Provider Bulletin

A Monterey County Health Department bi-monthly newsletter summarizing national, state, and local public health-related issues for county healthcare providers.

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Communicable Disease Updates

COVID-19

CDC Recommends Updated COVID-19

Vaccine for Fall/Winter Virus Season

CDC recommends everyone 6 months and older get an updated COVID-19 vaccine to protect against the potentially serious outcomes of COVID-19 illness this fall and winter. FDA and ACIP approved use of an <u>updated monovalent</u> <u>XBB.1.5 variant mRNA vaccine</u> for the 2023-2024 winter virus season. To view ACIP Recommendations click <u>here</u>.

Updated <u>COVID-19 vaccination schedules</u> are available on California Department of Public Health's EZIZ website.

COVID-19 vaccines for insured patients can be ordered from your clinic's regular medical supplier or directly from the manufacturer. Small batch orders are also available through several distributors.

Vaccines for Children (VFC) providers can now order COVID-19 vaccines along with other VFC vaccines through the normal VFC ordering process. For more information, contact your <u>VFC Field Representative</u>.

Eligible <u>Bridge Access Program (BAP)</u> providers may now order COVID-19 vaccine via MyCAVax for un- and under-insured adult patients. If you need to refer your uninsured adult patients to a BAP provider, please visit the <u>Vaccines</u> website to find a nearby location.

RSV

RSV ACIP Vaccine Recommendations

<u>Maternal Respiratory Syncytial Virus (RSV) vaccine</u> is now recommended for pregnant people during 32 through 36 weeks gestation, using seasonal administration, to prevent RSV lower respiratory tract infection in infants. RSV immunization is also recommend for <u>all infants less than 8 months of age</u>, <u>certain high risk infants</u>, and <u>adults 60 years of age and older</u>. Visit the <u>ACIP</u> <u>website</u> for additional details.

Updated RSV Reporting Requirements

As of September 15, 2023, the California Department of Public Health added RSV to the list of pathogens for which laboratory results are required to be reported to local public health agencies. This change aligns RSV with influenza and SARS-CoV-2 laboratory reporting requirements. Click <u>here</u> for full details. For assistance with laboratory reporting, please contact the <u>CalREDIE</u> <u>Help Desk</u>.

As a reminder, medical providers must report suspected or confirmed cases of influenza, RSV, and COVID-19 as follows:

• Influenza: All ICU admissions and fatal cases among individuals younger than 65 years of age

- COVID-19: All hospitalized and fatal cases
- RSV: All fatal cases among children under 5 years of age

Please call the MCHD Epidemiology & Surveillance Unit at 831-755-4698 with questions about laboratory and/or provider reporting requirements.

SYPHILIS

Bicillin® L-A (Benzathine Penicillin G) Shortage Continues

The <u>Centers for Disease Control and Prevention</u> (CDC) and the <u>U.S. Food and</u> <u>Drug Administration</u> (FDA) have announced and listed long-acting penicillin G benzathine injectable suspension products (Bicillin® L-A) on their respective drug shortage webpages, <u>estimating a recovery timeframe in Q4 2023</u>. This is of considerable concern to California as the state continues to see significant increases in syphilis, including syphilis in pregnant persons and congenital syphilis in infants.

Benzathine penicillin G is the recommended, first-line treatment for syphilis, and the <u>only</u> recommended treatment for pregnant

people. Prompt and timely treatment of syphilis in pregnancy is nearly 100% effective at preventing <u>devastating outcomes of congenital syphilis</u>, including the fact that up to 40% of infants born to pregnant people with untreated syphilis will be stillborn or suffer early infant death, or face long-term morbidity including blindness, deafness, and bone damage.

For more information including information on alternate treatment regimens, please see the California Department of Public Health's <u>Health Advisory</u>.

UPDATED SURVEILLANCE DATA

The Public Health Bureau's Epidemiology & Surveillance Unit have updated many of the disease-specific data tables on the MCHD website. This includes information on local morbidity trends for <u>chlamydia</u>, <u>gonorrhea</u>, <u>syphilis</u>, <u>Valley</u> <u>Fever</u>, <u>pertussis</u>, <u>rabies</u>, and <u>tuberculosis</u>.

