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# ommunicable Disease Update

FEBRUARY 2019

# SCREENING DAIRY WORKERS FOR TB

In 2018, the Public Health Madison & Dane County Tuberculosis (TB) Program received a grant from the Wisconsin Tuberculosis Program to provide TB screening services to Dane County dairy farm employees, specifically underserved migrant workers who are crucial in maintaining day-to-day operations on Wisconsin dairy farms.

In a unique, dual protection strategy, while screening for TB in adults/humans, we are also protecting against TB infection in Wisconsin's dairy cattle. Most cases of TB in the US are caused by the bacteria *Mycobacterium tuberculosis;* however, *Mycobacterium bovis* can also cause TB disease in people and in animals such as cattle, bison, elk and deer. *M. bovis* is unique in that it can transmit from humans to animal and animal to humans. *M. bovis,* though rare, can be transmitted to people through drinking unpasteurized contaminated dairy products, or when bacteria from the ill animal comes into contact with a wound on a person's skin or is inhaled. Thanks to pasteurization, *M. bovis* has become a rare occurrence.

Although rare, *M. bovis* can have very costly effects on a dairy farm, and the dairy economy as a whole. If a cow is found to have a positive TB test (yes, you can actually TB skin test a cow!), a quarantine is placed on the farm until the herd tests negative (which can take several months), or the farm owner can choose to cull the cow(s) from the herd.

PHMDC, in conjunction with Badger Partners in Health, and Grande Cheese Corporation, identified dairy farms in Dane County who allowed us to come on site to screen their employees for TB, as well as provide some immunizations. In late 2018, we visited five dairy farms across Dane County and provided over 100 immunizations and TB screening to 60 employees. Of those screened for TB, three will need to be retested due to indeterminate results, and one tested positive for latent TB infection.

# NATIONAL OUTBREAKS OF NOTE

# Measles

New York and New Jersey are both experiencing measles outbreaks related to unvaccinated travelers from Israel. It is important for anyone traveling abroad to check the CDC's Travelers' Health website to determine if measles is circulating and for any travelers who are not fully vaccinated to be vaccinated before traveling. The CDC reports current outbreaks of measles in England, France, Italy, Greece, Serbia, Romania, Moldova, Kazakhstan, Ukraine, Israel, Democratic Republic of the Congo, Philippines, Indonesia, Brazil, and Columbia. This list is regularly updated on the CDC's website.

Washington state is also experiencing a measles outbreak, mostly among unvaccinated individuals, which has spread to Oregon.

There are currently no special vaccine recommendations for people traveling to New York, New Jersey, Washington, or Oregon.

#### Measles Vaccine Recommendations for International Travelers

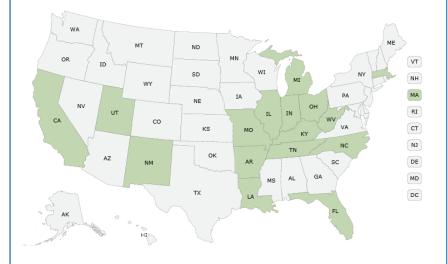
- Infants 6-11 months of age: 1 dose of MMR vaccine
- Children 12 months of age and older: 2 doses of MMR vaccine separated by at least 28 days
- Teenagers and adults without evidence of immunity\*: 2 doses of MMR vaccine separated by at least 28 days

\*Evidence of immunity includes one of the following: written documentation of adequate vaccination, laboratory evidence of immunity, laboratory confirmation of measles, or birth in the United States before 1957

# Hepatitis A

Sixteen states have experienced outbreaks of hepatitis A since 2017. Cases have primarily occurred in people who use injection and non-injection drugs and/or people who are homeless, and their close contacts. Use of hepatitis A vaccine in control efforts caused constraints in the adult vaccine supply early in the outbreak, which have mostly been addressed. On February 14, the CDC published a new recommendation to vaccinate people ages one year and older who are experiencing homelessness against hepatitis A. There are no recommendations to vaccinate people traveling to states experiencing outbreaks.

