Items for this week’s EPI Update include:
- Iowa’s annual notifiable disease report
- TB skin test antigens shortage update
- 2012-2013 influenza season summary report
- Meeting announcements and training opportunities

Iowa’s annual notifiable disease report
Iowa’s annual notifiable disease report has been compiled and posted on the IDPH website. In 2012, there were more than 79,000 lab results of infectious disease or other conditions, as well as 850 cases reported with no lab results; about 100,000 blood lead tests were also submitted to IDPH. There were 53 outbreaks investigated that affected more than 800 people.

In 2012, the overall number of vaccine-preventable diseases decreased when compared to the three-year average (2009 to 2011); however, the number of pertussis cases increased significantly. There were 1,736 cases of pertussis reported to IDPH in 2012, a 344 percent increase over the three-year average of 391 cases. There were also increases in several other infections, including chlamydia, gonorrhea, syphilis and several enteric diseases such as salmonellosis, shigellosis, \textit{E. coli} and other shiga-toxi-producing bacterial infections.

To view the complete report, visit [www.idph.state.ia.us/Cade/Default.aspx#CR](http://www.idph.state.ia.us/Cade/Default.aspx#CR) under “Reports.”

TB skin test antigens shortage update
CDC issued an update to the previous notice regarding the nationwide shortage of TB Skin Test Antigens ([emergency.cdc.gov/HAN/han00355.asp](http://emergency.cdc.gov/HAN/han00355.asp)). Providers in Iowa continue to report difficulty in obtaining Tuberculin Skin Test Antigen. The original recommendations released by the Iowa TB Control Program remain current. To access these recommendations, visit [Recommendations 9-4-13](#).

2012-2013 influenza activity season summary report
The 2012-2013 influenza season in Iowa began earlier, peaked earlier, and was more severe than recent influenza seasons, particularly for people 65 years and older. Influenza A (H3N2) was the strain most commonly identified overall for the season, but influenza B and, to a lesser extent; influenza A (2009 H1N1) viruses were also identified.

To view the report, visit [www.idph.state.ia.us/Cade/Influenza.aspx?pg=FluSurveillance](http://www.idph.state.ia.us/Cade/Influenza.aspx?pg=FluSurveillance) under “Final Reports.”
**Meeting announcements and training opportunities**

Save-the Date: 2013 Influenza Teleconference/Webinar, October 22, 2012, 12:00 noon to 1:00 p.m.

**Online Emergency Responder Training Now Available**

The Emergency Responder Health Monitoring and Surveillance online training course is now available. This course provides a recommended health monitoring and surveillance framework, referred to as the Emergency Responder Health Monitoring and Surveillance (ERHMS) system, which includes specific recommendations and tools for all phases of a response, including the pre-deployment, deployment, and post-deployment phases. The online training takes about three hours to complete and CEUs are available for a variety of medical and healthcare providers. For more information, visit [www.cdc.gov/niosh/topics/erhms/](http://www.cdc.gov/niosh/topics/erhms/).

**Have a healthy and happy week!**

Center for Acute Disease Epidemiology
Iowa Department of Public Health
800-362-2736