

THE PREPAREDNESS POST

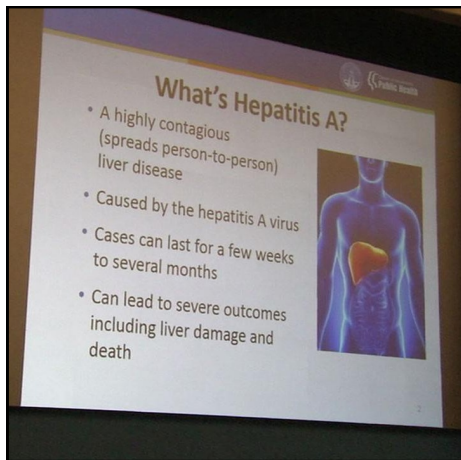
UTAH DEPARTMENT OF HEALTH

Utah's Connection to a Multi-State Outbreak *Written by Jeff Eason and Bree Barbeau*

Hepatitis A is a highly contagious, vaccine-preventable liver infection caused by the hepatitis A virus (HAV). HAV is primarily transmitted from person-to-person by the fecal-oral route. Some people who are infected with HAV may not look or feel sick. When symptoms do occur, fever, fatigue, vomiting, abdominal pain, dark urine, and yellowing of the skin and eyes are often reported. People who are

In May 2017, Utah public health identified an HAV case-patient who did not report travel or food exposure. The case-patient reported illicit drug use and homelessness; risk factors that were consistent with those reported from an ongoing national outbreak of HAV infection in California, Arizona, and Michigan. Viral sequence testing revealed that the HAV strain from the Utah case-patient was genetically similar to the virus identified in the national outbreak. As of January 16, 2018 a total of 146 outbreak-associated cases have been identified in Utah. Of these cases, 47% reported homelessness and illicit drug use and 25% reported illicit drug use alone. Of the 146 Utah case-patients, 56% have been hospitalized, which is a higher rate of hospitalization than what has been described in previous HAV outbreaks but lower than what has been reported by both California (64%) and Michigan (82%) in January, 2018.

who are experiencing homelessness, and those who may be peripherally associated with these groups. Additionally, educational information has been distributed in an attempt to increase awareness and decrease transmission through improved case reporting and personal hygiene. As cases are reported, public health is identifying contacts and providing post exposure prophylaxis in an effort to prevent future cases. For more information on Utah's hepatitis A outbreak, visit: health.utah.gov/hepatitisa.



infected with HAV may feel sick for several months but typically do not have lasting liver damage. However, for people who have compromised immune systems or other liver diseases such as hepatitis B and hepatitis C, HAV infection can cause liver failure and death. On average, one to two cases of HAV are identified in Utah every year, typically in unimmunized people who traveled to an area where HAV is common.

In response to the HAV outbreak in Utah, vaccination clinics have been conducted targeting community members who use illicit drugs, those



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Exploring the Links Between Human Health and Animal Health

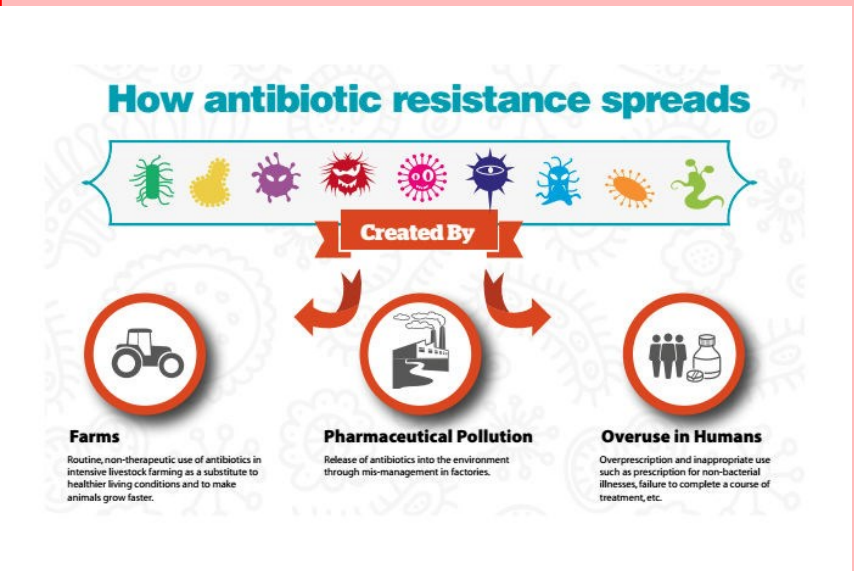
By Dallin Peterson

For the third consecutive year, Utah held the Utah One Health Symposium. The November 17, 2017 gathering was held at the beautiful S.J. Quinney College of Law building at the University of Utah. The goal of this conference is aimed at increasing awareness, partnerships, and collaboration between human health, animal health, and environmental health.



