

**Medical Director's Report  
Board of Health  
January 2011**

**Seasonal Influenza Update**

In December, a four year old boy living in Westchester County died of influenza. He was previously healthy, had not been vaccinated, and developed pneumonia as a complication.

We've been hearing from members of the public that they are turning down vaccination, not seeing it as necessary, and responding to unrealistic perceptions of the risks of flu vaccine. I did a radio spot on December 21<sup>st</sup> to promote flu vaccination.

We had done a radio spot in late-November regarding influenza and also considered a bulletin to the local papers based on the pediatric death. The death of an adult from influenza H1N1 in the Philadelphia area we responded to through media releases at that time.

It's never too late to get your influenza vaccine, even when we are experiencing influenza, and we encourage the public to do so. There is plenty of vaccine available and the safety of it is as good as it has always been. The most current data shows a seasonal up swing in the number of reported influenza cases. In all cases there is an excellent match with this year's influenza vaccine. Most cases are influenza A and most of those are H3N2 with some of them being H1N1 ("swine flu"). As is usually the case, the minority are influenza B.

Two pediatric deaths occurred as of 12/18/10.

**Rabies**

A case from Virginia in 2009 brings to mind the need for travelers to be aware of rabies risks with traveling. This individual had traveled to India three months before his symptoms began. He had not given any clear evidence for contact with an animal, but his rabies virus type was consistent with a variant associated with dogs in India.

The individual died. The case emphasizes the need for those traveling to foreign countries to take very seriously the risk of rabies exposures. Risk rises with the length of time that you are in a country and the type of activities you are engaged in. The need for travel advice including rabies cautionary information is evident.

## **Pertussis Cases**

I've been involved in helping with communications with regard to a pertussis case in a seven year old in Freeville, providing advice and information to the school system and to the parents of children in the school system with regard to this case. Also, a case of pertussis in a health care worker at the Cayuga Medical Center required time to evaluate the impact and take steps to prevent secondary spread.

## **Medical Examiner Program Alcohol and Drug Effects on Driving**

On December 29<sup>th</sup> I did a radio spot on WHCU to mention the Medical Examiner Program to the public and emphasize the relation of traffic fatalities to drugs.

The public is more familiar with the role of alcohol increasing the risk of a crash. If one has two drinks the risk goes up by twice; if five drinks it goes up by 15 times.

In this broadcast I brought up the fact that prescriptions and NON-prescription medications can increase your risk too. Not as much hard data is available on this subject, but one study showed anti-anxiety medications to raise your risk by two times. Some other medications known to be a problem are narcotic pain relievers, sleeping pills, and muscle relaxants. All of these are commonly used for back pain, insomnia, and other conditions. Over the counter cold and allergy medications can be a problem. Decongestants can make you jittery and contribute to excessively aggressive driving. Antihistamines can impair alertness.

When any of these are combined with alcohol, the risk is increased. Caffeine cannot reverse the effects of alcohol and itself can increase risk due to "road rage." Of course, illicit drugs can increase one's risk just as legal ones can.

The risk of traffic fatalities is highest in men and for men peaks in the mid-twenties. For women, there are two peaks- one in the mid-twenties and another in the mid-forties.

## **General Activities**

- Attended the Professional Advisory Committee meeting for the Division of Community Health.

I was particularly struck by an observation of one of the members that the cost of generic prescriptions is going up very rapidly and at the same time the number of producers of generics is decreasing. The harmful trend is cost and is coming at a time when increasing numbers of brand name drugs are going off patent and will be available as generics and prescription drug plans emphasize the use of generics. This dynamic will hamper health care cost containment since drug costs are major drivers behind the double digit increases in health care costs and premiums.

- Attended the annual Blood Borne Pathogen meeting for the County in which we reviewed the County's policies and procedures related to protecting our co-workers from exposure and infection with blood borne pathogens.

### **Upcoming Presentations**

I have been invited to present as part of a panel the impact of health reform on the Tompkins County Health Department and private practice. I would be part of a panel and present for about 10-15 minutes. The other panelists would be from other health care sectors and would include DSS.

The date is February 16<sup>th</sup> at 7:00 P.M. - location to be determined.