



National Adult and Influenza Immunization Summit

Influenza Activity Spotlight

2013–2014 Season

Issue #12 — November 11, 2013

Reminder: Summit calls are scheduled every Thursday at 3 p.m. ET, unless cancelled. Thank you for your continued participation. Please email [L.J Tan](#) or [LaDora Woods](#) if you have any updates on activities to provide to the Summit.

1. National Adult and Influenza Immunization Summit Call – November 11, 2013

Announcements – L.J Tan (IAC)

L.J provided a brief preview of future calls. Plans include having a sanofi representative present recently released data on the effectiveness of high-dose influenza vaccine, a discussion of a new Vaccine publication on a different way to look at data from the Cochrane review of influenza vaccine, and a CDC briefing on upcoming plans for NIVW.

Influenza Surveillance Update – Lynnette Brammer (CDC)

Lynnette gave a summary of the influenza data for Week 43, which ended on October 26. Of the 3,241 specimens tested this season, 145 (4.1%) have been positive. Ninety-three percent of these positives were influenza type A, and the remaining 7% were type B. Of the A specimens which were subtyped, 80% were H1N1 and 20% were H3N2. Only 3 specimens have been antigenically characterized; all were H1N1 and similar to the A/California component of this season's vaccine. ILI accounted for 1.2% of patient visits. Reports of influenza activity have been received from all HHS regions, but all 10 regions remain below baseline levels. The Southern and Southeastern regions have submitted the largest number of reports. Three states (Louisiana, Mississippi, and Texas) have reported low levels of activity, while the remaining states and New York City reported minimal activity. Geographic spread reports indicate regional spread in Puerto Rico and Alabama, while 4 states (Mississippi, Nevada, South Carolina, and Texas) have reported local spread, 30 states and Guam have reported sporadic spread, and 15 states indicate no spread. The 120-cities reports are below the epidemic threshold. No pediatric deaths were reported during Week 43. In response to a request for information, L.J will determine how frequently the CMS data for influenza coverage rates in Medicare beneficiaries is updated, and he will report this information in a future call.

National Council on Aging's *Flu + You* Campaign for Older Adults – Christine Harding (NCOA)

Christine presented information on the NCOA's *Flu + You* [campaign](#). The campaign, now in its second year, disseminates information to older adults and their caregivers about the dangers of influenza, the importance of annual vaccination, and available vaccine options. This year's campaign includes a new PSA featuring Lee Majors, which may be seen on [YouTube](#). The response to the PSA has been quite positive; it currently is in the top 2% of 1,600 PSAs in rotation.

The NCOA has just completed a 12-city (mostly in Pennsylvania, Ohio, Colorado, and Florida) media and event tour, and they have distributed educational materials to over 1,000 aging/senior health organizations. The organization also is distributing free toolkits and materials via their website at

www.ncoa.org/flu. The website also contains a Content Capsule widget that can be embedded on websites or social media channels.

Other Items – Litjen Tan (IAC)

L.J reminded participants that influenza and pneumococcal [pocket guides](#) are available for bulk order.

2. CDC/Influenza Division Weekly Influenza Surveillance Report and CDC Key Points

The CDC weekly influenza surveillance report for week 44 (ending November 2, 2013) is available [here](#) and region specific may be found [here](#). During week 44, 5.3% of all deaths reported through the 122-Cities Mortality Reporting System were due to P&I. This percentage was below the epidemic threshold of 6.3% for week 44. Two influenza-associated pediatric deaths that occurred during the 2012–2013 season were reported to CDC during week 44; one was associated with an influenza A (H3) virus, while the other was associated with an influenza A virus for which no subtyping was performed. These deaths bring the total number of reported pediatric deaths for that season to 169. No influenza-associated pediatric deaths for the 2013–2014 season have been reported to CDC.

Nationwide during week 44, 1.4% of patient visits reported through the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) were due to influenza-like illness (ILI). This percentage is below the national baseline of 2.0%. ILI is defined as fever (temperature of 100°F [37.8°C] or greater, and cough and/or sore throat. An Influenza Summary [Update](#) of the influenza activity reported by state and territorial epidemiologists indicates the geographic spread of influenza viruses, but does not measure the intensity of influenza activity.

