NOVEMBER 2022

HIC UPDATE

Activities of the Hawaii Immunization Coalition

Hawaii Immunization Coalition
...Protecting Hawaii's Families

2023 Hawaii – CDC PINK BOOK COURSE

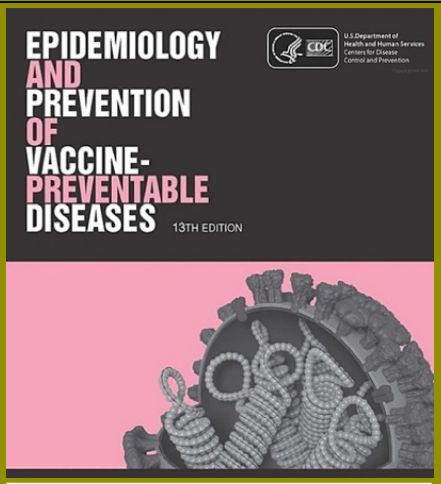
March 7–8, 2023 | 8 AM – 4 PM at the Hawai'i Convention Center

Hear from Centers for Disease Control and Prevention (CDC) experts from the National Center for Immunization and Respiratory Diseases.

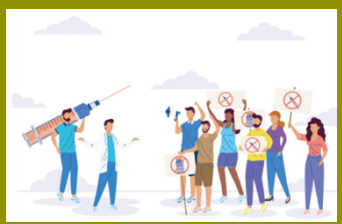
This will be a live, in-person two-day course with continuing education credits (CME, CNE, CECH, CUE, CPE) offered through the CDC.

Flyer on PG. 2 and find link to registration
https://bit.ly/3sb5DyK

Travel Scholarship Application
https://forms.gle/DtA58sP6YJcCBaok8
This year we are pleased to offer 7 travel scholarships sponsored by the HMSA Foundation for those residing on a neighbor island.



Thinking of ***sponsoring*** or having an ***exhibitors table*** at the 2023 Hawaii CDC Pink Book Course? Please contact *Jodie Sanada* (jksawai@gmail.com) for information on sponsorship and exhibition.



VACCINE ADVOCACY DINNER:

Confidence and Hesitancy Overview

March 7, 2023 | 6:00 PM
at the Ala Moana Hotel

Attend a ***FREE*** event with dinner at Ala Moana Hotel on ***March 7, 2023 , 6 – 7:30 PM***. There will be a short presentation on "Vaccine Advocacy: Confidence and Hesitancy Overview" by ***Jerome Sigua MD***, medical science liaison from Sanofi. The presentation will be followed by an opportunity for networking and collaborative discussions.
Limited to the first 50 people who sign up.
This is a non-promotional Dinner Presentation Sponsored by Sanofi Vaccines.

IN THIS ISSUE

PG. 2
Hawaii 2023 – CDC Pink Book Course Flyer

PG. 3
Project ECHO: Hepatitis B

PG. 4
Stay Up to Date with COVID-19 Vaccines, Including Boosters

Kūpuna Power – COVID-19 Booster Vaxed to the Max Commercial

Influenza Update – United States, Fall 2022

PG. 5
Ebola Outbreak in Uganda

Spike in Pediatric Respiratory Disease in the United States

PG. 6
A Case of Paralytic Poliomyelitis in an Unvaccinated Person found in Rockland County, New York

PG. 7
14th Aloha Pediatric Infectious Diseases Conference Update

Hepatitis Vaccination Resource for Healthcare Providers

The Hawaii Immunization Coalition (HIC) is a statewide, community-based non-profit 501(c)3 coalition of public and private organizations and concerned individuals whose mission is to promote effective strategies to ensure that all of Hawaii's families are appropriately vaccinated against vaccine-preventable diseases.