And remember, MCHD publishes updates to county COVID-19 datahere.

Chronic Disease Updates

Hypertension

RÁPIDO aims to get native Spanish speakers to recognize stroke signs fast

Rostro caído, Alteración del equilibrio, Pérdida de la fuerza en el brazo o una pierna, Impedimento visual repentino, Dificultad para hablar, Obtén ayuda y llama al 911.

Researchers have developed a new Spanish acronym aimed to raise awareness of stroke symptoms in the Hispanic community. Known as RÁPIDO, it seeks to replicate the popular FAST mnemonic that exists in English. Studies show that while Hispanic adults currently have a similar rate of stroke as their non-Hispanic white counterparts, they are not as aware of the symptoms.

A <u>Centers for Disease Control and Prevention report</u> from November and based on a 2017 national survey showed that just 58% of Hispanic adults knew the telltale stroke symptoms. They trailed behind their Black (64%) and White (71%) peers.

Diabetes

Compassionate Communication to Reengage People With Diabetes in DSMES

Tracking blood sugar, managing medication, planning meals, staying active it's a lot to think about. It can leave someone with diabetes feeling run down and overwhelmed. On top of this, is the recognition that many people are starting to return to regular activities for the first time since the pandemic started. For people with diabetes, this return can come with stress about how their health care providers will respond to their progress in taking care of their health. In this 60-minute webinar, presented by the CDC, Division of Diabetes Translation, experts will offer communication and coaching approaches for offering care that is compassionate, understanding, and patient-centered.

In order to receive continuing education (CE) for WD4371-052622 – Innovations in Diabetes Behavior Change – May 26, 2022 (Web on Demand), please visit <u>TCEO</u> and follow these <u>9 Simple Steps</u> before **June 28, 2024**.

The Course Access Code is **Diabetes**.

Access Video Here

Download the Slides

Substance Use Prevention and Treatment

Tobacco

Tobacco Retail Licensing Ordinance

The City of Marina joined the County and eight other Monterey County cities (Carmel-By-The-Sea, Monterey, Salinas, Gonzales, Seaside, King City, Pacific Grove, and Soledad) in adopting a Tobacco Retailer License Ordinance (TRLO). Marina City Council also adopted a Smoke-Free Outdoor Air Ordinance which bans smoking in outdoor areas. Both ordinances were unanimously passed on September 6, 2023, and take effect 30 days after adoption.

The TRLO would ensure tobacco retailers comply with all local, state, and federal tobacco-related laws. The main purpose of the ordinance is to reduce youth access to tobacco products including vapes. This ordinance also prohibits the sale of single-use electronic cigarettes to protect our Monterey Bay National Marine Sanctuary and environs and closes loopholes in state law regarding flavored tobacco products. In addition, Marina will be the first City in the County to prohibit the sales of tobacco products in pharmacies. The Environmental Health Bureau will conduct regular compliance checks of tobacco retailers including for illegal tobacco sales to underage youth and young adults.

The primary purpose of the Smoke-Free Ordinance is to protect non-smokers from the harmful effects of secondhand smoke from cigarettes, electronic cigarettes, or cannabis. Smoking will now be prohibited in most outdoor areas including City Parks, beaches, playgrounds, sidewalks, and outdoor dining areas allowing residents to enjoy the outdoors without being exposed to second-hand smoke.

Ordinance can be found here.

CaCTC's First Tobacco Treatment Specialist (TTS) Training was a Success; Get Ready to Apply for the Next One!

The California Center for Tobacco Cessation (CaCTC) and the University of Massachusetts Chan Medical School have collaborated to offer **FREE** Tobacco Treatment Specialist (TTS) trainings, a \$1300 value, to qualified applicants in California.

The first training was a virtual format during July and was extremely well-

received by attendees. One participant said, "The trainers were very knowledgeable and did a great job of keeping everyone engaged." Another wrote in the post-event survey, "As a former trainer, I thought the training was very well presented. Great mix of lecture and activity."

CaCTC will host the next TTS training **in person in San Francisco on November 14-16.** Click the link to apply below or visit the **CaCTC website**!