During week 44, one state (Mississippi) experienced moderate ILI activity (Mississippi), while three states (Arkansas, Kentucky, Louisiana) experienced low ILI activity, and forty-six states (Alabama, Alaska, Arizona, California, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Maine, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, and Wyoming) and New York City experienced minimal ILI activity. Data were insufficient to calculate an ILI activity level from the District of Columbia.

Archives of previous *FluViews* are available [here](#), and seasonal influenza key points for November 8, 2013 are available [here](#).

3. More Information from CDC

• China Reports 4 New Cases of H7N9 Infections

China has recently reported 4 new cases of human infection with avian influenza A H7N9. On November 8 CDC released [key points](#) related to these recent infections.

• National Influenza Vaccination Week

CDC will hold National Influenza Vaccination Week (NIVW) during the week of December 8-14, 2013. Be sure to visit the NIVW [home page](#) for recently updated print materials and to submit your NIVW activities. Additional resources will be added over coming weeks, so please check again soon for the NIVW media toolkit, select matte articles, and more details on CDC's NIVW plans.

4. New Universal Logo for Immunization Advocates

In the spring of 2013, immunization coalitions around the country voiced a desire for a universal symbol. Putting thought into action, a small group representing the coalitions worked together to identify several potential designs. These designs were put forward, and through a public vote, a symbol was chosen, and it is ready and available for use by all immunization advocates.

The symbol is designed for all immunization organizations and advocates to display as a way to show solidarity in their awareness of and support for immunization. The concept is that, just as a pink ribbon is associated with breast cancer, and a puzzle piece with autism, so this image will be the recognized symbol of immunization. Organizations are encouraged to work together and use this symbol as a statement of broad support of immunization. It is a reflection of all of our voices and is a solid addition to each organization's individual image library. The symbol does not replace organizational or campaign logos, but is rather a symbol to be used when we wish to collectively present a united front in support of immunization.



The umbrella, representing protection of the community, tells the story of the power of immunizations. The symbol, in several formats, is housed on [Google Docs](#), and it is available to all immunization advocates as a free download. There is also a *Style Guide* and *Read Me Guide* on how to download and use the symbol.

5. Upcoming Vaccine Education Center (VEC) Webinar

The next VEC [webinar](#) will be held on Wednesday, November 13, at noon EST. Dr. Paul Offit will be discussing the following:

- Mening: Should we give it routinely to all infants?
- PCV13: Can we give one fewer dose?
- Zoster: Is it time to give it to younger adults?
- HPV vaccine: Why are immunization rates still so low?

6. Kaiser Permanente Flu Prevention Tweet Chat

Get the facts about the flu: Join a live twitter discussion with Kaiser Permanente infectious disease physicians, Randy Bergen, MD, Margaret Khoury, MD, and Eric Harker, MD, as they talk about prevention and treatment this flu season. The tweet chat takes place on November 14 at 1 p.m. Pacific time. To participate, click [here](#) and enter #kpehealthychat.

Times in various time zones

Hawaii	9 – 10 am
Pacific	noon – 1 pm
Mountain	1 – 2 pm
Central	2 – 3 pm
Eastern	3 – 4 pm

If you have questions about the November 14 TweetChat, please contact [Vince Golla](#) or [Lisa Brill](#).

7. NACCHO Webinar: “Becoming an In-Network Provider: The Health Department Perspective.”

This [webinar](#) will be held on November 18, 2013, from 3 – 4 p.m. ET. The public health system is transforming due to the Affordable Care Act and the decline in federal and state discretionary funds. Public health departments have started to seek alternative sources of revenue to continue providing services in their community. Many health departments are exploring billing for clinical services provided and are trying to become a contracted in-network provider with health plans.

The webinar is a 60-minute presentation where speakers from Mississippi, New York, and North Dakota will share their contracting experiences. Attendees will learn about contracting processes for health departments; strategies to address barriers when contracting with third-party payers; and what resources are available in NACCHO's *Billing for Clinical Services Toolkit*.

