmons, RN)

Source: Jennifer Steedley, Public Information Officer



South Health District, District 8-1

MedBank of Valdosta

A Program of the Lowndes County Partnership for Health

MedBank of Valdosta

Total Number of Referrals:
870

Current Active
Participants: 609

Retail Value of Drugs
Referred: \$1,625,698

Contact Information

100 Jackson Street
Valdosta, GA 31601

(229) 245-0230

medbank1@bellsouth.net

MedBank is a program offered by the Lowndes County Partnership for Health that helps patients with financial needs apply to drug manufacturers for free or low cost medication. Most drug companies provide free or low cost medication to patients with financial needs who have exhausted all other means of assistance, have no prescription insurance and do not receive assistance with their medication from any other public or private program (discount drug cards do not disqualify a patient from these programs).

MedBank currently works with 108 pharmaceutical companies.

Specific qualifications for assistance, application forms and drug refill processes are established by each drug company and vary drug company to drug company. Each person who applies must be able to prove that they meet the qualifications set forth by the drug company.

The purpose of the MedBank is only to help a patient apply. Due to a small staff, MedBank is not available to call the drug companies to make inquiries for patients after applying; however, each patient will be given a phone number list for drug companies during an interview.

Physicians initially refer a patient to MedBank in Valdosta. A physician must have privileges at South Georgia Medical Center or Smith Northview Hospital in Valdosta. If you are a physician that does not currently participate in the MedBank program and are interested, please call John Sparks at 229.245.0020.

For more information on MedBank or the Lowndes County Partnership for Health, please visit www.lcpfh.org.



Expanded Influenza Vaccinations for Children

The Advisory Committee on Immunization Practices (ACIP) to the Centers for Disease Control and Prevention (CDC) voted to recommend an expansion of routine influenza vaccination for children on February 23, 2006. Before the expansion, the recommended influenza vaccination age was from 6 months to 23 months old. The new recommendation expands that recommendation to also cover children from 2 years up to 5 years.

The committee also voted to recommend expanding routine vaccination for household

contacts (anyone who spends a significant amount of time in the home) and out-of-home caregivers of children 24-59 months old. This new recommendation takes into consideration a broader view of the burden of illness than the earlier recommendation for vaccination of children, which was based upon the prevention of hospitalization among children 6 months to 23 months old. "This is an important recommendation to help reduce the overall burden of influenza among children," said Dr. Anne Schuchat, director of

CDC's National Immunization Program. "Vaccination of children 24 to 59 months old will extend protection from influenza and its complications to all children in this age group, not just those identified as those with the highest risk of complications from influenza." The ACIP will continue to review new vaccination strategies for improving the prevention and control of influenza, including the possibility of expanding routine influenza vaccination recommendations to the entire U.S. population.

Influenza vaccine manufacturers have indicated that they plan to produce between 100 million and 120 million doses of influenza vaccine for the 2006-07 influenza season.

Recommendations of the ACIP become recommendations of CDC once they are accepted by the director of CDC and the Secretary of Health and Human Services and are published in the Morbidity and Mortality Weekly Report.

Source: www.cdc.gov

South Health District Plans Pandemic Flu Summit

What will happen if pandemic or avian influenza infects residents in Southwest Georgia? Will I still be able to go out in public? Will I have to shut down my office? I just don't know how to prepare! To encourage the District 8-1 community to begin preparing for pandemic influenza, South Health District will host a Pandemic Flu Summit in April and May.

South Health District has been working tirelessly to plan for the threat of pandemic and/or avian influenza. It is vital for members of the community to also prepare for this threat, in order to be prepared if and when it comes to Southwest Georgia. The Pandemic Flu Summit has been scheduled for April 27, 2006 at the UGA Tifton Campus Conference Center in Tifton and on May

11, 2006 at the VSU University Center in Valdosta. There will be three 2 hour sessions for healthcare providers, nursing homes, funeral homes, schools, media, faith based communities, business communities and public safety. To sign up for the Pandemic Flu Summit in your area, please contact Courtney Sheeley at 229.245.6436 or cdsheelley@gdph.state.ga.us.

