



Concerning Our Health

Greetings from the Putnam County Department of Health

In the first six months since I assumed the role of Health Commissioner, the Putnam County Department of Health has been very busy. Our communicable disease nurses have launched STD/HIV screening and treatment services and our maternal child nurses are now assessing the emotional health of our youngest residents, in addition to their other comprehensive services. Both efforts are highlighted in this issue.

Another key ongoing program is aimed at increasing physician compliance with lead screening. This ubiquitous environmental toxin causes lifelong problems at much lower levels than previously thought. Our nursing and environmental staff members continue to be available to help get the proper screenings done and to remediate the environmental source of lead in order to avoid future contamination.

—Allen Beals, MD, JD, Commissioner of Health



Gonorrhea Treatment Guidelines Change

More than 600,000 new cases of gonorrhea occur annually making it the second most commonly reported communicable disease in the country. Now the added threat of resistant, untreatable gonorrhea has prompted new treatment guidelines.

In August, the Centers for Disease Control and Prevention (CDC), published new recommendations: 1) a single intramuscular dose of ceftriaxone 250 mg, 2) plus either a single dose of azithromycin 1 g orally OR doxycycline 100 mg twice daily for 7 days for the treatment of uncomplicated urogenital, anorectal and pharyngeal gonorrhea.¹

Using two antimicrobials with different mechanisms of action theoretically improves treatment efficacy and postpones evolving resistance. Azithromycin is preferred because single-dose therapy is more convenient for patients, provides observable proof of compliance, and takes into consideration the growing tetracycline resistance among gonorrhea strains. Dual therapy also follows the recommendation to routinely treat

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STD services now available at PCDOH along with HIV testing and referral

Free STD testing is now available through the Putnam County Department of Health. The highest rates of chlamydia in Putnam County in 2009 were among women, 20 to 24 years old, followed by those 15 to 19 years old and 25 to 29 years old, a pattern similar to those in Westchester and Dutchess Counties. Nationwide, the picture is slightly different where nearly 50 percent of all new STD cases occur in young people, 15 to 24 years of age.

STD services became available in September and are offered along with anonymous and confidential HIV testing and counseling, which has been up and running smoothly since August. Both are provided together at two convenient locations—the main office of the Health Department at 1 Geneva Road, Route 312 and I84, Brewster, and at 121 Main Street in the Village of Brewster. Diagnosis and treatment of STDs are available at both sites. For those

individuals who test positive for HIV, referrals are made for case management and treatment.

For information and appointments:

Victoria Aquilato
845-808-1390, x43114



WHAT'S STOPPING YOU FROM GETTING TESTED?

FREE HIV RAPID TESTING STD TESTING & TREATMENT

Tuesdays & Thursdays
at Putnam County Health Department Locations:
1 Geneva Road & 121 Main St., Brewster, NY.
Walk-ins welcome, appointments available.
For hours and information, call:
845-808-1390 ext. 43114 or visit
www.putnamcountyny.com

Monitoring Kids' Emotional Health Just Got Easier

Additional support for children's emotional health is now available. The maternal child health (MCH) Public Health Nurses at the Putnam County Department of Health (PCDOH) are partnering with Putnam Family &

Community Services (PFCS) to help implement a new screening and referral program called RISE for Children's Health.

RISE, which stands for Recognize, Identify, Screen and Engage, is a confi-

dential program that aims to identify children with emotional needs through screening and then, if necessary, provide access to treatment. All children, from birth through 18 years of age, are

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Providers' recommendations influence flu vaccination rate

The data collected on influenza immunization rates during pregnancy are indisputable: pregnant and post-partum women, whose healthcare provider recommends or provides flu vaccination, get their shots five times more often than women who do not receive this encouragement.

Data from the Centers for Disease Control's (CDC) Pregnancy Risk Assessment Monitoring System (PRAMS) shows that among those New York women who receive recommendation or offer of vaccination from their healthcare provider, 68.4 percent received the immunization, whereas among those who received no such encouragement, only 12.8 percent were vaccinated.

When the unvaccinated women were asked why they did not get immunized, a number of reasons stood out. The most common explanation was they did not "normally get a seasonal flu shot." Other reasons given included: worry over the vaccine harming the baby, concern over personal side effects, and the statement, "My doctor didn't mention anything about a seasonal flu shot during my pregnancy."

Influenza vaccination is actually recommended as soon as possible for women who are or plan to become pregnant during the flu season by both the Centers for Disease Control's (CDC) Advisory Committee on Immunization Practices (ACIP) and the American College of Obstetrics and Gynecology (ACOG).

Recent research has shown that not only does it keep women healthy during pregnancy, but it also protects newborns up to six months of age, who are too young to receive influenza vaccines.

What you can do.....

