



Immunizations

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THE SHOT LINE

Limited Vaccine Supply



Until further notice, administration of meningococcal conjugate vaccine (MCV4) to persons 11-12 years should be deferred, according to the Centers for Disease Control and Prevention's (CDC) Morbidity and Mortality Weekly Report released on May 19, 2006. The vaccine manufacturer (Sanofi Pasteur) anticipates that MCV4 demand will outpace supply at least through summer 2006.

Although MCV4 (Menactra) is preferable to meningococcal polysaccharide vaccine (MPSV4 or Menomune), MPSV4 is highly effective in preventing meningococcal disease caused by serogroups A, C, Y, and W-135, particularly in persons such as travelers who have brief risk for meningococcal disease. Although availability of MPSV4 may also be limited, either vaccine should be considered for appropriate age groups with increased risk for meningococcal disease. Persons at increased risk include military recruits, travelers to a part of the world where meningococcal disease is common, microbiologists who are routinely exposed to meningococcal bacteria, anyone who has a damaged spleen or anyone who has had their spleen removed, anyone with an immune disorder, and anyone exposed during a meningitis outbreak.

Immunization Update 2006

August 10, 2006 • 10:00 AM to 12:30 PM

This live satellite broadcast will provide up-to-date information on the rapidly changing field of immunization. Anticipated topics include influenza vaccine, pertussis vaccine for adolescents and adults, revised recommendations for hepatitis A vaccination of children and the new vaccines for rotavirus and herpes zoster. Information about human papillomavirus (HPV) vaccine may also be included. The broadcast will feature a live question-and-answer session in which participants nationwide can interact with the course instructors via toll-free telephone lines.

Target Audience: Physicians, nurses, nurse practitioners, physician assistants, medical assistants, pharmacists, health educators and their colleagues who either administer vaccines or set policy for their offices, clinics, communicable disease, or infection control programs, both private and public healthcare providers, including pediatricians, family practice specialists, residents, and medical and nursing students.

Central District Health Department invites participants to view this broadcast live at its main office at 707 N. Armstrong in Boise. The presentation is also available by webcast. For more information, please call Teresa Phillips, Medical Provider Liaison, 327-8518 or visit our website at www.cdhd.idaho.gov.

Whom To Contact:

For medical questions about vaccines for children (VFC) (schedules, updates, vaccine storage and handling, etc. please contact:

Teresa Phillips, LPN
Medical Provider Liaison
327-8518
tphillip@cdhd.idaho.gov

For user support & training of IRIS; how IRIS can benefit your clinic practice or daycare; or to schedule a demonstration of IRIS, please contact:

Leanna Davis
Registry Provider Liaison
869-9118
ldavis@cdhd.idaho.gov

For general immunization / registry questions or concerns, please contact:

Cindy Howarth, RN
Immunization Program Manager
327-8524
chowarth@cdhd.idaho.gov

Teresa's Corner

2006 continues to be a very busy year for providers and staff with the addition of two new vaccines. Tdap and Menactra became available for ordering on May 1, 2006 through the Idaho Immunization Program's (IIP) Vaccine For Children (VFC) Program. The addition of any new vaccines brings a period of adjustment for staff and, although it can be confusing and frustrating at times, a few quick resources will help simplify the implementation of new vaccines into the already complicated immunization schedule.



Teresa Phillips

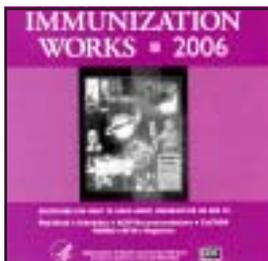
Meningococcal conjugate vaccine (Menactra/MCV4) for persons 11-55 years

- Administer a single 0.5ml dose of Menactra Intramuscularly (IM)
- Defer all children 11-12 years of age until further notice
- All adolescents at high school entry (age 15 years)
- College freshman living in dorms
- Anyone 11-55 years of age in a high risk group (travelers or persons living in a country where meningococcal disease is common, anyone with a damaged spleen or whose spleen has been removed, anyone with an immune system disorder, or anyone who has exposure to meningitis)

