EPI Update for Friday, June 6, 2014
Center for Acute Disease Epidemiology (CADE)
Iowa Department of Public Health (IDPH)

Items for this week’s EPI Update include:

- Polio booster vaccine requirements for travelers
- CDC Vital Signs: Preventing Norovirus Outbreaks
- Measles cases in the United States reach 20-year high
- Meeting announcements and training opportunities

Polio booster vaccine requirements for travelers
Health care workers and travelers should be aware of a new WHO vaccination recommendation for persons planning travel (for greater than four weeks) to countries with ongoing poliovirus transmission. These countries include Cameroon, Pakistan, Syria, Afghanistan, Equatorial Guinea, Ethiopia, Iraq, Israel, Somalia and Nigeria. The World Health Organization (WHO) recommends polio boosters among all departing residents and long-term (greater than four weeks) travelers to these countries.

U.S citizens who plan to travel to any of the polio-infected countries should have documentation of a polio booster within the past year in their yellow “International Certificate of Vaccination” in order to avoid delays in transit. For more information, visit www.polioeradication.org/Portals/0/Document/Emergency/PolioPHEICguidance.pdf.

CDC Vital Signs: Preventing Norovirus Outbreaks
This week, a CDC “Vital Signs” reported norovirus as the leading cause of acute gastroenteritis and foodborne disease in the United States, causing an estimated one in 15 U.S. residents to become ill each year as well as 56,000 to 71,000 hospitalizations and 570 to 800 deaths (predominately among young children and the elderly).

Norovirus is the most common cause of outbreaks reported in Iowa. To reduce transmission, ill patients to should stay home for 24 hours after their symptoms stop. Ill persons should not cook or touch food meant for others, until their symptoms have ceased for at least 48 hours.

To access the Vital Signs, visit www.cdc.gov/vitalsigns/norovirus/index.html. To access a fact sheet on how to perform environmental cleaning after contamination with norovirus, visit www.idph.state.ia.us/idph_universalhelp/blob.aspx?ObjID={49BF87FD-D485-425C-BB82-8368C6FC6587}.

Measles cases in the United States reach 20-year high
Between January 1 and May 23rd, 2014, 288 cases of measles in the United States were reported to CDC. This is the largest number of measles cases in the United States reported in the first five months of a year since 1994.

Nearly all of the measles cases this year have been associated with international travel by unvaccinated people. Measles is a highly contagious viral illness and is considered a public health emergency. Patients who present with fever (>101 degrees F) and rash with cough, coryza, and/or conjunctivitis should be isolated immediately and evaluated for measles,
especially if the patient is unvaccinated and recently traveled internationally or was exposed to someone else who recently traveled and had symptoms consistent with measles.

Public health should be contacted immediately (even in the middle of the night!) if measles is suspected, as public health can facilitate emergency laboratory testing and assist in implanting immediate control measures.

For more information about the CDC press release, visit www.cdc.gov/media/releases/2014/p0529-measles.html.

Meeting announcements and training opportunities
None

Have a healthy and happy week!
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