



# Public Health Connection



Public Health  
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## SEXUALLY TRANSMITTED DISEASES (STDs) IN CLINTON COUNTY

Decreasing the incidence of STDs remains one of Clinton County’s biggest challenges. There was a 450% increase in the number of gonorrhea cases in Clinton County, from 6 cases in 2017 to 33 cases in 2018. Investigations yielded one cluster of five cases, with no definitive connection to other cases. Increases in gonorrhea are especially alarming due to the increasing antimicrobial resistance with gonococcal treatment. Staff in CCHD’s Health Care Services Division vigorously investigate each case of gonorrhea in Clinton County to ensure individuals are provided adequate treatment and education.

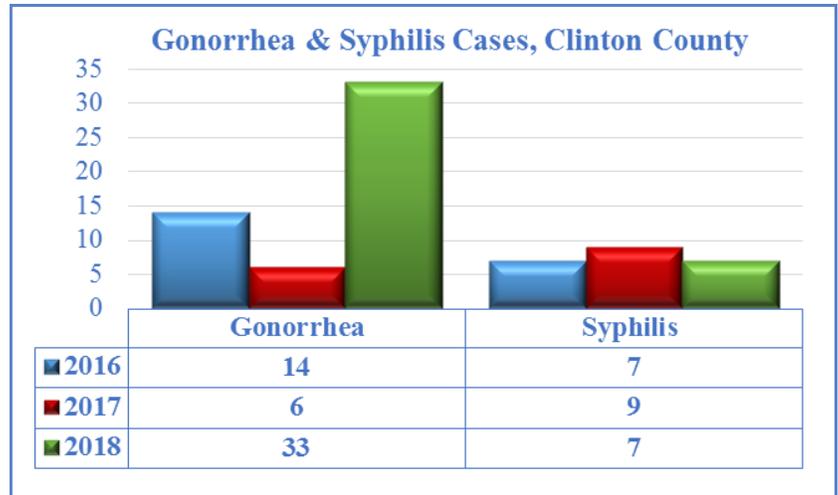
The recommended regimen for uncomplicated gonococcal infections of the cervix, urethra and rectum is:

- Ceftriaxone 250mg IM in a single dose  
**PLUS**
- Azithromycin 1g PO in a single dose.

As dual therapy, ceftriaxone and azithromycin should be administered together on the same day, preferably simultaneously and under direct observation.

Reported chlamydia cases in Clinton County saw a 10.3% increase from 2017 (273 cases) to 2018 (301 cases), after a slight decrease from 2016 (285 cases). Syphilis cases saw a slight decrease, from 9 reported cases in Clinton County in 2017 to 7 reported cases in 2018. Surveillance case definitions for syphilis were updated in 2018, and can be accessed at <https://bit.ly/2TXPf19>.

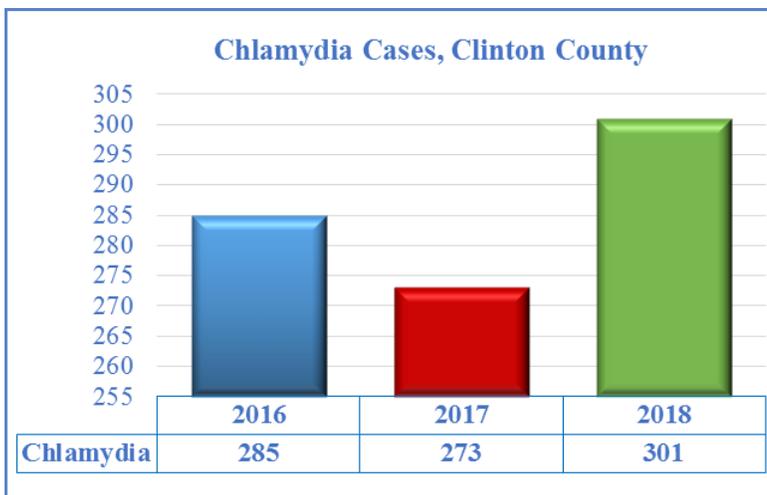
Appropriate testing and treatment is vital in controlling the spread of these diseases. Up-to-date Sexually Transmitted Diseases Treatment Guidelines are available at [www.cdc.gov/std/tg2015](http://www.cdc.gov/std/tg2015). Questions may be referred to CCHD’s Health Care Services Division at (518) 565-4848.



## IMMUNIZATION SCHEDULE UPDATES

2019 Immunization Schedules have been approved by the Advisory Committee on Immunization Practices (ACIP) and are available at <https://bit.ly/2TPiIMt>. Highlights include:

- Update of overall appearance of the 2019 schedules, including simplified instructions and the addition of colors distinguishing between Precautions, Delays, and Contraindications.
- Footnotes updated to “Notes,” and reordered alphabetically by vaccine.
- LAIV is an option for individuals ages 2 to 49 years, with several noted exceptions and precautions.
- Homelessness is an indication for routine hepatitis A vaccination. HepB note revised to include information on adjuvanted HepB and combination HepA-HepB vaccines.
- Pregnancy is a precaution for MenB vaccination.
- IPV note updated regarding combination vaccines.
- Tdap note updated to indicate those receiving Tdap or DTaP at age 7-10 years should still receive Tdap at age 11-12 years.
- Notes added for HepB, IPV, Tdap, and vaccine preventable disease outbreaks.
- CDC Vaccine Schedules App is available at <https://bit.ly/2LngsLn>.