CDC PINK BOOK COURSE

THE EPIDEMIOLOGY AND PREVENTION OF VACCINE-PREVENTABLE DISEASES COURSE

March 7-8, 2023/8AM-4PM

Hawai'i Convention Center/
1801 Kalākaua Ave/Honolulu, HI
96815

Faculty from CDC's National Center for Immunization and Respiratory Diseases will present a live, two-day comprehensive review of immunizing principles, as well as vaccine-preventable diseases and the recommended vaccines to prevent them. The course will feature the most up-to-date immunization information from the Advisory Committee on Immunization Practices (ACIP). The course is designed for anyone seeking the most comprehensive and current knowledge of immunization, including physicians, nurses, medical assistants, pharmacists, immunization providers, program managers, and nursing and medical students. Participants will need to have a basic understanding of biology and immunization. **Continuing education credits (CME, CNE, CECH, CUE, CPE) approximately 14.5 credit hours will be available at course completion through the CDC.**

SPEAKER: ANDREW KROGER

Andrew Kroger, M.D., M.P.H., is a medical officer for the National Center for Immunization and Respiratory Diseases at the CDC. As one of the traveling trainers in the Health Education and Communication Branch, Dr. Kroger has given multiple presentations on topics ranging from immunization updates to pandemic influenza preparedness.

SPEAKER: ELISHA HALL

Elisha Hall, PhD, RD is a Health Education Specialist for the National Center for Immunization and Respiratory Diseases at the Centers for Disease Control and Prevention (CDC). She is the lead editor of the 14th edition of the Pink Book and has spent the last two years deployed to the COVID-19 response.

The Hawaii Immunization Coalition hopes to offer a limited number of travel scholarships to State of Hawaii (excluding Oahu) residents who plan to attend the CDC Pink Book course. For more information, email hicimmunizehawaii@gmail.com

TWO DAY REGISTRATION:
Early Bird - $200
(Ends December 1, 2022)
Student - $175
(Ends February 7, 2023)
Regular - $225
(Available December 2 - February 7, 2023)
Late - $250
(Available February 8 - February 28, 2023)
Registration at event - $300

ONE DAY REGISTRATION:
Early Bird - $100
(Ends December 1, 2022)
Regular - $115
(Available December 2 - February 7, 2023)
Late/Day of - $150

REGISTER AT:
https://bit.ly/3sb5DyK

Hawaii Immunization Coalition
...Protecting Hawaii's Families

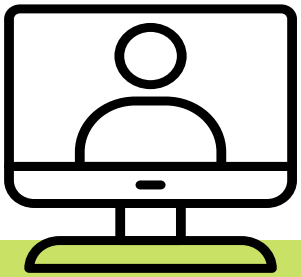
Project ECHO:

Hepatitis B

The Hawai'i Department of Health is partnering with Hawai'i Learning Groups, the Hawai'i Health & Harm Reduction Center, and Hep Free Hawai'i to produce a **16- week learning series on Hepatitis B.**

Objectives

- To increase self-efficacy and confidence among primary care providers to prevent, evaluate, treat, and control hepatitis B in a harm reduction context.
- To decrease the need for specialist referrals to treat hepatitis.
- To decrease the need for patients with hepatitis B to travel for specialty care.



Mondays
12:00pm- 1:15pm (HST)

Aug 22, 2022	Oct 24, 2022
Aug 29, 2022	Oct 31, 2022
Sept 12, 2022	Nov 07, 2022
Sept 19, 2022	Nov 14, 2022
Sept 26, 2022	Nov 21, 2022
Oct 03, 2022	Nov 28, 2022
Oct 10, 2022	Dec 05, 2022
Oct 17, 2022	Dec 12, 2022

Free continuing education credits available, including CME and CPE!

For more information:

Thaddeus Pham, Department of Health
Thaddeus.Pham@doh.hawaii.gov

Register Here

or scan QR Code

Project ECHO Hawai'i Learning Groups

HepFree HAWAI'I

HAWAI'I HEALTH & HARM REDUCTION CENTER

COVID-19 Booster,
Vaxed to the Max PSA

https://vimeo.com/757647107?utm_source=email&utm_medium=vimeo-cliptranscode-

Stay Up to Date with COVID-19 Vaccines, Including Boosters

What You Need to Know

- Updated (bivalent) boosters became available on:
  - September 2, 2022, for people 12 years of age and older
  - October 12, 2022, for people aged 5–11
- CDC recommends everyone stay up to date with COVID-19 vaccines for their age group:
  - Children and teens ages 6 months–17 years
  - Adults ages 18 years and older
- Getting a COVID-19 vaccine after you recover from COVID-19 infection provides added protection against COVID-19.
- If you recently had COVID-19, you may consider delaying your next vaccine dose (primary dose or booster) by 3 months from when your symptoms started or, if you had no symptoms, when you first received a positive test.
- People who are moderately or severely immunocompromised have different recommendations for COVID-19 vaccines.
- COVID-19 vaccine and booster recommendations may be updated as CDC continues to monitor the latest COVID-19 data.

