

FALL 2024 ISSUE 9

# NEWS & VIEWS

A Regional Health Professional Newsletter



### FROM THE MEDICAL DIRECTOR'S DESK

Welcome to fall. As the leaves turn colors we all place pumpkins on our front porches. In public health, our focus turns to **respiratory illness**. We continue to counsel our patients regarding respiratory illnesses such as **COVID-19**, **Flu**, **RSV**, **and Pertussis** vaccinations. The start of school brought many conversations regarding childhood vaccinations with a renewed focus on diseases such as **Pertussis and Measles**, which are sadly becoming more common. We are providing you with the latest data and resources for your information.

In this issue, we will cover **Candida Auris** and how to protect patients who are at the greatest risk from this resistant fungal infection. As of August 26th, 2024, 1,032 cases have been identified in Michigan, inclusive of clinical and screening cases. The majority of the cases are in the Detroit metropolitan area, with 11 counties throughout the state reporting identified cases. We have included the latest resources from MDHHS for your consideration.

The fall also brings discussions about **Rabies** and the process of identifying rabid animals in our communities. We talk about how our community can counsel and treat patients with exposures or bites from certain animals. We've identified a rabid bat in Hillsdale County.

Karen Luparello, DO, MPH, Medical Director

You will also find information included regarding pediatric lead levels and assessment, as well as resources offered at your Local Health Department. We continue to await the administrative rules regarding the Universal Blood Lead Testing program from MDHHS, which should be released by the end of 2024.

It is my hope that fall brings us time to spend with our families, additional educational opportunities, and renewed energy to support our communities in their healthy endeavors.

Happy fall. I hope that you can enjoy a pumpkin latte as we move toward many peaceful holidays,

Karen Luparello, DD, MPH, Medical Director luparellok@bhsj.org 517-933-3125

### **CANDIDA AURIS**

Candida auris (C. auris) is a fungus that can cause life-threatening, often multidrugresistant, infections. C. auris affects ill or immunocompromised patients and is highly transmissible in healthcare settings.

Laboratory testing with sequencing or mass spectrometry is required for accurate identification of C. auris.

Early detection of clinical and colonized cases, followed by measures like screening and infection control, can limit the spread of C. auris.

The Michigan Department of Health and Human Services (MDHHS), in collaboration with local public health and healthcare partners, continues to investigate and track the emergence of Candida auris (C. auris). Since the first case was detected in 2021, Michigan has seen a noticeable increase; 112 cases in 2022, 410 cases in 2023 to over 540 cases reported as of August 26th, 2024. Candida auris

Surveillance Report as of August 26, 2024.

Michigan healthcare facilities across the continuum of care should implement infection prevention and control measures, including:

- Taking steps to <u>identify patients with C.</u> auris infection or colonization
- Being prepared to implement <u>setting-appropriate infection prevention</u>
   <u>precautions</u>, including the use of disinfecting products effective against C. auris (see the <u>EPA List P</u>)
- Our Personal Health & Disease Prevention
   Director, Heidi Hazel can be reached at 517 279-9561 ext. 143 to provide recommended infection prevention practices and screening procedures to facilitate timely and accurate detection of C. auris.
- For additional assistance, the Infection
   Prevention Resource and Assessment Team
   (IPRAT) is available to Long Term Care
   facilities (LTCs), and other congregate
   settings to provide and strengthen infection
   prevention practices, containment
   strategies, and prevention plans. IPRAT
   referral form:

https://mdhhscd.qualtrics.com/jfe/form/SV\_2ab1AtGfBC8mF7g

# RESPIRATORY ILLNESS (COVID-19, FLU, RSV AND PERTUSSIS)

From October 1st, 2023 to September 30th, 2024, our tri-county area has reported a total of 2,358 COVID-19 cases, 777 cases of Influenza, and 10 cases of Pertussis. We have diligently monitored this data to enhance our public messaging through media and direct conversations with patients, emphasizing the critical importance of vaccination. We encourage providers to engage in meaningful conversations with patients to educate them on how vaccinations safeguard against respiratory illnesses.

# COVID-19 Vaccination Checklist (Updated October 4th, 2024, updated monthly):

<u>Checklist of Current Versions of U.S. COVID-19</u> <u>Vaccination Guidance and Clinic Support Tools</u> (immunize.org).

Influenza Guidance for Healthcare Providers (Updated October 2024): Influenza Surveillance, Reporting and Testing Guidance for Healthcare Providers 2024-2025 Influenza Season.

Influenza-Related Pediatric Mortality
Investigation and Reporting: Guidance for
Medical Examiners, Pathologists and Healthcare
Providers

# RSV Vaccine Guidance for Older Adults (Updated August 30th, 2024):

https://www.cdc.gov/rsv/hcp/vaccine-clinicalguidance/older-adults.html

### Additional Communicable Disease information and resources:

https://www.michigan.gov/mdhhs/keep-mihealthy/communicablediseases/recentupdates Your Local Health Department offers programs such as the Vaccines for Children (VFC) program for infants and children through age 18, and the Adult Vaccine Program (MI-AVP) for persons 19 and older. These programs are offered to qualifying families or individuals who are not insured, or whose insurance does not cover the cost of certain immunizations. Have patients call their local office to schedule an appointment.