### States with Hepatitis A Outbreaks



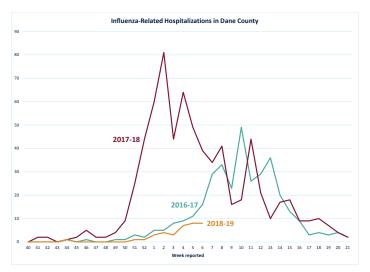
# Who should receive hepatitis A vaccine in states without a hepatitis A outbreak?

- People ages one year and older experiencing homelessness
- All children at age 1 year
- Travelers to countries where hepatitis A is common
- Family and caregivers of adoptees from countries where hepatitis A is common
- Men who have sex with men
- Users of injection and non-injection drugs
- Persons with chronic liver disease (including those with hepatitis B and/or C infections)
- Persons with clotting-factor disorders
- Persons who work with hepatitis A virus-infected primates or with hepatitis A virus in a research laboratory setting
- People with direct contact with others who have hepatitis A
- Any person wishing to obtain immunity (protection)

# STILL TIME FOR FLU SHOTS

Influenza levels are low in Dane County, with fewer than ten influenza-related hospitalizations reported per week since December 1. Please continue to immunize patients against influenza.

For weekly influenza and other respiratory illnesses updates from the Wisconsin Division of Public Health sign up on this website: www.dhs.wisconsin.gov/influenza/data.htm.



# 2019 TB SUMMIT

Public Health Madison & Dane County, Southeastern National Tuberculosis Center, and the Wisconsin Tuberculosis Program are jointly providing the 8th Annual Tuberculosis (TB) Summit on Thursday, April 4, 2019. The TB Summit is a full day of presentations, case studies, and discussions. Topics include the screening and diagnosis of TB infection, TB screening on Wisconsin dairy farms, infection control and the role of N95 masks, the history of BCG vaccine, contact investigation tools and case study, and statewide resources and epidemiology. This event is open to the public. Registration is required.

# REGISTER

FOR THE TB SUMMIT TODAY!

## Acute & Communicable Disease Summary for October - December 2018

Below is a preliminary listing of the acute and communicable diseases reported to Public Health Madison & Dane County (PHMDC). Data is based on ACD reports received by PHMDC. These numbers are not a complete picture of communicable diseases in Dane County; some infections may not have been reported yet and some are never reported. If a disease is not listed there were no reports in this quarter for this year or last year. A list of reportable diseases can be found here.

REDORTARI E COMMUNICARI E DISEASES IN DANE COUNTY

	SES IN DANE COUNTY NUMBER OF CASES	
DISEASE	4th Q 2018	4th Q 2017
Acute flaccid myelitis	1	0
Anaplasmosis	2	2
Babesiosis	0	3
Blastomycosis	3	1
Campylobacter	39	23
Chikungunya virus	0	1
Chlamydia	727	700
Coccidioidomycosis	0	2
Cryptosporidium	8	11
Dengue virus	2	2
E. coli, Shiga toxin-producing	10	4
Ehrlichiosis	1	0
Flavivirus (unspecified)	1	0
Giardia	14	22
Gonorrhea	213	186
Haemophilus influenzae invasive disease	2	5
Hepatitis A	0	1
Hepatitis B	13	18
Hepatitis C	25	56
Influenza-associated hospitalization	4	101
Jamestown Canyon virus	0	1
Legionella	13	3
Leptospirosis	0	1
Lyme Disease	21	16
Malaria	1	0
Meningitis, bacterial other	0	3
Mumps	1	0
Pelvic inflammatory disease	2	0
Pertussis (confirmed & probable)	11	11
Rocky Mountain spotted fever	1	0
Salmonella	13	13
Shigella	2	2
Streptococcus, Group A invasive disease	2	4
Streptococcus, Group B invasive disease	8	8
Streptococcus pneumoniae invasive disease	7	5
Syphilis, primary or secondary	9	5
Syphilis, non-primary or secondary	7	11
Tetanus	0	1
Transmissible spongiform encephalopathy	0	1
Tuberculosis	0	1
Tuberculosis, latent infection	92	42
Varicella	5	8
West Nile virus	1	1
Yersiniosis	0	1