8. Calling All School Nurses Leading Immunization Efforts!

NASN wants to recognize your efforts – in the current school year or past years - to promote immunizations. Three individuals will be announced on School Nurse Day (May 2014), and recognized on the NASN website and in NASN publications (print and electronic). Applications are now being accepted through March 2014. Click [here](#) to learn more or submit your application.

9. Summit Website Offers Wonderful Resources on Influenza Vaccination!

Remember to visit the Summit [website](#) for the latest on influenza immunization resources and to view archived copies of the weekly updates.

10. National Influenza Vaccination Week (NIVW)

National Influenza Vaccination Week is Dec 8 – 14 this year. Click [here](#) for more information.

Influenza Immunization Highlights

11. Cochrane Re-arranged

Influenza vaccine effectiveness review reports recently published by the Cochrane Collaboration have questioned the benefit of influenza vaccination, causing confusion amongst the elderly and their healthcare providers.

Encouraged by the invitation of the Cochrane authors to produce “any alternative interpretation” of the evidence, Walter E.P. Beyer (Department of Viroscience, Erasmus MC, Rotterdam, The Netherlands); Janet McElhaney (Advanced Medical Research Institute of Canada, Ontario, Canada); Derek Smith (Department of Zoology, University of Cambridge, UK); Arnold Monto (School of Public Health, University of Michigan, US); Jonathan S. Nguyen Van-Tam (University of Nottingham, UK); and Ab Osterhaus (Head of Department of Viroscience, Erasmus MC, Rotterdam, The Netherlands) have now conducted a new collaborative study on the same data used by the Cochrane statisticians — 75 articles from a database of 4,000 publications, using mainly observational studies. In their [report](#) published in the journal *Vaccine*, the authors state that when the published data is arranged according to the basic sequence of events in the patient journey (exposure, infection, outcome/disease, and observation) to construct a biological framework instead of the formal, mathematical approach. “The findings of this ‘Cochrane re-arranged study’ provide ample evidence of the ability of influenza vaccines to reduce the risk of influenza infection and death, but also – and this is very important – the risk of frailty.” says Dr. McElhaney. “In other words, within a biological framework, Cochrane’s data reveal the efficacy of vaccinating the elderly.”

A press release from the European Scientific Working Group on Influenza (ESWI) is available [here](#).

12. Memorial Sloan Kettering Aims for 90% Staff Vaccinated for Influenza

Most staff at Memorial Sloan Kettering Cancer Center in New York have been vaccinated against influenza, hospital officials say. The [results](#) come about nine weeks into a campaign to have employees vaccinated against influenza. Responding to new regulations from New York State's Department of Health requiring all healthcare personnel to be vaccinated against influenza or wear a

mask in areas where patients may be present, Memorial Sloan-Kettering Cancer Center kicked off a vigorous campaign to raise awareness of the new rules and to vaccinate employees.

13. Managing the Human Toll Caused by Seasonal Influenza: New York State's Mandate to Vaccinate or Mask

Dr. Art Caplan states in this [editorial](#) in JAMA that all health care personnel are obligated to honor the core medical ethics principle of "do no harm," as a matter of both professional ethics and the common law. The way to do this is to vaccinate or wear a mask.

Health care workers have a distinct duty toward those who are especially susceptible and who cannot protect themselves through vaccination such as elderly individuals, newborns, and those with immune disorders. The predictably poor response to influenza vaccine among the medically fragile and very elderly patients represents an especially important ethical obligation for health care worker vaccination and masking—to reduce transmission to individuals who are unlikely to or cannot benefit from vaccination.

Those who care for patients have an obligation to act as ethical exemplars for others. By achieving high vaccination rates in health care institutions or masking, health care workers can much more credibly urge others to seek flu and other vaccines.

The moral case for vaccination or masking is incontrovertible. Government policy, if it is to be grounded firmly in ethics and science, must acknowledge the special duties that health care professionals have and find ways to protect the public health, as well as the health of the vulnerable and the health care workforce. Imposing a requirement to mask on health care workers who do not receive influenza vaccination is absolutely consistent with sound and ethical public policy.

