

PUBLIC HEALTH CONNECTION

A quarterly newsletter from the Clinton County Health Department

NEW RESPIRATORY SYNCYTIAL VIRUS (RSV) AND VARICELLA REPORTING REQUIREMENT

Effective 12/20/23, laboratory-confirmed respiratory syncytial virus (RSV) in persons of any age and deaths caused by laboratory-confirmed RSV in persons younger than 18 years and all varicella cases (not shingles/zoster) are included in the [reportable communicable disease list](#) in New York State (NYS).

A [12/20/23 Alert](#) from the NYS Department of Health (DOH) available through the Health Commerce System provides additional details. For questions about this requirement call **518-565-4848**.

PATIENT RESOURCE: HOME SAFETY

The Healthy Neighborhoods Program (HNP) in Clinton County is a grant-funded initiative dedicated to improving residents' personal health, safety, and environmental conditions. Through in-home surveys, HNP identifies and addresses health and safety concerns, offering free home safety education and products to all Clinton County residents regardless of income.

The program's main objectives include preventing lead poisoning, reducing residential injuries, addressing asthma severity, promoting radon home testing, and reducing exposure to hazards like secondhand smoke and allergens. HNP focuses on at-risk homes to create a healthier living environment through education and resources.



During home visits, HNP staff discusses fire safety, household accident reduction, indoor air quality,

carbon monoxide poisoning, lead poisoning, and other relevant topics. The program also covers asthma prevention and infant safety. Residents can sign up by calling **518-565-4870** or visiting health.clintoncountyny.gov/healthyneighborhoods.

In addition to education, HNP provides information on community resources and referrals. The Healthy Neighborhoods Program encourages residents to participate in the program to foster a healthier living environment for themselves and their families.

IDENTIFYING AND MANAGING LEAD EXPOSURE

New York State (NYS) [Public Health Law and Regulations](#) require health care providers to obtain a blood lead test for all children at age 1 and 2 years, regardless of risk. Lead exposure risk should also be assessed at each well visit for all children aged 6 months to 6 years.

According to data obtained from NYSIIS, in Clinton County only **65.8%** of 1 year olds and **64.6%** of 2 year olds were tested for blood lead levels (BLL) in 2023; in 2022, 67.3% of 1 year olds and 64.8% of 2 year olds were tested.

Universal testing remains vital in the identification of any children that may have been exposed to lead. In addition, Federal Law requires that all Medicaid eligible children be tested for lead at one and two years of age. In Clinton County, the lowest percentage of children tested are those with Medicaid or Fidelis Care Insurance. The LeadCare II point-of-care testing system allows for blood lead levels to be checked quickly in the office, with results available in three minutes. If a child's capillary sample results in **≥ 5 µg/dL**, a venous sample should be drawn to confirm the level. Elevated levels should be reported to the child's county of residence.

In Clinton County, the [Lead Poisoning Prevention Program](#) offers in-home education to parents regarding lead hazards and prevention of lead poisoning. As part of this program, CCHD reviews all blood lead levels reported through NYSIIS. In any cases of BLL **≥ 5 µg/dL**, patients are contacted and education is provided on next steps to prevent any further lead poisoning, diet considerations to help lower lead levels, and environmental controls, such as how to clean effectively for lead dust. Environmental Health staff also identify any lead paint hazards in the home when a child is identified with elevated blood lead levels. CCHD provides case management to children with elevated BLLs of **≥ 5 µg/dL**, until the BLL is **< 5 µg/dL** for two consecutive tests. For questions, contact CCHD at **518-565-4848**.

2024 IMMUNIZATION SCHEDULES

2024 [Child and Adolescent](#) and [Adult](#) Recommended Immunization Schedules are now available and effective immediately.



SEXUALLY TRANSMITTED INFECTION (STI) UPDATES

While chlamydia remains one of the most frequently diagnosed communicable diseases in Clinton County, incidence has been on the decline since 2018 (see Table 1). Reported cases of gonorrhea in Clinton County increased significantly for one year (2021) and remained consistent from 2022 to 2023. Reported syphilis cases have fluctuated in Clinton County in recent years, from two in 2019, to 13 in 2022 and 6 in 2023. Congenital syphilis cases are on the rise nationwide.