Reference https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html

Influenza Update – United States, Fall 2022

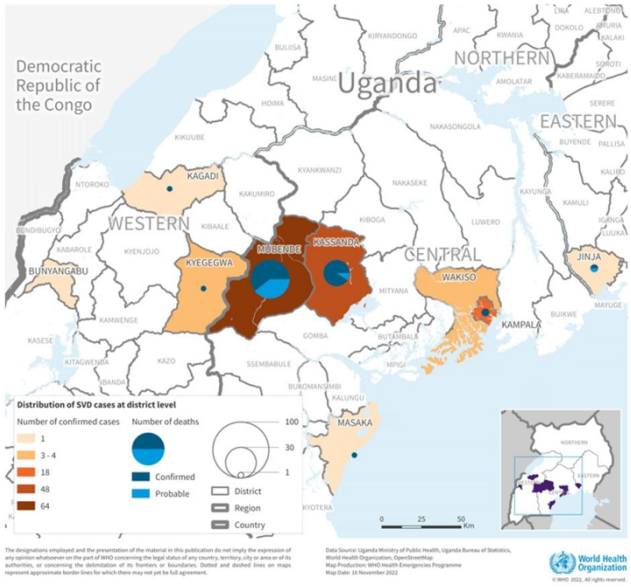
As of epidemiological week (EW) 41(October 9-15) in 2022 in the US, the proportion of outpatient visits for influenza-like illness (ILI) was 3%, remaining above the national baseline (2.5%) for 2 consecutive weeks, and was above the national average (1.4%) of the past 5 prepandemic influenza seasons (which consistently began between EW 45 and EW 51). Influenza A(H3N2), which typically results in more severe illness (especially in older adults), accounted for 78% of all isolates in the US. The remaining breakdown of all isolates was 20% influenza A(H1N1), 2% influenza B/Victoria, and 0% influenza B/Yamagata. In Canada, the proportion of outpatient visits for ILI was average compared to the past 6 prepandemic seasons (1.7%); of all isolates, the virus breakdown was 73% influenza A(H3N2), 22% influenza A(H1N1), and 5% influenza B. In Europe, the proportion of outpatient visits for ILI remained at low or baseline intensity across most of the continent, with Kazakhstan reporting medium intensity and Malta reporting high intensity. Of all isolates, the virus breakdown was 54% influenza A(H3N2), 39% influenza A(H1N1), and 7% influenza B. Information on vaccine effectiveness and drug resistance is not yet available.

During the Southern Hemisphere 2022 influenza season (April-September), ILI activity was above average, with influenza A(H3N2) as the predominant strain in all regions; no indications of drug resistance were reported. For the 2022-23 season, patients with respiratory symptoms consistent with either influenza or COVID-19 should be tested for both, preferably with an available duplex SARS-CoV-2/influenza PCR test. All efforts should be made to complete influenza vaccination by the end of October. COVID-19 vaccination, if indicated, should be administered simultaneously with influenza vaccine.

