

April is Sexually Transmitted Disease Awareness Month

The Vermont Department of Health is supporting the Centers for Disease Control and Prevention (CDC) proclamation that April is sexually transmitted disease (STD) awareness month. A number of providers around the state will be doing special campaigns to promote awareness of STDs in an effort to increase screening.

Annually, there are nearly 19 million new cases of STDs in the U.S., but obvious symptoms often don't develop and many people who contract an STD are unaware they and their partners are at risk. Therefore, routine screening of those at risk, even in the absence of symptoms, is essential.

Currently, Vermont's first quarter reporting trends are similar to that of 2008. In 2008, chlamydia was the most frequently reported STD in the state with 1,190 cases. In contrast, only 37 cases of gonorrhea were reported in 2008. Over the previous five years, incidence rates for these two diseases have remained fairly stable. Vermont has experienced an increase in reported cases of infectious syphilis, as demonstrated in the table below. Many of the syphilis cases reported in 2007 also had an HIV diagnosis. According to a national two year trend analysis (2006 and 2007) from the CDC, Vermont had the third greatest percentage of growth of infectious syphilis cases.

Number of STD Cases Reported by Year, Vermont, 2004-2008

Infection	2004	2005	2006	2007	2008
Chlamydia	1,137	969	1,191	1,057	1,190
Gonorrhea	86	66	72	64	37
Infectious Syphilis	1	1	3	10	11

Clinical cases and positive laboratory results for chlamydia, gonorrhea, or syphilis are reported by laboratories and/or medical providers to the HIV/AIDS, STD, and Hepatitis C Program. Once the report is received, a trained disease specialist contacts the medical provider to follow up on background information related to the patient in terms of presenting symptoms and treatment. After an exchange of information occurs between the medical provider and the health department, if there are no concerns with contacting the patient, trained staff will attempt to interview them confidentially. The purposes of the interview are to minimize the impact of health consequences to the patient, to educate them about the infection, and to elicit partner information in order to offer care to other people at risk for sexually transmitted infections.

Flu Activity Update & Antiviral Health Advisory

Influenza activity continues to be reported by hospital laboratories and sentinel medical practices. Surveillance is based on the number of patients with influenza-like illness symptoms by sentinel practices, lab reports of positive rapid influenza tests and PCR tests from hospital labs, and positive viral cultures. The VDH Laboratory is reporting influenza A/H1, A/H3, and B viruses, with the majority being A/H1. A health advisory (See: <http://www.healthvermont.gov/advisory/documents/020609Influenza-OseltamivirResistance.pdf>) was sent to providers on 2/6/09 regarding the use of antiviral medications when there may be Tamiflu®-resistant influenza A/H1N1 flu strains circulating. Call 802-863-7240 24/7 for guidance on prevention and control of outbreaks in institutional settings.

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Flu Activity Update

Chart: 2009 Selected Reportable Diseases To Date

Vermont – Selected Reportable Diseases – 2009

(Data through MMWR Week 12 – 03/28/09) – Provisional

	Campylobacter	Cryptosporidium	E. coli*	Giardia	Group A Strep Inv	Hepatitis A	Hepatitis B - Acute	Hepatitis B - Chronic	Hepatitis C - Acute	Hepatitis C - Chronic	Legionellosis**	Listeriosis	Lyme §	Meningococcal Inf.	Pertussis	Salmonella	Shigella	Tuberculosis**	Varicella
Age																			
<5	5	1	0	6	0	0	0	0	0	0	0	0	4	1	0	2	0	0	4
5-14	2	1	1	7	1	0	0	0	0	0	0	0	3	0	2	2	0	0	20
15-24	8	0	1	7	0	0	0	2	0	6	0	0	1	0	2	0	0	0	3
25-39	3	1	0	4	0	0	0	4	1	32	1	0	5	0	0	0	1	0	0
40-64	8	3	0	5	3	0	0	5	0	71	0	0	5	0	2	5	1	0	1
65+	5	0	0	4	2	0	0	0	0	1	0	2	3	0	0	2	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total (YTD)	31	6	2	33	6	0	0	11	1	110	1	2	21	1	6	11	2	0	28
5-yr Median (YTD)	17	6	2	28	6	0	0	†	1	†	1	0	†	0	15	11	1	1	†
County of Residence																			
Addison	4	0	0	0	1	0	0	1	0	2		0	3	1	0	0	0		4
Bennington	2	0	0	3	0	0	0	0	0	6		0	5	0	0	1	0		1
Caledonia	3	1	0	2	0	0	0	0	0	13		0	0	0	0	0	0		0
Chittenden	5	1	1	18	0	0	0	6	1	36		1	1	0	1	4	1		6
Essex	0	0	0	0	0	0	0	0	0	1		0	0	0	0	0	0		1
Franklin	3	0	0	0	0	0	0	0	0	0		1	0	0	0	0	0		2
Grand Isle	1	0	0	1	0	0	0	0	0	0		0	0	0	0	0	0		1
Lamoille	2	0	0	2	0	0	0	1	0	2		0	0	0	0	1	1		1
Orange	2	1	0	1	0	0	0	0	0	2		0	0	0	0	0	0		1
Orleans	1	0	0	0	0	0	0	0	0	7		0	1	0	1	1	0		1
Rutland	1	0	0	1	1	0	0	1	0	9		0	4	0	4	0	0		5
Washington	1	2	1	2	2	0	0	2	0	9		0	1	0	0	1	0		3
Windham	2	0	0	0	0	0	0	0	0	13		0	2	0	0	2	0		1
Windsor	4	1	0	3	2	0	0	0	0	10		0	4	0	0	1	0		1
Unknown	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0	0		0
Total (YTD)	31	6	2	33	6	0	0	11	1	110	1	2	21	1	6	11	2	0	28
VDH District Office																			
Barre	2	2	1	2	1	0	0	2	0	0		0	0	0	0	1	0		3
Bennington	2	0	0	3	0	0	0	0	0	0		0	0	0	0	1	0		1
Brattleboro	2	0	0	0	0	0	0	0	0	0		0	0	0	0	1	0		1
Burlington	5	1	1	16	0	0	0	1	0	0		0	0	0	1	4	1		5
Middlebury	4	0	0	0	1	0	0	1	0	0		0	0	1	1	0	0		5
Morrisville	2	0	0	2	0	0	0	1	0	0		0	0	0	1	1	1		1
Newport	1	0	0	0	0	0	0	0	0	0		0	0	0	0	1	0		2
Rutland	1	0	0	1	1	0	0	1	0	1		0	0	0	3	0	0		4
St. Albans	4	0	0	1	0	0	0	0	0	0		0	0	0	0	0	0		3
St. Johnsbury	3	1	0	2	0	0	0	0	0	1		0	0	0	0	0	0		0
Springfield	1	0	0	0	1	0	0	0	0	0		0	0	0	0	1	0		0
White River	4	2	0	4	0	0	0	0	0	0		0	0	0	0	1	0		2
Central Office	0	0	0	2	2	0	0	5	1	108		2	21	0	0	0	0		1
Total (YTD)	31	6	2	33	6	0	0	11	1	110	1	2	21	1	6	11	2	0	28

(802)863-7240

1(800)640-4374 (VT)

FAX: (802)865-7701

*Shiga toxin-producing Escherichia coli (STEC)

**This column partially obscured to protect patient confidentiality

§ Includes both confirmed & probable cases

†Data captured differently in previous years; no 5-year median available