14. China Reports 4th H7N9 Case Since September

A 64-year-old farmer in east China's Zhejiang Province has been [confirmed](#) to have contracted H7N9 bird flu, bringing the total number of avian influenza cases in China to four this autumn, local health authorities said on Saturday.

15. Wet Market Stays Open Despite Bird Flu Case

Guangdong will not close a wet [market](#) near where a three-year-old boy is confirmed this week to have contracted the H7N9 strain of bird flu, because authorities have to meet "the public's need to eat fresh chicken", a provincial health official says.

The provincial line contrasted sharply with action taken by Shanghai and other regions further north, which closed wet markets after H7N9 was found. The measure is believed to be the most effective in curbing the spread of the deadly virus.

16. Why There's No Foolproof Way to Ward Off the Flu

Scientists are learning more about the disease, but there's no foolproof tool to protect us. You got a flu shot. You've kept your hands away from your mouth, eyes and nose, and you've kept yourself away from sick co-workers.

So how come you still came down with the flu?

The plain truth: It isn't easy to protect against this tenacious, changeable virus.

"The more we learn about influenza, in many ways the less we know," said Michael Osterholm, director of the Center for Infectious Disease Research and Policy at the University of Minnesota's School of Public Health.

According to Osterholm, other healthy habits also have not proven to effectively guard against the flu. Other health officials disagree. Eating a healthy diet, sleeping well and getting enough exercise can help to prevent infectious diseases — including the flu — by supporting a healthy immune system, said Dr. Greg Poland, director of the Mayo Clinic's vaccine research group.

Poland and Osterholm do agree that the flu vaccine remains the best weapon available, even though it has its limitations.

The full story is available [here](#).

17. Vermont Hospital Makes Flu Shots Mandatory for Staff

While a Vermont hospital has ordered mandatory annual influenza [vaccinations](#) for staff and volunteers, most appear to be sticking to a policy of strongly encouraging the flu shots rather than making them a requirement. "We feel that it's another way to keep our patients safe," said Alonzo Tapley, director of quality and risk management at Mount Ascutney Hospital and Health Center in Windsor, which made its mandatory policy public this week.

He said exceptions could be made in the cases of people with medical reasons or religious objections to the vaccination. So far, fewer than 10 people out of about 700 staff, volunteers and outside providers with privileges at Mount Ascutney have asked for such exemptions, Tapley said. Most Vermont hospitals push employees and volunteers to get the shots, designed to slow the spread of the flu, but stop short of telling workers their jobs are on the line if they don't, officials said.

Mount Ascutney was following the lead of two nearby New Hampshire hospitals, Dartmouth-Hitchcock Medical Center and New London Hospital, The Valley News of Lebanon, N.H., reported this week.

18. WHO Announces Start of Influenza Season

WHO/Europe collects surveillance [data](#) on influenza viruses and the number of cases of influenza in the 53 countries in the European Region to find out what type of virus is circulating, where and how many people are becoming sick. WHO/Europe publishes this information in a weekly bulletin, *Euroflu*, on its [website](#) from mid-October to the end of the seasonal influenza season in April.

WHO/Europe also develops and publishes guidance and recommendations for health professionals, those who study and track influenza, and the public. The guidelines cover a range of issues, such as recommendations for influenza vaccination, case management and standards for infectious-disease and influenza laboratories.

19. LAIV Non-Inferior to Inactivated Influenza Vaccine in Young Children

In children younger than 2 years, the live-attenuated influenza vaccine is highly effective when compared with placebo and as effective as the inactivated influenza vaccine, according to recent study [findings](#) published in *The Pediatric Infectious Disease Journal*. Additional information is available [here](#).

20. Flu More Severe in Immunocompromised Patients

Patients who are immunocompromised are at increased risk for more severe influenza disease that appears to be more difficult to prevent and treat, according to [researchers](#) from the National Institute of Allergy and Infectious Diseases.