Table 1. Reported Cases of Sexually Transmitted Infections, Clinton County, 2019-2023

	2019	2020	2021	2022	2023
Chlamydia	270	211	163	142	137
Gonorrhea	29	16	57	23	25
Syphilis	2	0	4	13	6

Expedited Partner Therapy (EPT) is the clinical practice of providing individuals with medication or a prescription to deliver to their sexual partner(s) as presumptive treatment for an STI, without completing a clinical assessment of those partners. This practice is an effective and recommended strategy to decrease rates of STIs in a population. In [NYS](#), EPT is an option for management of sex partner(s) for chlamydia, gonorrhea, and/or trichomoniasis STIs. EPT should not be provided for any partner(s) when the index patient is co-infected with syphilis, and may not be clinically appropriate for every patient (i.e., some EPT medications are not recommended for pregnant persons).

Treatment recommendations for index patients and their sexual partners, by STI (from the 2021 Guidelines):

- **Chlamydia:** First line treatment is doxycycline 100 mg orally twice a day for 7 days. If pregnancy is suspected or confirmed the alternate treatment (or with a known history of allergy to tetracyclines) includes azithromycin 1 g orally in single dose *OR* levofloxacin 500 mg orally once a day for 7 days.
- **Gonorrhea:** For index patients, ceftriaxone 500 mg intramuscularly (IM). Alternate treatment (i.e., allergy) includes gentamicin 240 mg IM PLUS azithromycin 2 g orally in a single dose. For sexual partner(s) not directly seen, cefixime 800 mg orally in a single dose.
- **Trichomoniasis:** For women, metronidazole 500 mg orally twice a day for 7 days. For men, metronidazole 2 g orally in a single dose. Alternate treatment includes tinidazole 2 g orally in a single dose, for men and women.

[STI treatment guidelines](#) were updated in 2021; a quick reference [wall chart](#) provides a summary of these guidelines.

FREE DEVELOPMENTAL SCREENINGS

CCHD offers developmental screenings for children under 3.

- No cost to families
- Friendly, trained screeners
- Standardized Screening Tool



Patients or guardians may visit health.clintoncountyny.gov/specialneeds or call 518-565-4848 for more information.

INFLUENZA, COVID-19 & RSV IMMUNIZATION COVERAGE

Vaccinations against COVID-19, influenza, and respiratory syncytial virus (RSV) remain the best way to avoid severe outcomes from these illnesses, including hospitalization. Yet, a recent [Health Alert](#) revealed ongoing low vaccination rates. Health care providers are urged to administer influenza, COVID-19, and RSV immunizations now to patients, if recommended. Immunizations are especially important for people at increased risk for severe disease, including infants, older adults, pregnant people, and people with certain underlying medical conditions. COVID-19 vaccination can also reduce the chance of MIS-C and post-COVID conditions.

RSV [vaccine](#) is recommended for all infants <8 months old born during or entering into RSV season; and infants 8-19 months who are at risk of severe RSV disease entering their second RSV season. Adults who are at risk of severe illness from RSV infection could also be protected by new vaccines. RSVPreF3 (Arexvy) and RVpreF (Abrysvo) can be offered by providers with shared clinical decision-making with patients over 60 years old. Several local pharmacies are offering RSV vaccine now for adults over 60 years.

Vaccination of pregnant people against influenza and COVID-19 protects both the patient and their infants. Vaccination of pregnant people against RSV protects the infant against RSV after birth and is especially important given supply issues with nirsevimab (Beyfortus) this season. Pregnant persons should receive a single dose during weeks 32-36 of pregnancy.

Annual flu vaccine is recommended for everyone 6 months and older. Adults aged 19-50 years are the least vaccinated age group. Provider recommendation is the most important factor in patients accepting vaccination. If you are unable to administer vaccine in your practice, refer patients to pharmacies and [vaccination clinics](#). Locations that have COVID-19 and flu vaccines in stock can be found at [Vaccines.gov](#). [CDC](#) and [NYSDOH](#) surveillance reports provide current disease trends. From Oct-Dec 2023 Clinton County saw 162 lab-confirmed influenza cases; flu A was the most prevalent strain.