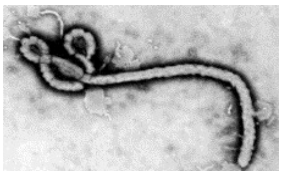
For vaccine supply status and vaccination recommendations, see United States: 2022-23 Influenza Vaccine Supply:
https://www.travax.com/whats-new/bulletin/116752385

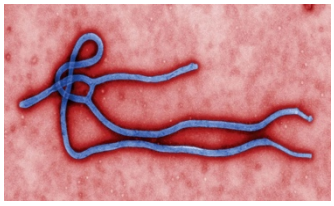
United States: 2022-23 Influenza Season Vaccine Recommendations:
https://www.travax.com/whats-new/bulletin/115376128

Ebola Outbreak in Uganda



Map of confirmed cases and deaths of Ebola disease caused by SUDV, by district, as of 21 November 2022. (WHO, DON425 – Ebola Disease caused by Sudan ebolavirus – Uganda, 24 November 2022)





On September 20, 2022, an outbreak of Ebola virus disease, caused by the species *Sudan ebolavirus* (SUDV), was declared by Ugandan health authorities. This is the first Ebola disease outbreak caused by SUDV since 2012. As of November 28, 2022, there have been a total of 141 confirmed cases with 55 deaths, and a case fatality ratio of 39% (55/ 141). Among these confirmed cases there have been 23 infections and 8 deaths among pediatric populations, leading to the Ugandan Ministry of Education and Sports to order all pre-primary, primary, and secondary schools to close across on November 25, 2022, cutting the school year short by two weeks in an effort to curb infections in this population.

Currently, there is no FDA licensed vaccine against the Sudan Ebola virus. Based on available evidence, Ervebo – the current FDA licensed vaccine against the Zaire strain – will not provide cross protection against the Sudan Ebola virus infection. Three experimental vaccine candidates (VSV-SUD from Merk/ IAVI, ChAd3-SUDV from the Sabin Institute, and biEBOV from Oxford University/ Jenner Institute) have been recommended for inclusion in planned ring vaccination trails.

References

https://emergency.cdc.gov/coca/calls/2022/callinfo_101222.asp
https://www.who.int/emergencies/disease-outbreak-news/item/2022-DON425
https://reliefweb.int/report/uganda/uganda-ebola-virus-disease-situation-report-no-61

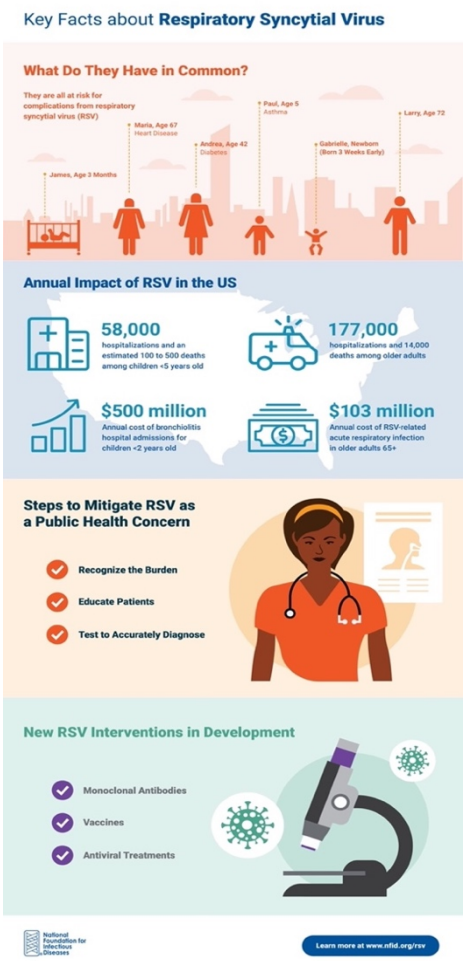
Spike in Pediatric Respiratory Disease in the United States

There has been a dramatic and unexpected spike rise in respiratory illness among all age groups, which has hit pediatric populations, overwhelming pediatric hospital units across the nation. While it is typical for respiratory illness to surge in winter months, these increases are higher than normal and have started unusually early and are not connected to the region's COVID-19 rates. In early September the CDC issued a Health Advisory (HAN00474) alerting health care providers that several regions of the country had reached out to the CDC "during August 2022 about increases in pediatric hospitalization in patients with severe respiratory illness who also tested positive for rhinovirus (RV) and/ or enterovirus (EV)". Then on November 4, 2022, the CDC issued an additional Health Advisory (HAN00479) "about early, elevated respiratory disease incidence caused by multiple viruses occurring especially among children and placing strain on healthcare systems. Co-circulation of respiratory syncytial virus (RSV), influenza viruses, SARS-CoV-2, and others could place stress on healthcare systems this fall and winter."