Apply for the Training

Cannabis

Cannabis Use Disorder and Subsequent Risk of Psychotic and Nonpsychotic Unipolar Depression and Bipolar Disorder

Oskar Hougaard Jefsen, MD; Annette Erlangsen, PhD; Merete Nordentoft, DMSc; Carsten Hjorthøj, PhD

JAMA Psychiatry May 24, 2023

The study includes register data from more than six million Danes and its findings indicate that cannabis use disorder increases the risk of both psychotic and non-psychotic depression and bipolar disorder.

Full text can be found here

Cannabis and Pregnancy

Flyers below can be used as a patient resource. Available in both<u>English</u> and <u>Spanish</u>.

AMI HARMING MY BABY?

CANNABIS CAN BE PASSED

TO YOUR BABY THROUGH

EDIBLES, LOTIONS AND

SECONDHAND SMOKE

GET THE FACTS

SMOKING, VAPING,

If I am pregnant, can I use cannabis to relieve nausea?

No. Using any form of cannabis is not recommended for women who are pregnant or who plan to be pregnant soon. If you already use cannabis talk to your doctor about any questions you have.

Can using cannabis harm my baby while I am pregnant?

Yes. Cannabis can enter a babies brain from your bloodstream and may affect their developing brain. Research shows that if you use cannabis while you are pregnant your baby is more likely to be born with a lower birth weight.

Can secondhand cannabis smoke affect my baby?

Yes. Secondhand cannabis smoke contains THC, the ingredient that makes you high and many of the same chemicals found in tobacco smoke. These chemicals can be harmful to you, and your baby.

This brochure is not intended as a substitute for your health professional's opinion or care. Talk to your doctor about any questions you have about cannabis.



CannabisEducationMCHD.com

Made possible with funding from Monterey County Cannabis Tax Dolla

Opioids

Xylazine Health Alert

Xylazine confirmed in our local drug supply

Current situation:

Increasing overdose deaths associated with xylazine are occurring in every region of the United States. Locally, xylazine has been confirmed in Santa Cruz, San Luis Obispo, and Monterey Counties. Xylazine is often added to illicit opioids, including fentanyl, as it lengthens the effects of the drug, staving off withdrawal symptoms. Most overdose deaths linked to both xylazine and fentanyl also involved additional substances, including cocaine, heroin, benzodiazepines, alcohol, gabapentin, methadone, and prescription opioids.* Xylazine is an emerging issue in California and poses a greater risk for overdose and serious skin infections. People using xylazine often develop skin and soft tissue infections/injuries that become necrotic and can result in amputation. It is important to know how to screen for xylazine and communicate with patients utilizing harm reduction strategies.

Recommendations for medical providers

1. Consider xylazine exposure in patients who use drugs, regardless of the drug they are intending to use, and regardless of route of use (smoking, injection, snorting, ingestion, etc.)

- 2. Screen for skin/soft tissue infections as people who are using xylazine have a higher prevalence of skin abscesses, ulcers, and infections which are not typically seen at/near the injection site and can rapidly become severe and necrotic
- Educate about wound care provide gloves and hand sanitizer for those unable to regularly access hand-washing as well as individual saline, gauze, wraps, and ointment when possible. Reinforce the importance of seeking urgent medical evaluation for signs/symptoms of severe or worsening infection
- 4. Educate patients and their loved ones that naloxone should still be used in case of suspected overdose as xylazine is most commonly used with fentanyl. Even though naloxone is not effective in treating xylazine, it does reverse the effects of fentanyl and other opioids
- 5. Educate that it is critical to call 911 for any suspected overdose as further medical treatment will likely be necessary
- 6. Counsel patients who use illicit drugs on how to stay safe
 - Never use alone or behind a locked door (Never Use Alone hotline — (800) 484-3731)
 - Go slow, use less
 - Carry and know how to use naloxone
 - Call 911 if an overdose is suspected. The Good Samaritan Law protects those who call for help during a suspected overdose. You will not be charged with drug possession or use crimes if you act in good faith and seek medical assistance/emergency medical services for another person experiencing a drug-related overdose.