## ANNUAL TUBERCULOSIS (TB) UPDATE

2018 saw the lowest number of TB cases ever reported in the U.S., with a provisional total of 9,029 TB cases reported and an incidence of 2.8 cases per 100,000 persons.<sup>1</sup> During this same timeframe, the incidence of TB was 3.8/100,000 in NYS and in 1.2/100,000\* in Clinton County.

Despite encouraging trends, local, state, and national rates remain above the Healthy People 2020 target of 1/100,000. The current decline in TB incidence in the U.S. is insufficient to achieve TB elimination in this century. The most common risk factor for TB in the U.S. continues to be having been born outside of the U.S. In 2018, non-U.S.-born persons accounted for approximately 2/3 of cases, with an incidence rate >14 times that of U.S.-born persons; in 46.3% of these cases, non-U.S.-born persons received a diagnosis  $\geq 10$  years after first arriving in the U.S. TB elimination will require enhanced surveillance, detection, and treatment. Focusing on populations that are at increased risk for latent TB infection will be important in achieving TB elimination.

### LOCAL SNAPSHOT:

One new case of active TB was reported in Clinton County in 2018, requiring 216 visits by CCHD for Directly Observed Therapy. No secondary cases were identified from this case. In addition, five people were referred for LTBI treatment and CCHD performed 129 TSTs in 2018. Lastly, one foreign-born person was diagnosed as a possibly active TB case; the case was ultimately resolved as a *Mycobacterium avium* complex.

CDC and the U.S. Preventive Services Task Force recommend testing populations at increased risk for TB, including: persons born in or who frequently travel to countries where TB is prevalent; persons who currently live, or previously lived, in congregate settings; health care workers and others who work in places where there is a high risk of TB transmission; persons who are contacts of a person with infectious TB disease; and, immunocompromised persons, who have a higher risk for developing TB disease once infected.

<sup>1</sup>Talwar A, Tsang CA, Price SF, et al. Tuberculosis — United States, 2018. MMWR Morb Mortal Wkly Rep 2019;68:257–262. DOI: <http://dx.doi.org/10.15585/mmwr.mm6811a2>.

\*Fewer than 10 events in the numerator, therefore the rate is unstable. Based on a population of 81,224 (Source: U.S. Census Bureau, 2013-2017 American Community Survey 5-Year Estimates).

## PATIENT RESOURCE

**Patient Airlift Services, Inc. (PALS)** is now available to patients in our region. PALS is a non-profit aviation organization that arranges free flights through their volunteer aviation community for individuals requiring medical diagnosis, treatment or follow-up; for compassionate assistance; for military personnel/ family requests; or for humanitarian purposes. There is no cost or limit to the amount of PALS flight requests an individual can make. Patients must be ambulatory and able to sit upright for the duration of the flight, and must be located farther than a 2-hour car drive from their destination. For questions and to refer patients, call (631) 694-7257.

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**Double Up Food Bucks**  
is returning to Clinton County again in 2019!

For more info on this program, visit [doubleupnys.com](http://doubleupnys.com)

Get more fruits & vegetables when you use your NY SNAP EBT CARD at farmers markets

GET MORE FRUITS & VEGGIES

It's easy with  
**DOUBLE UP FOOD BUCKS!**

**1** BRING YOUR NYS SNAP EBT CARD to the farmers market office or info booth before you shop.

**2** BUY SNAP-ELIGIBLE FOODS at the market with your NYS Snap EBT Card dollars.

**3** WE'LL MATCH WHAT YOU SPEND with free Double Up Food Bucks – up to \$20, every market day.

INFO BOOTH

NEW YORK GROWN

YOU SPEND \$2

WE MATCH \$2

Use them right away or later on to buy FRESH FRUITS & VEGETABLES grown in New York.

## GROWING SHORTAGE OF INTERVENTION SERVICES IN CLINTON COUNTY

Receiving appropriate intervention services as quickly as possible is critical for children to maximize the effectiveness of interventions. A wait of three months for a one year old represents a quarter of that child's life, putting them at risk of falling further behind developmentally while they wait for a provider to become available.

Unfortunately, in Clinton County, an increasing number of children have been unable to receive services after being identified as needing them. Currently, approximately 5% of children (10) participating in CCHD's Early Intervention Program (EIP) are waiting for at least one service, most commonly occupational therapy services, although some children are also waiting for speech therapy.

Contributing to this delay are increases in referrals to the program and children with significant delays, compounded by decreases in the number of therapists available. In 2018, referrals to EIP were up 13% over the previous year. More children are entering with significant global delays. Approximately 18 therapists have left itinerant EI positions at local agencies to work in school districts in the past two years. In response, in addition to attempting to recruit additional therapists, CCHD is working on plans to provide resources for families waiting for services. Resources will be shared with pediatricians as they become available.