"A better understanding of the basic human pathogenesis of influenza will be necessary if we are to address how to prevent and treat influenza in a more individualized way, especially for those who are immunocompromised," the researchers [wrote](#) in *Clinical Infectious Diseases*. "It is clear that current antivirals are not adequate in all circumstances [and] current vaccine strategies must be improved."

21. US Reports Outbreak of Variant Influenza A (H3N2v) Virus

Researchers from the CDC led by M.A. Jhung identified laboratory-confirmed cases of H3N2v and used a standard case report form to characterize illness and exposures. They considered illness to result from person-to-person H3N2v virus transmission if swine contact was not identified within four days prior to illness onset.

The authors [conclude](#) that in a major outbreak of H3N2v influenza, the majority of cases reported exposures suggesting swine contact at an agricultural fair was a risk for H3N2v virus infection. The researchers identified limited person-to-person H3N2v virus transmission, but found no evidence of efficient or sustained person-to-person transmission. According to the researchers, fair managers and attendees should be aware of the risk of swine-to-human transmission of influenza viruses in these settings.

The full story on this research may be viewed [here](#).

22. Sanofi Pasteur is Looking for 'FLUgitives'; Swiftwater Company Launches National Program Urging Everyone to Get a Flu Vaccine

FLUgitives hide in every town in America: your workplace, your gym, the grocery store and even in your home.

"If you haven't gotten a flu shot yet, then you are definitely a FLUgitive," said Michael Szumera, director of public relations and communications for the vaccines division of Sanofi-Aventis Group. As a manufacturer of influenza vaccine, the Swiftwater pharmaceutical company has launched a national [campaign](#) to "round up" these reluctants.

Adult and Adolescent Immunization Highlights

23. HPV Vaccination of Boys in Primary Care Practices

In this HPV [survey](#), a nationally representative sample of pediatric and family medicine physicians were contacted to identify their baseline knowledge and attitudes about HPV vaccine and disease, understand their approach to offering HPV vaccine to females vs. males, understand the providers' barriers to HPV administration for males, and identify best practices that were associated with offering the vaccine to males.

In this survey, provider knowledge did not seem to be a significant barrier. Therefore, interventions that focus on implementation strategies would appear to have a strong chance of success. One way to push physicians to offer the vaccine to males would be to convince them of the severity of HPV disease in males.

24. Wild Poliovirus Outbreak In Syria, WHO Warns Of International Spread

The [World Health Organization](#) has said that wild poliovirus has been detected in Syria for the first time since 1999. In a press release on Monday, the global health agency said given the current situation in the war-torn country, "frequent population movements across the region and the immunization level in key areas, the risk of further international spread of wild poliovirus type 1 (WPV1) across the region is considered to be high." A surveillance alert has been issued for the region to actively search for additional potential cases, WHO added.

WHO's International Travel and Health recommended that all travelers to and from polio-infected areas be fully vaccinated against polio.

The Washington Post published an [editorial](#) noting that the polio outbreak demands an immediate response.

25. Ethics of Mandatory Vaccination for Health Care Workers

Healthcare workers (HCWs) are at increased risk of contracting infections at work and further transmitting them to colleagues and patients. Immune HCWs would be protected themselves and act as a barrier against the spread of infections and maintain healthcare delivery during outbreaks, but vaccine uptake rates in HCWs have often been low. In order to achieve adequate immunization rates in HCWs, mandatory vaccination policies are occasionally implemented by healthcare authorities, but such policies have raised considerable controversy. [Here](#) we review the background of this debate, analyze arguments for and against mandatory vaccination policies, and consider the principles and virtues of clinical, professional, institutional and public health ethics. We conclude that there is a moral imperative for HCWs to be immune and for healthcare institutions to ensure HCW vaccination, in particular for those working in settings with high-risk groups of patients. If voluntary uptake of vaccination by HCWs is not optimal, patients' welfare, public health and also the HCW's own health interests should outweigh concerns about individual autonomy: fair mandatory vaccination policies for HCWs might be acceptable.

