

Public Health Views... and News

A Newsletter for Regional Health Professionals

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A New shingles vaccination for people 60 and older to bring welcome relief

What: The Food and Drug Administration has approved and the Centers for Disease Control recommend people over the age of 60 to be vaccinated against the virus that causes the often painful condition known as shingles. Shingles is a disorder caused by the reactivation of the chickenpox virus. It shows up as a blistering rash located in a patch on one side of the body, usually lasting about 10 days. The Virus travels down the nerve fibers that supply the effected area, and blisters (similar to chickenpox) break out on that area of the skin. This condition is more common and more severe in older patients (60 or older).

Shingles can result in prolonged severe pain (in about 1 in 5 cases) in the region where the rash is located even after the rash has cleared up. Additionally, the shingles patient could be contagious to others, however the risk is small as long as the patient covers the blisters and hands are washed after contact. The

disease is not spread in the same fashion that the flu or chickenpox is spread (by coughing or sneezing).

A live virus vaccine has now been developed and approved for use – Zostavax – that can prevent or significantly reduce the effects of an outbreak of shingles. This vaccine is currently only recommended for persons 60 and older who are not immuno-compromised (by such things as AIDS, chemo patients for cancer, persons on steroid therapy, or leukemia)

Shot side effects? As with all medications, problems such as allergic reactions are a possibility. However, the primary side effects of this new vaccine include:

- Redness, soreness, swelling, or itching around the site of the shot (1 in 3 persons)
- Headache (1 in 70 persons)

Having had a case of shingles does not exclude a patient from getting vaccinated

The Community Health Agency will begin offering this vaccine after December 18, 2006 by appointment only. The cost of the vaccine is \$175.00, but patients need to check with their insurance carrier or Medicare to determine if this is a covered vaccine. You can refer clients to our clinics today to find out more about shingles or to make an appointment.

Branch County – 517-279-9561 ext. 100
Hillsdale County – 517-437-7395 ext. 136
Sturgis – 269-659-4013 ext. 121
Three Rivers – 269-273-2161 ext.208

Multi-state Outbreak of *E. coli* O157 Infections, November-December 2006 (Re-printed from CDC Website)

This outbreak was clearly linked to Taco Bell restaurants in the northeastern United States. As of December 13, 2006, 71 persons with illness associated with the Taco Bell restaurant outbreak have been reported to CDC from 5 states: New Jersey (33), New York (22), Pennsylvania (13), Delaware (2), and South Carolina (1). States with Taco Bell restaurants where persons confirmed to have the outbreak strain have eaten are New Jersey, New York, Pennsylvania, and Delaware. Other cases of illness are under investigation by state public health officials. Among these 71 ill persons, 53 (75%) were hospitalized and 8 (11%) developed a type of kidney failure called hemolytic-uremic syndrome. Illness onset dates have ranged from November 20 to December 6. The number of new cases being identified has declined substantially; the peak time when persons became ill

was in the last week of November.



Map of states where persons with illness live

Cases in 48 of the 71 patients are confirmed, meaning that the patients' *E. coli* O157 strains have the outbreak "DNA fingerprint." *E. coli* O157 strains are routinely "DNA fingerprinted" at public health laboratories in all states as part of PulseNet (the network of public health laboratories that sub-type bacteria). *E. coli* O157 strains from other cases are being tested by PulseNet. As a result of testing by PulseNet, cases with the outbreak strain "fingerprint" pattern are being re-classified as confirmed cases, and cases with an unrelated "fingerprint" pattern are being dropped from the outbreak case count.

CDC is working with state and local health officials, the Food and Drug Administration (FDA), the Department of Agriculture (USDA), and the restaurant chain to determine what food caused the outbreak. These investigations include an ongoing investigation that involves interviews of ill and well Taco Bell restaurant patrons about what food items they consumed. These food items include a variety of different ingredients. By comparing foods consumed by ill and well persons, investigators can show statistical links between illness and consumption of particular food ingredients. Public health investigators have identified a few ingredients that were consumed more often by ill

persons than well persons and were statistically linked with illness: lettuce, cheddar cheese, and ground beef. This analysis also indicates that onions of any type are not linked to this outbreak. The investigators have also gathered additional information about the locations of involved restaurants, the patterns of distribution of food ingredients, and the characteristics and preparation of food ingredients. Evaluation of all these data indicates that shredded lettuce consumed at Taco Bell restaurants in the northeastern United States was the most likely source of the outbreak. Because multiple Taco Bell restaurants were involved during the same time period, contamination of lettuce likely occurred before reaching the restaurants. Health officials and the restaurant chain are working collaboratively to learn more about the shredded lettuce to determine how it may have become contaminated.

Public health laboratories are testing food samples from Taco Bell restaurants. A sample of chopped yellow onions collected on December 4 from an open bin in a Taco Bell restaurant in Nassau County, New York tested positive for *E. coli* O157:H7. This strain has a "DNA fingerprint" pattern that is different from that of the



outbreak strain; the pattern of the chopped onion strain has not been

seen before in ill persons in this country. Samples of green onions obtained by the restaurant chain tested negative for *E. coli* O157; the initial report of a preliminary positive on these samples by a laboratory hired by

the restaurant chain was not confirmed. No other food item has a definite or preliminary test indicating the presence of E. coli O157.