Four years ago when the Utah Department of Health (UDOH) convened the first Rabies Compendium Conference to focus on rabies control and prevention in Utah, many recognized the need to collaborate and educate on a number of related topics. That led to a significant change in the scope and content of the yearly conference and the first Utah One Health Symposium was held in 2015. The target audience was expanded to include human and animal health care providers, animal control agencies, scientists, environmental health, and epidemiologists. The driving force behind the Utah One Health Symposium is the concept that the health of Utahns is directly impacted by the relationships between humans, animals, and the environment.

In his opening remarks at the beginning of the conference, Dr. Joe Miner, executive director of the Utah Department of Health said, "It's exciting to have a venue for a multi-disciplinary approach to health. It's important to realize that human health, animal health and environmental health are interconnected and that we are all on the same team for a healthy Utah."



This year's focus involved Antimicrobial Resistance and the Microbiome which spans environmental, human, and animal health as described by the keynote speaker, Dr. Jan Suchodolski from Texas A&M University. Attendees also learned about mycobacteria in zoo settings, TB transmission between animals and humans, mosquito abatement activities, Utah's Opioid epidemic, public health outbreak responses, and healthcare-associated infections.

BeReadyUtah.gov

- ✓ Make a Plan
- ✓ Get a Kit
- ✓ Be Informed
- ✓ Get Involved



A New Test Comes to the Utah Public Health Laboratory (UPHL)

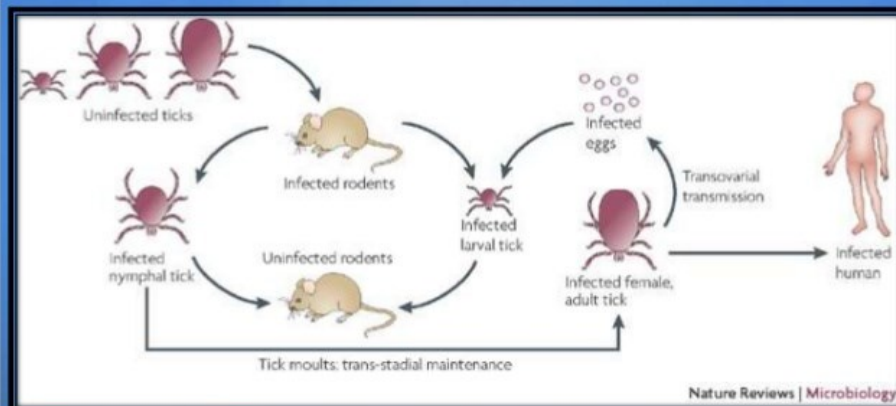
UPHL can now test for Rocky Mountain spotted fever and epidemic typhus

By Kim Christensen

Rocky Mountain spotted fever (RMSF) is a bacterial disease caused by the bacteria, *Rickettsia rickettsii* and is spread through the bite of an infected tick. Most people who get sick with RMSF will have fever, headache, and rash. Other signs and symptoms can include nausea, vomiting, stomach pain, muscle pain and lack of appetite. Symptoms may develop about three to 12 days after the tick bite. Because RMSF can progress rapidly to severe illness, individuals are diagnosed and treated presumptively based on risk factors and potential exposure. Individuals should see a healthcare provider if they become ill after having been bitten by a tick or having been in the woods or in areas with high brush where ticks commonly live.

The incidence of RMSF in Utah is low. In 2014, Utah reported six cases of RMSF compared with nearly 4,000 cases nationally.

Life Cycle of Rickettsia



Epidemic typhus, also called louse-borne typhus, is an uncommon rickettsial disease caused by the bacteria, *Rickettsia prowazekii*. It is spread to people through contact with infected body lice. It is considered a rare disease, but in previous centuries was responsible for millions of deaths. In the United States, rare cases of epidemic typhus, called sylvatic typhus, can occur when people are exposed to

flying squirrels and their nests. Symptoms of epidemic typhus begin within two weeks after contact with infected body lice and may include fever and chills, headache, rapid breathing, body and muscle aches, rash, cough, nausea, vomiting, and confusion. Individuals should see a healthcare provider and receive treatment if they develop symptoms after travel or contact with animals.