Tetanus Diphtheria and acellular Pertussis

- Administer a single 0.5 ml dose of Tdap intramuscularly (IM)
- Adolescents aged 11-12 years needing a Td booster
- Adolescents aged 13-18 years who missed the age 11-12 year Td/Tdap booster
- Adolescents aged 11-18 years who received a Td rather than a Tdap are encouraged to receive a single dose of Tdap to protect them against pertussis

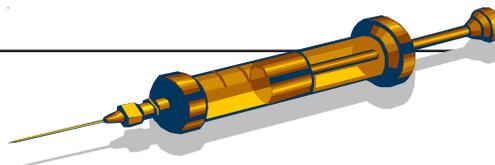
For immediate answers to your urgent vaccine questions, call me on the SHOT LINE at 321-BABY.



Immunization Works 2006 CD:

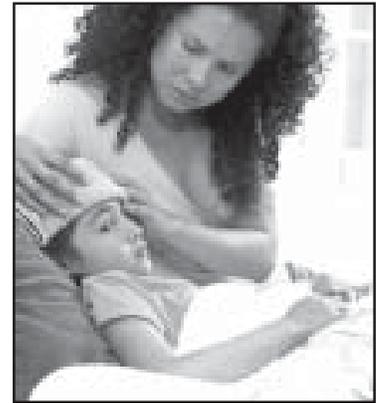
I am pleased to announce that Central District Health Department (CDHD) will be providing each of the Vaccine For Children (VFC) provider offices with a copy of the Immunization Works 2006 CD in late June. The Centers for Disease Control and Prevention created this great resource CD to aid in improving immunization practices throughout the United States; it's everything you want to know about immunizations on one CD. Keep your eye on the mailbox!

Watch Four-Part VPD Broadcast: It is not too late to watch CDC's annual four-part broadcast, Epidemiology and Prevention of Vaccine-Preventable Diseases. The broadcast is now available in two formats; internet-based program or DVD. The Internet version can be found at <http://www.phppo.cdc.gov/PHTN/webcast/epv06/default.asp>. The DVD can be ordered using the online order form found at <http://www.cdc.gov/nip/publications/default.htm>. The four-part series is the last item listed on the "CDC Online Order Form."



Focus On Immunizations Mumps Outbreak In Midwest

The Centers for Disease Control and Prevention (CDC) and state and local health departments continue to investigate an outbreak of mumps that began in Iowa in December 2005. Cases of mumps are reportable through the National Notifiable Diseases Surveillance System (NNDSS). NNDSS reports are transmitted electronically to the CDC each week and include information on individual cases such as age, sex, date of symptom onset, vaccination status, and complications of illness. Between January 1, 2006 and May 2, 2006, 2597 mumps cases were reported from 11 states including Iowa, Illinois, Kansas, Missouri, Nebraska, Pennsylvania, South Dakota, Wisconsin, Colorado, Minnesota, and Mississippi. The majority of cases are occurring among persons 18-25 years of age.



The principal strategy to prevent mumps is to achieve and maintain high immunization levels. The Advisory Committee on Immunization Practices (ACIP) recommends that all preschool-aged children 12 months and older receive one dose of measles-mumps-rubella vaccine (MMR) and all school-aged children receive two doses of MMR, and to ensure that all adults have evidence of immunity against mumps. Two doses of mumps vaccine are more effective than a single dose. Consequently, during outbreaks and for at-risk populations, ensuring high vaccination coverage with two doses is encouraged. For example, health care workers may be at increased risk of acquiring mumps and transmitting to patients and thus should receive two doses of MMR vaccine or provide proof of immunity. Since vaccination is the cornerstone of mumps prevention, public and private health entities concerned about spread of mumps in a population can review the vaccination status of populations of interest and work to address gaps in vaccination.