*Biden-Harris Administration Designates Fentanyl Combined with Xylazine as an Emerging Threat to the United States | ONDCP | The White House

For helpful resources & to learn more: ww.montagehealth.org/prescribesafe

CDPH Launches First Phase of Opioid Prevention and Education Campaign

Opioid Prevention and Education Campaign to Focus on Prevention, Education, and Awareness of Fentanyl Dangers, and Lifesaving Naloxone

The campaign will include messaging in English and Spanish across a multitude of communication platforms, including social media, radio, television, and outdoor advertising, such as billboards and bus stops. The first phase of the campaign aims to prevent substance use and raise awareness of fentanyl contamination among teens, young adults, and adults, and will be directed towards people aged 16 to 39.

Full Press Release can be found here

Virtual Grand Rounds: Opioid Treatments: Practical Guidance for Clinicians

Tuesday, October 10, 12:00 PT

With California's escalating opioid epidemic, all clinicians should be well-versed in treating patients with opioid use disorder. Now, with naloxone available over the counter, everyone can be empowered to reverse opioid overdoses. But how many of us are comfortable prescribing buprenorphine, referring to methadone treatment, or using naloxone? Marlene Martin, M.D., an associate professor of medicine at UCSF, director of the UCSF Addiction Care Team and hospitalist based in San Francisco General Hospital, will educate us in using these important and lifesaving medications. Additionally, California State Epidemiologist Erica Pan, M.D., MPH, will present updates on COVID-19 and the current status of vaccine recommendations for the fall.

Featured Speaker:

- Epidemiology Update for California Erica Pan, M.D., MPH, California State Epidemiologist and Deputy Director, California Department of Public Health, Center of Infectious Diseases
- **Opioid Treatment Marlene Martin, M.D.,** Director, UCSF Addiction Care Team, and Hospitalist, San Francisco General Hospital

This event will be moderated by Kimberly Newell Green, M.D.

Register Here

Other

Mental Health

Suicide Prevention Awareness

September is National Suicide Prevention Month. Suicide is one of the leading causes of death in the United States, and the second-leading cause of death among adolescents and young adults aged 15-24 in California.

Share <u>messages on social media</u> reminding people that the 988 Suicide & Crisis Lifeline offers 24/7, free and confidential support for people in distress and their loved ones. Contact the Lifeline by visiting <u>www.988lifeline.org</u> or by texting or calling 988.

Learn more about suicide prevention.

Safe Spaces: Foundations of Trauma-Informed Practice for Educational and Care Settings

New Training Creates Safe Spaces for Kids

Safe spaces is a free, online training designed to help early care providers, TK-12 educators and other school personnel recognize and respond to trauma and stress in children.

TRAINING NOW LIVE!

Anyone who works with children is invited to take the free, online professional learning. This includes early care providers, educators and school personnel, including school nurses, librarians, administrative support, school bus drivers and yard duty support. Each module is about two hours and is filled with case examples, videos, strategies and practices. Select the module(s) that best fit your professional needs:

Take the Training

Resources

Health Literacy 101

As part of a joint collaboration between County of Monterey Health Department's Planning, Evaluation & Policy Unit, Clinic Services, and Natividad's medical residents, the partners are thrilled to release a Health Literacy 101 training video for providers. The short 15 minute video highlights the concept of health literacy, identifies those at risk, and the importance of understanding the consequences of low health literacy. In addition, the video navigates practical techniques for improving communication with patients using open-ended questions and gaining insights on the importance of not assuming patient understanding. To learn more and view the video, click <u>here.</u>

What are Community Health Workers?

California Department of Public Health has produced a fact sheet about Community Health Workers and their roles. Community Health Workers (CHWs), known as promotores de salud, community health advisors, peer educators, care navigators, and many more, are crucial members of the health team who facilitate improvements in patients' health outcomes. Please click here to learn more and access the fact sheet.

Community Health Workers are Making a Difference in Climate Change and Health

The Community Health Impact Coalition highlights the World Health Organization's (WHO) recognition of climate change as the most significant health threat to humanity. The coalition emphasizes that rising temperatures contribute to various direct and indirect health risks and adverse outcomes. Community Health Workers (CHWs) play an essential role in responding to the health impacts of climate change and promoting community resilience. To learn more about the role of CHWs in addressing climate change, click <u>here</u>.