26. HPV Vaccination and Sexual Behavior in a Community College Sample

The goals of this [study](#) were to understand (a) whether the HPV vaccine was associated with risky sexual behavior among a diverse sample of female adolescents and young adults, and (b) to better understand the chronology of HPV vaccination and sexual behavior. About 38 % reported receiving at least one dose of the HPV vaccine. Many of those vaccinated (45 %) received the vaccine after having initiated sexual activity. The proportion of women who were sexually experienced did not differ by HPV vaccine status, nor did age at first intercourse, number of partners in the past year, or frequency of condom use. Current findings suggest that HPV vaccination is not associated with riskier sexual activity for the young women in this sample.

27. Hepatitis B Vaccination Coverage Among Health-care Personnel in the United States

In this [study](#) published in the November/December issue of *Public Health Reports*, The authors compared self-reported hepatitis B (HepB) vaccine coverage among health-care personnel (HCP) with HepB vaccine coverage among the general population and determined trends in vaccination coverage among HCP. 69.5% and 63.4% of HCP reported receiving ≥ 1 and ≥ 3 doses of HepB vaccine, respectively, compared with 27.1% and 23.0% among non-HCP. Among HCP with direct patient contact, 80.7% and 74.0% received ≥ 1 and ≥ 3 HepB vaccine doses, respectively. The 2010 HepB vaccine coverage estimate among HCP remained well below the Healthy People 2010 goal of 90%. Efforts to target unvaccinated HCP for preexposure HepB protection should be encouraged.

28. Two Wisconsin Sisters Claim a Cervical Cancer Vaccine Caused Ovaries to Function Improperly

Two Wisconsin sisters have filed a federal [claim](#), saying they believe a cervical cancer vaccine caused their ovaries to stop producing eggs. They claim their condition came from the Gardasil vaccine for the human papillomavirus, or HPV, according to the Wisconsin State Journal. Their attorney, Mark Krueger, told the newspaper it is the first allegation of its kind to reach a hearing through the National Vaccine Injury Compensation Program, a special court established to evaluate claims of harm from vaccines.

In a statement, the vaccine's maker, Merck and Co., says evidence doesn't support a relationship between the condition and vaccine. The Centers for Disease Control and the Food and Drug Administration say the vaccine is safe and can help prevent many of the 18,000 cancers in women and 8,000 cancers in men caused by HPV each year.

29. Spain Reports its First MERS Case; Woman Travelled to Saudi Arabia for Hajj

Health officials in Spain have [detected](#) the country's first case of MERS in a woman who recently returned from Saudi Arabia after attending last month's Hajj pilgrimage. The Spanish Ministry of Health said the woman was admitted to hospital in Madrid on Nov. 1 and is in stable condition.

In its press release, the ministry said it is following up with people who were in contact with her to determine if others have contracted the sickness. That will likely involve tracking people who travelled on the same plane or planes with the ill woman, who journeyed back to Spain shortly before being hospitalized. The woman was already sick before she left the Kingdom of Saudi Arabia, a World Health Organization expert said Wednesday.

With this new case, there have been 151 confirmed cases; 64 of those people have died. And at least 127 of those illnesses were contracted in Saudi Arabia.

30. NIH Launches Trial of Investigational Genital Herpes Vaccine

Researchers have launched an early-stage clinical [trial](#) of an investigational vaccine designed to prevent genital herpes disease. The National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health, is sponsoring the Phase I trial, which is being conducted at the NIH Clinical Center in Bethesda, MD. The trial will test an investigational HSV-2 vaccine candidate, called HSV529, for safety and the ability to generate an immune system response. The investigational vaccine manufactured by Sanofi Pasteur was developed by David Knipe, Ph.D., professor of microbiology and immunobiology at Harvard Medical School, Boston.

For more information about this clinical trial, click [here](#) and use the identifier NCT01915212.

31. HPV Vaccines Not As Effective for African-American Women

The strains of the human papillomavirus (HPV) most common in African-American women are not targeted by the currently-available HPV vaccines. A new [study](#), funded by the National Cancer Institute, found that two subtypes of HPV used in current vaccines are half as likely to be found in African-American women than in white women. The two vaccines on the market protect against HPV strains 16 and 18, and this new study finds that these strains are more frequent in white women than in black.

A news story on this study is available [here](#).