

CHILDCARE NEWSLETTER

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MEASLES

More measles cases have been reported in the United States since Jan. 1, 2008 than during the same period in any year since 1996, according to a report released today in the Centers for Disease Control and Prevention's Morbidity and Mortality Weekly Report.

Between January 1 and July 31, 2008, 131 cases were reported to CDC's National Center for Immunization and Respiratory Diseases (NCIRD). At least fifteen patients, including four children younger than 15 months of age, were hospitalized. No deaths have been reported.

In the decade before the measles vaccination program began, an estimated 3-4 million persons in the United States were infected each year. Of these, 400-500 died, 48,000 were hospitalized, and another 1,000 developed chronic disability from measles encephalitis.

"Measles can be a severe, life-threatening illness" said Dr. Anne Schuchat, director of NCIRD. "These cases and outbreaks serve as a reminder that measles can and still does occur in the United States."

Of the 131 patients, 112 were unvaccinated or had unknown vaccination status. Among the 112 unvaccinated U.S. residents with measles, 16 were younger than 12 months of age and too young for vaccination, and one had presumed evidence of measles immunity because the person was born before 1957.

Of the 95 patients eligible for vaccination, 63 were unvaccinated because of their or their parents' philosophical or religious beliefs.

Although immunization coverage rates for measles vaccine remain high, unvaccinated persons are at risk for measles, and sizeable measles outbreaks can occur in communities with a high number of unvaccinated persons.

Measles is consistently one of the first diseases to

reappear when immunization coverage rates fall. Increases in the proportion of the population declining vaccination for themselves or their children might lead to large-scale outbreaks in the U.S. Currently, Israel and a number of countries in Europe -- including Switzerland, Austria, Italy, United Kingdom -- are reporting sizeable measles outbreaks among populations refusing vaccination.

"These cases resulted primarily from failure to vaccinate, many because of philosophical or religious belief," said Dr. Schuchat. "The vaccine

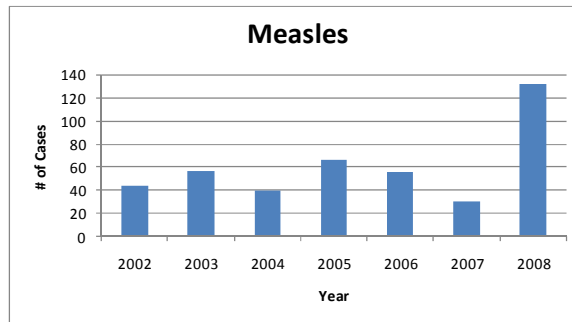
against measles is highly effective in preventing infections, and high immunization levels in the community are effective at preventing or drastically decreasing the size of outbreaks."

Reports include cases from Illinois (32

cases), New York (27), Washington (19), Arizona (14), California (14), Wisconsin (7), Michigan (4), Hawaii (5), Arkansas (2), and Washington, D.C., Georgia, Louisiana, Missouri, New Mexico, Pennsylvania, and Virginia (1 each).

Nine of the imported cases were in U.S. residents who had traveled abroad, and 8 were foreign visitors. Most of the imported cases have occurred among school-aged children who are eligible for vaccination but whose parents have chosen not to vaccinate them.

Information obtained from the CDC.



IMMUNIZATION AUDITS

Audits are here! Please review your immunization records prior to the visit so your audit goes as smoothly as possible. Centers with 100% compliance on initial audits will be recognized in the December newsletter.

Questions? Call Shawonna Jackson at 325-7188

PREVENTING THE SPREAD OF FLU IN CHILDCARE SETTINGS

The single best way to protect yourself and others against influenza is to get a flu vaccination each year. Two kinds of flu vaccine are available in the United States:

- The "flu shot"
- The nasal-spray flu vaccine

October or November is the best time to get vaccinated, but getting vaccinated in December or even later can still be beneficial since most influenza activity occurs in January or later in most years. Though it varies, flu season can last as late as May.

About 2 weeks after vaccination, antibodies that provide protection against influenza virus infection develop in the body. Vaccination, along with other measures, also may help to decrease the spread of influenza among children in the child care setting and among care providers.

The following are recommendations for childcare settings:

- Recommend influenza vaccination for children and care providers in child care settings.
- Remind children and care providers to wash their hands or use alcohol-based hand rubs, and make sure that supplies are available.

- Keep the child care environment clean
- Remind children and child care providers to cover their noses and mouths when sneezing or coughing
- Observe all children for symptoms of respiratory illness, especially when there is increased influenza in the community.
- Encourage parents of sick children to keep their children home. Encourage sick child care providers to stay home.
- Consult the Independence Health Department at 325-7204 when increases in respiratory illness occur in the child care setting.

Information provided by the CDC at <http://www.cdc.gov/flu/professionals/infectioncontrol/childcaresettings.htm>

Independence Health Department Flu Clinic

- October 23rd at Adventure Oasis from 11 a.m.-6p.m.
- Every Wednesday beginning October 29th at the Independence Health Department. From 9 a.m.– 4 p.m.

Must be 18 or older

\$20 or Medicare Part B is accepted

Spotlight on you

Do you have a fun program or activity that you would like to share? Call 325-7204.



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