E. coli O157 causes diarrhea that is often bloody and accompanied by severe abdominal cramps, but fever is typically absent or mild. Persons who have developed such symptoms after eating at a Taco Bell restaurant in an affected state are advised to consult a physician and to inform their local health department

Falls are now the leading cause of injury death for seniors

Report shows men who fall are more likely to die than women

Fall-related death rates for men and women 65 years and older increased significantly from 1993 to 2003, according to a report released in November from the Centers for Disease Control



In 2003, more than 13,700 older adults died from falls, making them the leading cause of injury deaths among people 65

and older. From 1993 to 2003 fatal falls increased by more than 55 percent - with more men (46.2 percent) dying from falls than women (31.1 percent). The report also indicates that in 2003 almost 1.8 million seniors were treated in emergency departments for nonfatal injuries from falls and more than 460,000 were hospitalized. In 2000, the direct medical costs for falls among older adults were approximately \$19 billion.

Some highlights in the report are:

- From 1993 to 2003, fatal fall rates increased for both sexes and all races, but they remained consistently higher for men.
- Rates for nonfatal fall-related injuries were, on average, 48% higher for women than for men.
- The decline in women's hip fracture injury rates from 2001 to 2004 may be a result of prevention efforts such as osteoporosis screening combined with widespread education about treatments to rebuild bone mass.
- As they age, men become more susceptible to hip fractures if they fall. Osteoporosis screening and treatment may also benefit them.

The CDC offers advice and information about what you can do to understand fall risks and ways to prevent or reduce the risk of falling.

These steps include:

- Exercising regularly; exercise programs like Tai Chi that increase strength and improve balance are especially good.
- Asking their doctor or pharmacist to review their medicines-both prescription and over-the-counter-to reduce side effects and interactions.

- Having their eyes checked by an eye doctor at least once a year.
- Making their homes safer by eliminating fall hazards and improving lighting.

Need help finding that prescription at a price you can afford?

As most consumers know, the prices of prescription drugs can vary from pharmacy to pharmacy. The Michigan Department of Community Health (MDCH) has created a website to help citizens of Michigan compare prices among pharmacies

Provided on the site are the prices for 30 of the most commonly used drugs in Michigan, as reported by the MDCH's Medical Services Administration. The prices are obtained from many of the State's retail pharmacies. The web site allows citizens to search for information on particular listed drugs in a geographic region by pharmacy.

Usual and Customary Prices

The prices reflected on the Rx Price Finder are prices that pharmacies reported to the Michigan Medicaid Program as their "usual and customary" prices. In most cases, these prices reflect the price for generic drugs. There are in fact a few drugs where no generic is available and brand pricing must be used.



Prices are reported each time a pharmacy fills a prescription for a drug on

the list in this survey. Some pharmacies may not have filled a prescription for a drug in the time period of the survey, so for those pharmacies, there will not be any price information for that particular drug. Other pharmacies may have filled many prescriptions for a particular drug during the survey time period and reported different prices for the same drug, in this case the Rx Finder will reflect the price that was reported most recently. The "usual and customary" price should be comparable to what a cash-paying customer without insurance would pay. This price does not reflect any discounts a customer might receive while purchasing a prescription drug. Prescription drug prices can vary from day to day, so the price that you find at your pharmacy may not be the same price that appears in Rx Finder.

Questions about this service can be answered by calling 1-866-755-6479. This web site is updated on a bi-weekly basis and it is recommended that consumers call ahead to their pharmacy of choice to check the latest prescription drug price before traveling to purchase a prescription drug.

To access this new service offered to Michigan consumers, log on to the web site at:

www.michigandrugprices.com

A Word About Safety

It is wise for consumers to keep track of the medications they are taking in order to avoid potentially harmful interactions. Persons shopping at more than one pharmacy should make sure that they inform all pharmacists of all of the drugs they are taking

County Health Plan turning 1 year old

In December of 2005 the Branch-Hillsdale-St. Joseph Community Health Agency initiated a County Health Plan for the tri-county area to provide health coverage for low income residents in our district.

Residents of Branch, Hillsdale, and St. Joseph counties eligible for the Adult Benefits Waiver (ABW) program are enrolled in the Branch Hillsdale St. Joseph Health Plan, Plan A. This program is NOT insurance but provides health benefits to low income uninsured residents.



Enrollment in Branch Hillsdale St. Joseph

Health Plan, Plan A is performed by the Department of Human Services.

Branch Hillsdale St. Joseph Health Plan, Plan B is a community-sponsored program that helps uninsured people obtain health care services. Uninsured residents of Branch, Hillsdale, and St. Joseph Counties with low-income who cannot get Medicaid, Medicare, or other programs may be eligible for Plan B.

Branch Hillsdale St. Joseph Health Plan is NOT insurance but provides basic health care services at little or no cost to the member. For information on how to enroll in Branch Hillsdale St. Joseph Health Plan, please call the county number listed below.

Branch County – 517-279-9561 Ext. 132

Hillsdale County – 517-437-7395 Ext. 119

Sturgis – 269-659-4013 Ext. 108

Three Rivers – 269-273-2161 Ext. 207

As of December 8, 2006 the following enrollment numbers indicate that this project has been extremely effective in providing services to persons in Branch, Hillsdale, and St. Joseph Counties.

Branch County

	Enrolled
Plan A	210
Plan B	137

Hillsdale County

	Enrolled
Plan A	250
Plan B	78

St. Joseph County

	Enrolled
Plan A	357
Plan B	300

Enrollment in Plan A is controlled by the Michigan Department of Community Health and is currently closed.

Enrollment in Plan B is controlled by your local Health Plan and has a current budget capacity of 660 clients. As we are currently not at capacity in Plan B (515), we are currently enrolling clients. If you have clients who you think may qualify for this service, do not hesitate to refer them to the closest health department office.

More information is available about your County Health Plan on the Web at:

www.bhsj.org or www.communityhealthplans.org