Branch County: 517-279-9561 ext. 198
Hillsdale County: 517-437-7395 ext. 398
St. Joseph County: 269-273-2161 ext. 298

### Patient Handout for Respiratory Illness-MDHHS Respiratory Virus Guidance Snapshot: Respiratory Virus Guidance Snapshot

#### **RABIES**

As of October 8th, 2024, 42 bats across

Michigan have tested positive for Rabies,
Including one from Hillsdale County. The
patient that was exposed in Hillsdale, did
receive Post-Exposure Prophylaxis (PEP) as
recommended. If a patient has been bitten by
an animal use the tools below to help prompt
your conversation with the patient.

### Flow chart to help you decide when a patient should start PEP:

https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Folder1/Folder2/

### Flow chart to help determine how to handle the animal if it has bitten someone:

https://www.michigan.gov/mdhhs/-/media/Project/Websites/emergingdiseases/Folder

Michigan law requires that animal bites be immediately reported to your Local Health Department.

**Branch County:** 517-279-9561 ext. 105 **Hillsdale County:** 517-437-7395 ext. 307 **St. Joseph County:** 269-273-2161 ext. 241

#### **BLOOD LEAD TESTING**

New requirements for blood lead testing of young children: The Governor of Michigan signed a bill package on October 3, 2023, that includes requirements for physicians to test, or order a blood lead test for, all children at age 12 months and 24 months and at other intervals based on exposure risk. This age-based approach to blood lead testing requirements for all children is commonly called "universal testing".

The law updates the Public Health Code, adding MCL 333.5474d and amending MCL 333.9206(1). MDHHS is in the process of developing administrative rules that detail the testing requirements. Blood lead testing requirements go into effect when the rules are published in 2024.

#### Who needs a blood lead test?

- All children with a positive lead exposure questionnaire. The American Academy of Pediatrics (AAP) Bright Futures Periodicity Schedule recommends questionnaire screening for lead exposure at well-child exams conducted at 6 months through 6 years.
- The MDHHS lead exposure questions can be found on the <u>Pediatric Blood</u> <u>Lead Level Quick Reference for Primary</u> <u>Care Providers</u>. A "YES" or "I DON'T KNOW" response indicates a positive screen.
- Children enrolled in Medicaid. Blood lead testing is required at:
  - 12 and 24 months.
  - Between 36 and 72 months, if not previously tested (<u>Medicaid</u> <u>Provider Manual Early and Periodic</u> <u>Screening, Diagnosis and Treatment;</u> Section 9.6).

- Children enrolled in WIC. During child certification/recertification and midcertification appointments, WIC staff shall assess the history of blood lead testing for every child. If a child has not had a blood lead test, they must be referred for blood lead testing. Our agency's WIC program has internal collaborations/mechanisms established to facilitate lead testing on-site if need be. Blood Testing results can be shared with the client's provider if WIC staff has a signed release form from the client.
- Children who are refugees ages 6 months through 16 years. CDC recommends a blood lead test within 90 days of arrival in the U.S.
- Retest after 3-6 months for refugee children < 6 years (<u>Immigrant, Refugee,</u> and <u>Migrant Health (CDC.gov)</u>).

**CME:** Childhood Lead Poisoning Prevention (CLPPP) Learning Module - CE available

# PER-AND POLYFLUOROALKYL SUBSTANCES (PFAS)

Our tri-county area has a few known areas that have had PFAS detections in residential and public wells. See the maps for specific areas affected where individuals may have had increased exposure.

- White Pigeon
- <u>Mendon</u>
- Three Rivers

Our agency provides filtration systems for private wells. We encourage providers to monitor patients for the health effects potentially associated with PFAS exposure. That may include increases in cholesterol levels, decreases in birth weight, lower antibody response to vaccines, kidney and testicular cancer, pregnancy-induced hypertension, preeclampsia, and changes in liver enzymes.

For additional PFAS Information for Clinicians: <a href="https://www.atsdr.cdc.gov/pfas/resources/pfa">https://www.atsdr.cdc.gov/pfas/resources/pfa</a> <a href="mailto:s-information-for-clinicians.html">s-information-for-clinicians.html</a>

Handout for patients on PFAS in drinking water: https://www.michigan.gov/-/media/Project/Websites/mdhhs/Folder4/Folder34/Folder3/Folder

# MICHIGAN'S NEWBORN SCREENING PROGRAM

Newborn Screening is a public health program required by <u>Michigan law</u> to find babies with rare but serious disorders that require early treatment. If you are the child's primary care provider, you play a crucial role in discussing the newborn's results and providing resources to the family if the child's results are abnormal. See the resource below for additional information.

### Newborn Screening Highlights for Primary Care Providers:

https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Adult-and-Childrens-Services/Children-and-Families/Hereditary

# MICHIGAN SAFE OPIOID PRESCRIBING TOOLKIT

Opioid misuse greatly impacts patients in the communities we serve. Providers play a key role in preventing Opioid misuse.

Michigan Safer Opioid Prescribing Toolkit is designed to provide Michigan providers with one website for the most up-to-date resources, guidelines, and strategies for managing acute and chronic pain.

#### **ADDITIONAL CME:**

Do you serve patients from rural and underserved areas? Join <u>@RME Collaborative</u> virtually on Saturday, November 23, for Rural Health Clinical Congress Fall 2024. This free, multi-topic CME/CE conference will be broadcast live starting at 8:00 AM. Learn more and register at <a href="https://ow.ly/wHFk50SFmQU">https://ow.ly/wHFk50SFmQU</a>

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