**April 27 @ Tifton Campus
Conference Center in Tifton**
**for counties: Ben Hill,
Berrien, Irwin, Tift & Turner**

**May 11 @ VSU University
Center in Valdosta**
**for counties: Brooks, Cook,
Echols, Lanier & Lowndes**

Start looking for your invitation in the mail to the Pandemic Flu Summit closer to April!

National Poison Prevention Week March 19-25, 2006

Poisoning continues to be one of the leading causes of unintentional injury and death in the United States. The number of poisoning related deaths have dramatically decreased from several hundred per year to less than 50 per year. This is attributed in part to child-resistant packaging and partly to the life-saving services of poison centers. Although the number of deaths have decreased, nonfatal poisonings remain a significant problem. In 2005, the Georgia Poison Center (GPC) received and advised on a total of 116,763 poison exposure calls. It is estimated that over 150,000 men, women and children are poisoned in Georgia each year.

Besides being a leading cause of injury, poisoning is also a major problem in terms of health care costs. Studies suggest that nearly 75% of the poisonings reported to poison centers can be handled at home safely by telephone consultation with a poison center. This eliminates unnecessary emergency room visits, ambulance use, hospital admissions and treatment delays. Studies suggest that every dollar spent on a poison center saves \$7 in unnecessary health care expenditures.

The GPC is certified by the American Association of Poison Control Centers (AAPCC) and is the only poison center in Georgia. The

Center is located at the Hughes Spalding Children's Hospital of the Grady Health System and operates under the medical supervision of the Department of Pediatrics, Emory University School of Medicine. The GPC is also the official statewide resource for treatment advice and prevention information regarding rabies and animal bites. This service is being provided in collaboration with the Georgia Department of Human Resources, Division of Public Health, Epidemiology and Prevention Branch.

For information on activities for National Poison Prevention Week, call 404.616.9235 or visit www.gpc.dhr.georgia.gov.

Source: Georgia Poison Center



Georgia Poison Center

Poison Emergency:
Outside of Metro Atlanta
1.800.222.1222
Inside of Metro Atlanta
404.616.9000
TDD
404.616.9287

Featured Topic:

Harmonized Childhood and Adolescent Immunization Schedule, 2006

The Advisory Committee on Immunization Practices (ACIP) periodically reviews the recommended childhood and adolescent immunization schedule to ensure that the schedule is current with changes in vaccine formulations and reflects revised recommendations for the use of licensed vaccines, including those newly licensed. The recommendations and format of the childhood and adolescent immunization schedule and catch-up schedule for January-December 2006 were approved by ACIP, The American Academy of Pediatrics (AAP), and the American Academy of Family Physicians (AAFP).

The changes to the previous childhood and adolescent immunization schedule, published January 2005, are as follows:

- The importance of the hepatitis B vaccine (HepB) birth dose has been emphasized. Vaccination of infants born to hepatitis B surface antigen (HBsAg)-negative mothers can be delayed in rare circumstances, but only if a physician's order to withhold the vaccine and a copy of the mother's original HBsAg-negative laboratory report are documented in the infant's medical record. Administering four doses of HepB is permissible (e.g., when combination vaccines are administered after the birth dose); however, if monovalent HepB is used, a dose at age 4 months is not needed. For infants born to HBsAg-positive mothers, testing for HBsAg and antibody to HBsAg after completion months (generally as the next well-child visit after completion of the vaccine series.)
- A new tetanus toxoid, reduced diphtheria toxoid and acellular pertussis vaccine recommended by ACIP for adolescents (Tdap adolescent preparation) was approved by the Food and Drug Administration (FDA) on May 5, 2005, for use in the United States. Tdap is recommended for adolescents aged 11-12 years who have completed the recommended childhood diphtheria and tetanus toxoids and pertussis/diphtheria and tetanus toxoids and acellular pertussis (DTP/DTaP) vaccination series and have not received a tetanus and diphtheria toxoids (Td) booster dose. Adolescents aged 13-18 years who missed the age 11-12 year Td/Tdap booster dose should also receive a single dose of Tdap if they have completed the recommended childhood DTP/DTaP vaccination series. Subsequent Td boosters are recommended every 10 years.
- Meningococcal conjugate vaccine (MCV4), approved by FDA on January 14, 2005, should be administered to all children at age 11-12 years as well as to unvaccinated adolescents at high school entry (age 15 years). Other adolescents who wish to decrease their risk for meningococcal disease may also be vaccinated. All college freshmen living in dormitories should also be vaccinated with MCV4 or meningococcal polysaccharide vaccine (MPSV4). For prevention of invasive meningococcal disease, vaccination with MPSV4 for children aged 2-10 years and with MCV4 for older children in certain high-risk groups is recommended.
- Hepatitis A vaccine is now universally recommended for all children at age 1 year (12-23 months). The 2 doses in the series should be administered at least 6 months apart.
- The catch-up schedule for persons aged 7-18 years has been changed for Td; Tdap may be substituted for any dose in a primary catch-up series or as a booster if age appropriate for Tdap. A 5-year interval from the last Td dose is encouraged when Tdap is used as a booster dose.
- For information on the influenza vaccine, please see page 2.

Source: www.cdc.gov

Recommended Childhood and Adolescent Immunization Schedule UNITED STATES • 2006

Age	1	2	4	6	12	15	18	24	4-6 years	11-12 years	13-14 years	15 years	16-18 years
Hepatitis B*	HepB	HepB	HepB†	HepB†	HepB								
Tetanus, Pertussis, Diphtheria, Polysaccharide Hib	DTaP	DTaP	DTaP	DTaP	DTaP				DTaP	Tdap			Tdap
Inactivated Poliovirus	IPV	IPV			IPV				IPV				
Meningococcal													
Measles, Mumps, Rubella*													
Varicella*													
Meningococcal													
Pneumococcal													
Influenza*													
Hepatitis A*													

This schedule indicates the recommended ages for routine administration of currently licensed childhood vaccines, as of December 1, 2005, for children through age 18 years. Any dose not given at the recommended age should be administered at any subsequent visit when indicated and feasible.

*Indicates age groups that warrant special effort to administer these vaccines and promptly administered. Additional vaccines may be indicated and recommended during the year. Licensed combination vaccines may be used whenever appropriate. The combination of vaccines may be used whenever the components of the combination are indicated and other components of the vaccine are not contraindicated and if approved by the Food and Drug Administration for that use of the vaccine. Providers should consult the respective ACP statement for detailed recommendations. Clinically significant adverse events that follow immunization should be reported to the Vaccine Adverse Event Reporting System (VAERS). Guidance about VAERS and completing a VAERS form is available at www.vaers.hhs.gov or by telephone, 800-832-7862.

†Range of recommended ages. ‡11-12 year-old adolescent. §For details, see REVERSE SIDE.

More information regarding immunization can be found at www.cdc.gov and www.aap.org.
800-CDC-INFO
1-800-232-4636

Keep track of your child's immunizations with the CDC Childhood Immunization Scheduler.
www.cdc.gov/ncidod/diseases/zoonotic/dx/immz/scheduler.htm

Have you reported a notifiable disease lately?

How to report:

- Call your local health department.
- Call the district health office at 229.333.5290.
- Mail form 3095 to:
South Health District
Confidential: Notifiable Disease
PO Box 5147
Valdosta, GA 31603
- Use SendSS (State Electronic Notifiable Disease Surveillance System) at <https://sendss.state.ga.us>
For more information on SendSS,
please contact Courtney Sheeley at
229.245.6436 or cdsheeley@gdph.state.ga.us

The Public Health View

To subscribe:

- Call 229.245.6436 to receive via mail.
- Email cdsheeley@gdph.state.ga.us to receive electronically.

To provide suggestions, comments, or ideas for the Spring 2006 issue, please contact:

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