The Utah Public Health Laboratory can now test for these two rickettsial infections using a test called real-time polymerase chain reaction (PCR). The *Rickettsia* Real-time PCR assay not only detects infection, but can differentiate between the infecting agents, i.e., *Rickettsia rickettsii* vs. *Rickettsia prowazekii*. This type of test is typically recommended for individuals with signs or symptoms associated with RMSF, epidemic typhus, or other rickettsial infections and who have risk factors or potential exposure.

To order *Rickettsia* PCR testing or for questions regarding rickettsial diseases, contact the Utah Public Health Laboratory at 801-965-2561 or Utah Department of Health, Bureau of Epidemiology at 801-538-6191.

Recognition for a Job Well Done

January 2018—Employee of the Month

Jeff Eason from the Division of Disease Control and Prevention is the UDOH Employee of the Month for January 2018!

Jeff consistently demonstrates professionalism, innovation, attention to detail, tenacity, and excellence in all aspects of his work.

Most recently, this has been demonstrated as he led investigation and management of the hepatitis A outbreak currently occurring in Utah. Jeff has worked with his team, as well as key partners at the Centers for Disease Control and Prevention, local health departments (LHDs), the Immunization Program, and the Public Information Office (PIO), to ensure all aspects of the outbreak response are attended to. This has included facilitating regular update meetings; ensuring timely and accurate information is provided regularly to appropriate audiences through multiple means, including managing media requests appropriately with PIO and LHD partners; receiving, communicating, and managing vaccine and IG requests, and working with leadership to identify funds for requests; and working through laboratory testing issues.

All of this has been done with compassion, respect, and sensitivity toward the most impacted populations in this outbreak. Jeff continuously remains focused on finding appropriate solutions to do the most good for the health of Utahns.

Not only has Jeff managed this outbreak, but he has attended to all his other duties and maintained a positive attitude while doing it.

Congratulations, Jeff!



You had me at
3-day supply of food and water.

EMERGENCY.CDC.GOV

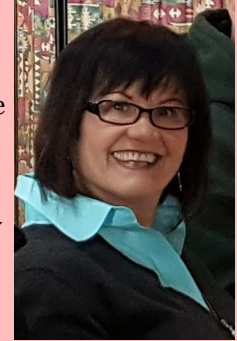


Bureau of Emergency Medical Services and Preparedness

Transitions

Christine Warren Retires

Christine (Kris) Warren recently retired from the Utah Department of Health, after more than 20 years of service. Kris filled many roles while working for the UDOH. She finished her service as Utah's Training and Exercise Coordinator. Previous duties in the UDOH included EMS Liaison and EMS Regional Consultant which gave Kris an opportunity to maintain and improve important EMS relationships with EMS providers. She had a knack for helping agencies and EMS personnel, keeping them informed and working hard to gain their respect and friendship. Another responsibility that Kris enjoyed and excelled in facilitating was the annual EMS Awards Ceremony. Kris was thrilled to plan and organize the ceremony, working tirelessly to have the best EMS awards ceremony possible. She loved meeting with the nominees and those who submitted the nominations. Kris also served as UNIS Administrator, ESAR-VHP coordinator (supporting the volunteer management system and working with the MRC), and other positions.



Kris worked with public safety dispatch before coming to the Bureau of EMS. Kris will be greatly missed for her friendship and dedication. We wish her the best in her future endeavors.

Deputy State Epidemiologist and Medical Consultant



Allyn Nakashima, MD, was recently selected to fill the role of Deputy State Epidemiologist and Medical Consultant for the Utah Department of Health (UDOH). Dr. Nakashima came to the UODH in 2012 from the U.S. Centers for Disease Control and Prevention (CDC), where she worked on a variety of domestic and international infectious disease programs in many different positions. Dr. Nakashima has been the State Epidemiologist for the past five years and recently decided to work part time to devote more time to caring for her elderly parents and pursuing leisure activities as she nears retirement.

State Epidemiologist

Angela Dunn, MD, MPH, was recently chosen to fill the role of State Epidemiologist at the Utah Department of Health (UDOH). Dr. Dunn served as the Deputy State Epidemiologist from July 2016 to January 2018.

Angela and her husband have two young sons. They moved to Utah in 2014 with no connections and having never before set foot in the state. But they have fallen in love with Utah's people and natural beauty in all seasons.



