

**Medical Director's Report  
Tompkins County Board of Health  
May 2012**

**Pertussis**

Occasional cases of Pertussis are still cropping up within the community. These are effectively being managed by public awareness and early reporting of symptoms, with encouragement of vaccination of persons who have not received a full vaccination.

**Influenza**

Through the end of March, influenza activity remained relatively low throughout the country and throughout the season. Across the country influenza like illness was 2%, which is below a national baseline level of 2.4%. There are two regions which reported influenza like illness above our regions specific baseline. Three states with moderate activity. Six states experienced low activity and 41 states, including New York City, experienced minimal activity.

Laboratory positive specimens for influenza seemed to have peaked during week 11 of this year and appear to be on their way downward.

A recommendation for the composition of 2012-2013 influenza vaccine has been made at this point. The recommendation changes one component to influenza A H3N2 and also the influenza B component of the vaccine, compared to the 2011-2012 vaccine. The other influenza A component (H1N1) will remain unchanged.

Drug resistance; high levels of resistance to adamantane (amantadine and rimantadine) persist. There are cases of oseltamivir drug resistance that have been detected worldwide. Use of oseltamivir or zanamivir continues to be recommended.

As a result of the mild influenza year, adult and pediatric deaths are at a minimum, with a total of 4 pediatric deaths, and overall the proportion of deaths attributed to the influenza like illness and complications was below the epidemic threshold. A total count is not available at this time.

**Notes on the Travels of a Medical Director**

In the course of my work, I am often led into various topics and pathways which the ordinary individual is not. Most recently, the question of formaldehyde and cemeteries and water supplies came up.

The concern being, whether and what regulations exist with regard to water supplies, ground water and formaldehyde used in embalming. This led me to look into embalming and the fluids used, as well as what literature I was able to access with regard to studies regarding cemeteries and leaching of formaldehyde from them.

From what I was able to learn, there is not very much information on this topic. Formaldehyde is a recognized carcinogen. Inhalation and ingestion are both potential routes of exposure.

Some studies using adsorbents to limit the transmission of formaldehyde through the environment were done and clay was found to be one of the most practical and useful of these. However, there aren't any specific recommendations on how to employ this idea.

In general, it appears that the separation of a cemetery from a water supply is the best strategy to be employed. The exact distance to be employed is not cut in stone apparently.