Items for this week’s EPI Update include:

- 2015-16 seasonal influenza vaccine recommendation
- Measles activity update
- Foodborne illness source attribution estimates
- Meeting announcements and training opportunities

2015-16 seasonal influenza vaccine recommendation

On February 26, 2015, the World Health Organization made its recommendation for the 2015-16 seasonal influenza vaccine, recommending that trivalent vaccines in the 2015-2016 northern hemisphere winter influenza season contain the following strains:

- A/California/7/2009 (H1N1)pdm09-like virus;
- A/Switzerland/9715293/2013 (H3N2)-like virus;
- B/Phuket/3073/2013-like virus (Yamagata lineage).

It is recommended that quadrivalent vaccines contain the above three viruses and a B/Brisbane/60/2008-like virus (Victoria lineage). This is the same fourth strain as was included in this season’s quadrivalent vaccine. The A/H3N2 and B/Phuket strains are different from those which were included in the 2014-15 vaccine.

These recommendations take into consideration that in North America this season A/H1N1 activity was sporadic, A/H3N2 activity was widespread from November to January, and B activity was sporadic, but increased at the end of the season and was predominantly Yamagata lineage. A change in the H3N2 vaccine strain had been expected, since most of the circulating H3N2 viruses in the U.S. this season (and a number of other countries) did not matched well with this season’s vaccine.

Measles activity update

There have been no confirmed cases of measles in Iowa; however, measles cases continue to be identified across the U.S. Since January 1, 2015, 170 measles cases have been identified in 17 states. Our neighboring states of NE (2), MN (1), and IL (15 - all in the Chicago area) have reported cases.

If you suspect your patient has measles, isolate the patient and contact IDPH immediately. During business hours, call 800-362-2736. After business hours, call the Iowa State Patrol at 515-323-4360, which will then contact the epidemiologist on-call.

Foodborne illness source attribution estimates
The Interagency Food Safety Analytics Collaboration (IFSAC), consisting of CDC, FDA and FSIS, have analyzed outbreak data to determine which foods are responsible for illnesses related to four major foodborne bacteria:

- **Salmonella**
  - Seeded vegetables - beans, cucumbers, etc. (18 percent)
  - Eggs (12 percent)
  - Fruits (12 percent)
  - Chicken (10 percent)
  - Beef (9 percent)
  - Pork (8 percent)
  - Sprouts (8 percent)

- **Escherichia coli O157 (E. coli O157)**
  - Beef (46 percent)
  - Vegetable Row Crops (36 percent)

- **Listeria monocytogenes**
  - Fruits (50 percent)
  - Dairy (31 percent)

- **Campylobacter**
  - Dairy (66 percent)
  - Chicken (8 percent)


Meeting announcements and training opportunities

**2015 Iowa Immunization Conference** on October 29, 2015 at Veterans Memorial Community Choice Credit Union Convention Center, Des Moines. Continuing Education will be offered. Presenters include:

- Paul Offit, MD, *Children’s Hospital of Philadelphia;*
- Wendy Swanson, MD, *Seattle Children’s Hospital;*
- Noel Brewer, PhD, *University of North Carolina; Director of Cervical Cancer-Free North Carolina;*
- Sandra, Fryhofer, MD, *Adjunct Associate Professor of Medicine at Emory University;*
- Karen Ernst, *Director, Voices for Vaccines;* and
- William Atkinson, MD, *Immunization Action Coalition, Associate Director for Immunization Education*

In conjunction with the conference, on October 28, 2015 CDC will present a one-day overview on the principles of vaccination, general recommendations, immunization strategies for providers, specific information about vaccine-preventable diseases and the vaccines that prevent them.

**Have a healthy and happy (and much much warmer – YES!) week!**
Center for Acute Disease Epidemiology