- Educate staff and patients about the importance and safety of flu vaccination during pregnancy and that breastfeeding is not a contraindication to vaccination
- Issue standing orders for flu vaccination of pregnant and postpartum women
- Immunize unvaccinated post-partum women, preferably before hospital discharge or at 6-week postpartum visit
- Advise family members and other close contacts to be vaccinated against the flu
- Know where to refer patients if flu vaccine is unavailable in your own practice

School-based flu clinics continue to grow in size and popularity

So far this flu season, nearly 800 students and staff have been vaccinated free-of-charge against influenza—thanks to the Putnam County Department of Health. The expanding, school-based immunization program provides free flu vaccine, on-site during the school day. This year five of the six school districts in Putnam County are participating, including Carmel, Haldane, Garrison, Mahopac and Putnam Valley.

With just eight of fourteen clinics completed, the numbers so far are: 160 immunizations at Putnam Valley High School, 210 in the Haldane schools, 55 in Garrison, 41 at St. James the Apostle school, 72 at Kent Elementary, 57 at Kent Primary, and 84 at Matthew Patterson.

The clinics at Carmel High School and George Fisher Middle School were rescheduled due to Hurricane Sandy. At Carmel, 106 were vaccinated and GFMS has been rescheduled to late November, along with the five Mahopac Central School District clinics.

Similarly, the Vote & Vax traditionally held on Election Day at Brewster High School, has been rescheduled to November 30.



There was not a tear in sight at the Haldane schools as Thomas Percacciolo received his flu vaccine from public health nurse Jeanette Baldanza, RN, immunization coordinator. Allen Beals, MD, Commissioner of Health, was on hand to provide moral support to Thomas, whose older brother Anthony also received his shot.

Kids' Emotional Health, *continued from front page*

eligible for the program, funded by the New York State Office of Mental Health and operated through PFCS. Treatment referrals are made to various agencies throughout the County, based on appropriate services and family convenience.

Described as the capacity to experience and regulate emotions, form secure relationships, explore and learn, and bounce back from inevitable set-ups, emotional health lays the foundation for success in school and life in general. The RISE program promotes understanding of this essential nature of behavioral health at all levels of the community.

For parents and caregivers, the program offers a simple way to check a child's social-emotional wellness, just as they would their teeth or vision. A streamlined set of approximately 20 questions are provided by the Health Department MCH nurses, and completed by a parent or caregiver.

Then a highly trained, early recognition specialist at PFCS reviews the results and determines if a more detailed assessment is recommended.

The two full-time PCDOH MCH nurses, along with the part-time, bicultural/bilingual Spanish-speaking nurse, have been using the standard Ages & Stages Questionnaires (ASQ) with their birth to three-year old population in the Child Find program. Adding the questionnaire's social-emotional tool (ASQ-SE) is a natural extension to their continuing program. The social-emotional tool can be completed by the parent or caregiver between 6 and 36 months.

Older children should be referred directly to the RISE specialist, Julie Doyle, MS, at PFCS, who can provide the age-appropriate screening. She can be reached at 845-225-2700, x110 or by email at jdoyle@PFCSinc.org

For referrals to the RISE or Child Find programs

Diane Liscia, RN, MS, CLC
Jean Ralston, RN, MSN, CLC
Maria Sihuyay, RN

845-808-1390 phone
845-808-1336 fax

Blood Lead Level Testing is Mandatory for Children

More than 30 percent of Putnam County children are not being screened for blood lead levels (BLL) as required by public health law.

All children, regardless of their risk, need BLL screenings performed at age one and again at two. Public health law directs physicians to assess children for risk factors annually through six years of age and to perform additional BLL tests, if any one risk factor is found. (See story at the right, “7 questions to age 6: Assessing lead exposure risk.”)

Follow-up testing should also be continued up to 18 years of age, if the child meets certain criteria, including one of the following: residing in pre-1978 housing with deteriorating lead-based paint; being adopted from countries with few lead restrictions; access to imported foods, toys, cosmetics or herbal medicines; or

having parents or caregivers with occupations or hobbies exposing them to lead.

Early recognition and continued monitoring allows for both behavioral and environmental action and can mitigate further exposure. The Putnam County Department of Health is available to facilitate both BLL testing and environmental detection.

Even low blood lead levels (BLL) harm children, according to a growing body of research. Intellectual impairment, evidenced by reduced IQs, has been repeatedly linked to BLLs <10µg/dL, the action level recommended since 1991. Now the Centers for Disease Control and Prevention (CDC) has lowered the recommended action level again. The new guidelines are based on a reference value, the 97.5th percentile of all children, 1 to 5 years of age. This currently equates to 5µg/dL, cutting the level virtually in half.

