

PUBLIC HEALTH CONNECTION

A quarterly newsletter from the Clinton County Health Department

REPORTED TICKBORNE DISEASE CASES IN CLINTON COUNTY, NY

Clinton County saw its first reported Powassan virus case in October 2022 in a pediatric patient. Powassan virus is transmitted by the blacklegged tick (also known as deer tick; *Ixodes scapularis*) and the groundhog tick (*Ixodes cookei*). Cases have been primarily reported from northeastern states and the Great Lakes region. New York State (NYS) has the third highest reporting behind Minnesota and Wisconsin, respectively, with [23 cases](#) reported between 2012 and 2021.

Although Powassan virus is rare, it is fatal in 15% of people who become infected. Of those who survive, 50% have permanent neurological damage. Symptoms usually appear within 1-4 weeks after the bite of an infected tick and include fever/chills, aches and pain, headache, vomiting, confusion, loss of coordination, and speech difficulty. Those infected may experience encephalitis or meningitis resulting in seizure, paralysis, coma or death. Unlike Lyme disease, there is no effective treatment for Powassan virus; care for these patients is aimed at symptom management.

[Diagnosis](#) is based on the patient’s clinical symptoms and antibody testing on blood or CSF fluid. Testing is virus-specific and not part of the standard immunoglobulin M antibody assay in the Tick-borne Disease Antibody Panel which includes anaplasmosis, babesiosis, ehrlichiosis, Lyme disease, and Rocky Mountain spotted fever. Unlike other tickborne diseases, a tick can transmit Powassan virus in as little as [15 minutes](#). The best defense against all tickborne illness is [reduction to exposure and bite prevention](#). Visit the [CDC website](#) for more information on testing and treatment of tickborne diseases.

	2018	2019	2020	2021	2022
Anaplasmosis	3	1	15	19	13
Babesiosis	0	0	0	0	3
Lyme disease	54	63	163	208	124
Rocky Mountain spotted fever	0	1	2	0	0

NUTRITION SECURITY

In early 2022, the U.S. Department of Agriculture (USDA) enacted a [plan](#) detailing their intended actions to improve nutrition security in our country. These efforts demonstrate a shift in focus from the quantity of food seen in American households to that of quality, thereby better promoting health equity and supporting chronic disease prevention in our communities. A quarter of all Clinton County residents experience low access to full service grocery stores, meaning acquiring healthy foods is often more challenging here than in other communities. As a result, food/

nutrition insecurity was maintained as a focus area in the Clinton County Community Health Improvement Plan.

The Clinton County Health Department (CCHD) is currently offering a short food and nutrition in-service/training to

WHAT IS NUTRITION SECURITY?

Consistent access to nutritious foods that promote optimal health and well-being for all Americans, throughout all stages of life.



Nutrition Security

=



Food Security

+



Diet Quality

+



Equity

interested health, social service, and human services professionals. The training covers the USDA action plan and connects the federal changes to local food/nutrition security screening and referral practices. As of March 2023, nearly 100 local professionals have taken advantage of this training opportunity. Participant post-evaluation feedback indicates 98% gained knowledge related to nutrition security and 85.5% gained awareness of local resources to address food/nutrition security. To schedule this training for your team, contact Emily Hutchins, RD, CDN, CLC at Emily.Hutchins@clintoncountygov.com.

2022-2024 Community Health Assessment



The [2022-2024 Community Health Assessment](#) is now available.

The document includes:

- An expanded community health profile.
- Easy access to numerous health data sources.
- Results of multiple resident and stakeholder health surveys.
- The Community Health Improvement Plan.

IMMUNIZATION SCHEDULES

The Centers for Disease Control and Prevention (CDC) recently updated [Adult and Child/Adolescent Immunization Schedules](#) and [Vaccine Catch-Up Guidance Job Aids](#). Highlights of [changes](#) are listed below.

Changes to both Adult & Child/Adolescent Immunization Schedules for 2023

COVID-19 vaccine:

- [COVID-19 vaccines](#) added to both routine schedules.
- New abbreviations that contain information on the vaccine’s valency (i.e., monovalent [1v] or bivalent [2v]) and vaccine platform (mRNA vs. acellular protein subunit [aPS]) added.
- Novavax added for use in children 12-18 years and adults.

Measles, Mumps, and Rubella vaccine: Priorix® (brand of 2-dose series) added to the schedules.

Adult Immunization Schedule Changes for 2023

Hepatitis B vaccine: PreHevbrio™ (brand of 3-dose series) and Heplisav-B™ (brand of 2-dose series) added to the schedule.

Note: PreHevbrio™ and Heplisav-B™ are not recommended in pregnancy due to lack of safety data in pregnant persons.

Pneumococcal vaccine:

- Pneumococcal note updated to reflect recommendations for use of PCV15 (Vaxneuvance™) and PCV20 (Prevnar®) in persons who previously received pneumococcal vaccines.
- Providers encouraged to use [PneumoRecs VaxAdvisor](#) mobile app to determine a patient’s pneumococcal vaccination needs.
- Reference to [resource for vaccine timing](#) added.

Polio vaccine: Guidance for adults at increased risk of exposure to poliovirus added. Routine poliovirus vaccination of adults in the U.S. is not necessary.

Zoster vaccine: Guidance for persons with susceptibility or immunocompromising conditions added to routine vaccination and special situations sections.

Child/Adolescent Immunization Schedule Changes for 2023

Pneumococcal vaccine: PCV15 (Vaxneuvance™; a 4-dose series) added as a choice for pneumococcal conjugate vaccine.

Note: PCV13 and PCV15 can be used interchangeably. PCV15 is not indicated for children who have completed a PCV13 series previously.

MULTIDRUG NON-SUSCEPTIBLE GONORRHEA

In February 2023, the NYS Department of Health issued a [health advisory](#) concerning multidrug non-susceptible gonorrhea reported in Massachusetts. This is the first resistant or reduced susceptibility to 5 classes of antibiotic case that has been identified in the U.S. To date, no antibiotic resistant gonorrhea cases have been reported in NYS. Treatment failure should be considered for persons whose symptoms do not resolve within 3-5 days after treatment with report of no sexual contact during the post-treatment follow-up period, and a positive culture on test of cure. For persons with suspected treatment failure, the treating clinician should request consultation from infectious disease at the [National Network of STD Clinical Prevention Training Center](#).

Reported Chlamydia & Gonorrhea Cases, Clinton County, NY

	2018	2019	2020	2021	2022
Chlamydia	303	270	211	163	142
Gonorrhea	32	29	16	57	23

Resources: Clinician guidance and recommendations

- [February 2023 NYSDOH Health Advisory](#)
- [STI Treatment Guidelines for Gonorrhea, 2021](#)
- [STI Treatment Guidelines, 2021](#)
- [STI Treatment \(Tx\) Guide Mobile App](#)

PATIENT RESOURCE: WIC PROGRAM

Since March 2020, families receiving Supplemental Nutrition Assistance Program (SNAP) benefits have received an additional emergency allotment to their monthly allowance. As of the end of February 2023, families are no longer receiving emergency allotments. To help minimize the burden this may cause, please encourage families to apply for WIC if they are not already participating. Eligibility can be determined by phone at **518-565-4830**. Clients are encouraged to attend appointments in-person; however, remote-appointments have been approved through mid-August 2023.

Vaccine Schedule App



Download [“CDC Vaccine Schedules”](#) (Version 10.0.1) free for iOS and Android devices.