Idaho has had only one reported case of mumps in 2006, but providers should be familiar with information on the disease, the vaccines to prevent it and recommendations on stopping its spread. What follows are links to useful websites and articles about mumps.

Additional information on mumps and the prevention and control of mumps outbreaks, including vaccination, can be found at the following website:

<http://www.cdc.gov/nip/diseases/mumps/default.htm>

New Adolescent Vaccine Fact Sheet:

CDC has developed a new adolescent vaccine fact sheet that provides information about the five vaccines recommended for adolescents (Tdap, MCV4, Hepatitis B, Varicella and MMR). The fact sheet can be found on CDC's website at: <http://www.cdc.gov/nip/publications/default.htm#adol>.

New HPV Fact Sheet: CDC has developed a new Human Papillomavirus Vaccine (HPV) fact sheet for the general public that provides information about HPV, and its link to cervical cancer. The FDA announced Thursday, June 8th, 2006 that it has approved the first vaccine designed to prevent cervical cancer. The vaccine will be delivered through a series of three injections over a six-month period. The fact sheet can be found on CDC's HPV website at: <http://www.cdc.gov/std/HPV/STDFact-HPV.htm>.

For IRIS access, questions, or technical assistance, please email Leanna Davis at ldavis@cdhd.idaho.gov or give her a call at 869-9118. Thank you!





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 Immunizations
 707 N. Armstrong Pl.
 Boise, ID 83704-0825

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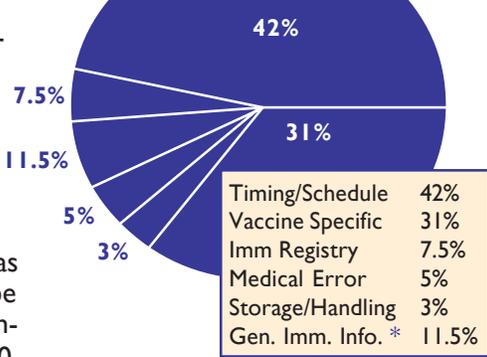
Shot Line Popularity Grows

The SHOT LINE continues to grow in popularity and many providers are utilizing the immunization resource line for immediate answers to their immunization questions. Central District Health Department (CDHD) is pleased to provide this service for medical providers, childcare providers, and school nurses.

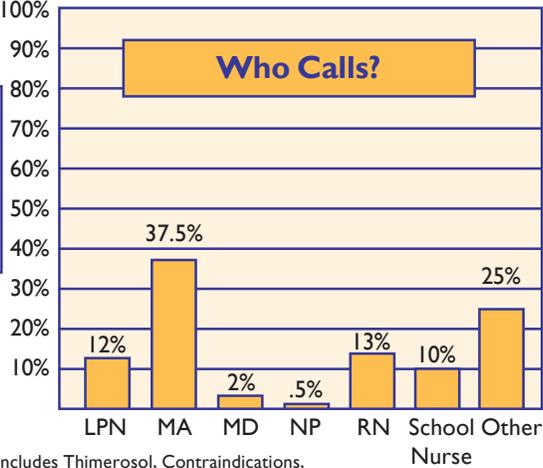
Please remember, the SHOT LINE number should **not** be given to your patients. By limiting access to the SHOT LINE, we will continue to provide quick answers to your urgent immunization questions.

Patients with immunization questions, including overseas travel information, should be referred to the CDHD Immunization Clinic at 327-7450.

Reason For Calls?



SHOT LINE - Stats 06/13/06



New IRIS Web Address iris.idaho.gov

If you go to the old web address there will be a message notifying you that the address has changed. It will then redirect to the new site after about 5 seconds. The re-redirect page will be maintained until Dec. 31st 2006.

* Includes Thimerosal, Contraindications, Reactions, Record, Exemption, and Misc.