For info on lead poisoning and environmental testing

Joanne Ryan, RN
845-808-1390, x43241 phone
845-808-1336 fax

Rick Carano
Environmental Health
845-808-1390, x43216 phone
845-278-7921 fax

7 questions to age 6: Assessing lead exposure risk annually

- 1 Does child live in, or regularly visit space with deteriorating lead-based paint? Older, poorly maintained housing or other facilities may have old paint under newer paint. Renovations or remodeling can pose risks.
- 2 Has child spent time outside U.S.? All foreign-born children should be tested upon arrival.
- 3 Does child have siblings, housemates or play-mates being monitored/treated for lead poisoning?
- 4 Does child eat non-food items (pica)? Does child mouth toys, jewelry, keys, etc.?
- 5 Does child have frequent contact with adults whose job or hobby involves lead exposure? (Shooting or making fire arms; fishing with lead weights; collecting lead or pewter figurines; jewelry, stained glass, or pottery making; house and industrial painting; plumbing, renovation or construction; auto or electronics repair, welding; battery recycling; or lead smelting, etc.)
- 6 Does family use traditional medicines, health remedies, cosmetics, powders, spices or food from other countries?
- 7 Does family cook, store or serve food in leaded crystal, pewter or pottery from Asia, Latin America, or the Middle East?

New Gonorrhea Guidelines, *continued from front page*

gonococcal infections with an antibiotic providing coverage for chlamydia, regardless of chlamydia status.

Clinicians with patients experiencing treatment failures, or suspected treatment failures, (i.e. persistent symptoms after treatment with dual therapy) should culture all anatomic sites, not solely the initial infection site. Additionally, the clinician should contact the Putnam County Department of Health within 24 hours at 845-808-1390, X 43240.

¹ The guidelines are published in the *Morbidity and Mortality Weekly Report*, **August 10, 2012** / 61(31); 590-594: http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6131a3.htm?s_cid=mm6131a3_w

Questions? Call the NYSDOH Bureau of STD Prevention and Epidemiology at 518-474-3598 or by e-mail at stdc@health.state.ny.us.

Tuberculosis Services Available for Both No-Risk and High-Risk Residents

Patients who require tuberculosis testing for routine reasons, including employment or school admission, are able to utilize low-cost services at the Putnam County Department of Health (PCDOH). **Appointments are required and must be scheduled ahead of time.** A fee of \$20.00 is charged to cover the cost of the PPD injection, its placement and follow-up reading appointments. This service is provided as a convenience for those who live and work in Putnam County.

Tuberculosis continues to be a reportable illness and high-risk individuals are screened, evaluated and treated under the PCDOH tuberculosis program free of charge. Individuals found to have latent tuberculosis infection (LTBI) as well as

active disease are offered treatment to reduce their risk of developing and spreading this potentially deadly disease. Local contact investigations are conducted on an ongoing basis by Health Department staff to safeguard the public's health, as required by the NYS Department of Health.

Reporting TB/Scheduling TB screening appointment

Alice DuBon, RN, MS, FNP
845-808-1390, x43240
845-808-1336 fax

Pat Gormley, RN
845-808-1390, x43140
845-808-1336 fax



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Even doctors' brief advice helps patients lose weight

Primary Care Providers (PCPs) can make a difference in patients' weight loss efforts, so says a recent meta-analysis and literature review, reported earlier this year in the *International Journal of Obesity*.

Researchers conducted an exhaustive literature search, surveying more than 6,000 possible articles to identify 32 with the best data. From these, they picked six common measurable outcomes: 1) patient attempt at weight loss (WL); 2) patient perceptions of WL advice; 3) patient stage of change; 4) patient weight maintenance attempt; 5) patient attempt at specific behavior change, related to WL; and 6) actual WL by patient.

What they consistently found was that when a physician offered advice it had a positive effect on patients' activities related to WL. Twenty-two of the studies looked specifically at weight loss attempts and statistically significant positive associations were found in all but one study when a doc-

tor offered even brief advice. Furthermore, meta-analysis determined an odds ratio (OR) of 3.85, indicating that patients who engaged in weight loss efforts were nearly four times more likely to have received advice from their physicians.

Seven studies looked at the link between PCP advice and actual weight loss and again found positive associations, regardless of study size, population type, or nature of the advice (i.e. advanced counseling or brief recognition or diagnosis of weight problem).

Source: Rose SA, Poynter PS, Anderson JW, Noar SM, Conigliaro J. Physician weight loss advice and patient weight loss behavior change: a literature review and meta-analysis of survey data. *International Journal of Obesity*, 2012;3:1-11.

Abstract available @ <http://dx.doi.org/10.1038/ijo.2012.24>

2012/13 Health Assessment Process Begins Anew

A new, expanded health survey of Putnam County residents is being conducted by the Putnam County Department of Health. The 2012/13 version builds on the previous 2010 Nutrition and Physical Activity survey, which collected responses from nearly 700 residents. In addition to gathering updated data, the new edition is closely aligned with the health priorities identified last year by public health leaders and healthcare providers at the annual Health Summit. Mental health and substance abuse, access to quality health care and chronic diseases were the top issues. The survey incorporates questions from various tools including a simple screen for substance abuse, and elements from the Beck Depression Inventory (BDI) to assess depressive symptomology.

Patients, staff, and all residents 18 years and older, are encouraged to take the survey and be a part of the community health assessment process. Visit www.putnamcountyny.gov and click on "Health Survey." The 2010 survey results are available online as well.