Hawaii and 43 other states have observed an increase in cases of respiratory syncytia virus (RSV). This increase in pediatric respiratory illness a head of the winter months is of particular concern due to continued concerns over the next COVID-19 winter wave and traditional influenza season approaching.

References

https://www.cdc.gov/surveillance/nrevss/rsv/natl-trend.html
https://www.cdc.gov/mmwr/volumes/71/wr/mm7140e1.htm?s_cid=mm7140e1_w
https://www.nytimes.com/2022/11/01/science/rsv-children-hospitals.html?smid=url-share



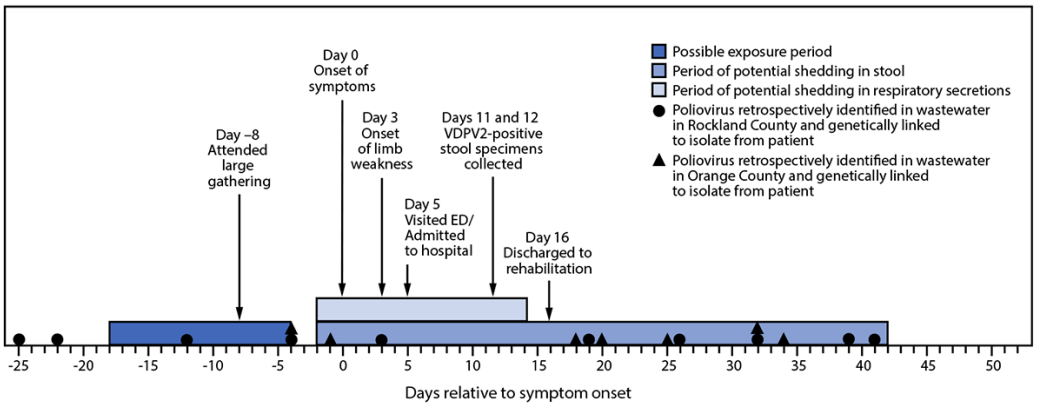
A Case of Paralytic Poliomyelitis in an Unvaccinated Person

In July 2022, the New York State Department of Health issued a Health Advisory for a case of poliomyelitis in an individual unvaccinated against polio occurring in Rockland County, New York State linked to the Poliovirus Sabin type 2. Reversion of the live-attenuated Sabin oral polio vaccine (OPV) back to the neurovirulent virus in the intestine of an individual vaccinated with OPV, which is then excreted, and subsequently contained in the wastewater, is a known risk of OPV, which can result in the extremely rare instance of vaccine-associated paralytic poliomyelitis (VAPP, with a rate of approximately 2-4 events per 1 million births). To eliminate is rare risk associated with OPV, in 2000 the US suspended the use of OPV, with universal use of the inactivated polio vaccine (IPV), in which reversion does not occur. OPV is still used as effective public health tool in many countries throughout the world due to its inexpensive cost and ease of administration, of particular note in resource limited areas, where health professionals and sterile needle syringes are scare. The ease of administration of OPV has made it the principal polio vaccine used in many ongoing and historical polio eradication campaigns. Another advantage of OPV, for several weeks following vaccination OPV will replace in the intestines of the vaccinated individual, which is excreted in their stool and can be spread by close contact, and in areas of poor hygiene and sanitation vaccination with OPV can result in a type of passive immunization in the community.