Director of the Bureau of Epidemiology



Melissa Dimond was recently selected to fill the role of Director of the Bureau of Epidemiology within the Division of Disease Control and Prevention. Prior to this, she worked as the Program Manager for the Disease Response, Evaluation, Analysis, and Monitoring Program (aka, the DREAM Team). She has worked in Epidemiology for nearly 19 years, starting at the Salt Lake County Health Department in 1999, then moving to the Utah Department of Health.

While Ms. Dimond loves her work and the great people she gets to spend time with there, her greatest joy comes from spending time with her husband and daughter.

Calendar

2018 Training

Date	Event	Location	Information
January 23 - 24 8:30 a.m. to 5 p.m.	Basic Public Information Officer UTrain #1011053	Clearfield City Office 55 S. State Street Clearfield, UT	Karen Madsen 801-538-3410 kmadsen@utah.gov
January 24 11 a.m. to 1 p.m.	Lunch & Learn: What to do for Pediatric Head Injuries in a Disaster UTrain #1074065	Intermountain Center for Disaster Preparedness LDS Hospital 3rd Floor North 325 8th Ave and C St Salt Lake City, UT	Barb Clark 801-408-7061 barb.clark@imail.org
January 29, 30, 31, and February 1 6 p.m.—10 p.m.	ICS-300 Intermediate Incident Command System for Expanding Incidents UTrain #1011051	Santaquin City Hall 275 West Main Street Santaquin, UT	Karen Madsen 801-538-3410 kmadsen@utah.gov Ted Wooley 801-556-3166 tedwooley@utah.gov
TBD	SNS/MCM DOC call down and response exercise		Russell Pierson 801-273-2902 russellpierson@utah.gov
February 6-7 February 6 9 a.m.—5 p.m. February 7 9 a.m.—2 p.m.	ICS-400 Advanced Incident Command System for Command and General Staff—Complex Incidents UTrain #1011051	Bryce Canyon National Park Conference Room # Highway 63, HQ Number 1 Bryce, UT	Karen Madsen 801-538-3410 kmadsen@utah.gov Ted Wooley 801-556-3166 tedwooley@utah.gov
February 8 9 a.m.—4 p.m.	Basic Medical Moulage UTrain #1055917	Intermountain Center for Disaster Preparedness LDS Hospital 3rd Floor North 325 8th Ave and C St Salt Lake City, UT	Barb Clark 801-408-7061 barb.clark@imail.org
February 15 9 a.m.	Advanced Medical Moulage UTrain #1060758	Intermountain Center for Disaster Preparedness LDS Hospital 3rd Floor North 325 8th Ave and C St Salt Lake City, UT	Barb Clark 801-408-7061 barb.clark@imail.org
February 28 8:30 a.m.—5 p.m.	Joint Information System/Joint Information Center (JIS/JIC Planning for Tribal, State, and Local Public Information UTrain #1020466	Salt Lake City Public Safety Building Community A & B	Karen Madsen 801-538-3410 kmadsen@utah.gov

Calendar**2018 Training**

Date	Event	Location	Information
March 13-14 8:30 a.m.—4:30 p.m.	ICS-300 Intermediate Incident Command System for Expanding Incidents UTrain #1011051	Weber County Sheriff's Office 721 West 12th Street Ogden ,UT	Karen Madsen 801-538-3410 kmadsen@utah.gov Ted Wooley 801-556-3166 tedwooley@utah.gov
March 20-21	POD training	Blanding, UT	Russ Pierson 801-273-2902 russellpierson@utah.gov
March 21 11 a.m.—1 p.m.	Lunch & Learn: Why People Die in Fires and How to Prevent Them UTrain #1074771	Intermountain Center for Disaster Preparedness LDS Hospital 3rd Floor North 325 8th Ave and C St Salt Lake City, UT	Barb Clark 801-408-7061 barb.clark@imail.org
March 22-23 8 a.m.—5 p.m.	Community Healthcare Planning and Response to Disasters UTrain #1068307	Intermountain Center for Disaster Preparedness LDS Hospital 3rd Floor North 325 8th Ave and C St Salt Lake City, UT	Barb Clark 801-408-7061 barb.clark@imail.org
March 27-29	SNS/MCM exercise (Tentative)	Mountain America Expo Center	Russ Pierson 801-273-2902 russellpierson@utah.gov

Division of Emergency Management Training Calender

Website: <http://dem.utah.gov/training-and-exercise/training/>

Newsletter produced by Charla Haley



UTAH DEPARTMENT OF
HEALTH

Bureau of Emergency Medical Services and Preparedness