Although, the risk of VAPP associated with OPV has been known for many decades, and the US has immigration and tourism from populations all over the world and areas where OPV is still the mainstay for polio vaccination, this was not of much concern in the US as the risk of VAPP is eliminated among individuals who have been vaccinated for polio with either IPV or OPV and polio vaccination rates have traditionally been high throughout the country. However, the rise of vaccine misinformation and subsequent decrease in vaccination rates in the US allowed for the coalescence of an unvaccinated individual being exposed to revertant poliovirus Sabin type 2 and experiencing an extremely rare case of VAPP, hospitalized with flaccid lower limb weakness. Following this report, surveillance testing of the wastewater in the neighboring New York counties identified vaccine-derived poliovirus type 2 in several other counties in New York State, including New York City, Orange County, Sullivan County, and Nassau County. This has prompted the CDC to launch further wastewater surveillance testing for poliovirus throughout the country. Typically, one case of disease would not warrant such concern and national action, however the extremely rare nature of VAPP indicates a large-scale issue in the community. On September 7, 2022, the UK House of Commons Library released a report on the detection of multiple vaccine-like-type-2 poliovirus isolates collected from the London Beckton Sewage Treatment Works in early 2022. The researchers also found "that the isolates were genetically related and indicate poliovirus transmission across separate networks of individuals". These findings further highlighted concerns for an increase in cases of poliomyelitis as the similarly, the UK suspended use of OPV in 2004.

Successful global vaccination and eradication campaigns have resulted in the near total global eradication of wild-type polio, except for Afghanistan and Pakistan, where the disease remains endemic due to political strife and vaccine misinformation making it difficult for health workers to administer vaccinations in these areas. The known reversion of OPV and risk of VAPP, however, means that we must stay vigilant with polio vaccination for the foreseeable future. Furthermore, the successful use of wastewater testing for COVID-19, not only demonstrates the capacity for the US to implement this public health tool against other pathogens, but also its utility in passively monitoring communities throughout the country for a variety of pathogens.

References
https://health.ny.gov/diseases/communicable/polio/docs/2022-07-29_han.pdf
https://www.cdc.gov/mmwr/volumes/71/wr/mm7133e2.htm?s_cid=mm7133e2_w#References
https://commonslibrary.parliament.uk/research-briefings/cbp-9618/



FIGURE| Timeline of patient activities, potential poliovirus exposures, shedding, and poliovirus-positive wastewater samples genetically linked to a patient with a case of type 2 vaccine-derived poliovirus — New York, May – August 2022

14th Aloha Pediatric Infectious Diseases Conference Update

On Saturday November 5, 2022 at the Kapiolani Medical Center for Women and Children's (KMCWC) Auditorium, the 14th annual Aloha Pediatric Infectious Diseases Conference hosted a culmination of experts from variety of medical fields. With over 150 attendees via Zoom and in-person, the conference delved into a variety of topics salient to Hawaii Pediatric healthcare providers. The conference started with the keynote address "Vaccines for Global Health: From Need to Impact," by Jerome Kim, M.D., Ph.D., and focused on challenges to global vaccine output. This keynote address was followed by talks from the KMCWC Pediatric Infectious Disease Faculty: Rodolpho Begue, M.D. talked about updates on latent tuberculosis in Hawai'i, Natascha Ching, M.D. discussed pediatric cases of COVID-19 in Kapiolani Medical Center, Raul Ruddy, M.D. M.P.H. spoke on how climate change has affected the prevalence of infectious diseases, Sarah Kemble, M.D. and State Epidemiologist at the Hawai'i Department of Health gave a presentation on public health and infectious diseases in Hawai'i, and Marian Melish, M.D. discussed diagnosis and treatment of congenital infections.

Jerome Kim, M.D. is the Director General of the International Vaccine Institute in Seoul, South Korea, and provided the keynote address in which he described his work in the International Vaccine Institute. The focus of his presentation was to impress upon the audience the many barriers that prevent vaccine development. The most pressing barrier that the scientific community faces inhibiting vaccine development, funding for research, materials, and traction from major companies to uptake said research and pay for manufacturing – even including cost analysis of what different vaccines would cost in different countries due to the manufacturers supplying them. Additionally, there is a scarcity of researchers focused on developing vaccines for neglected tropical diseases (NTD). These NTDs primarily affect developing nations and/ or lower-middle income countries, and therefore research and development of vaccines to prevent NTDs lack commercial incentives for vaccine manufacturers and public interest for governments of more developed nations to invest in vaccines to combat

Keynote speaker Jerome Kim, M.D. at the 14th Aloha Pediatric Infectious Diseases Conference at KMCWC on Saturday November 5, 2022.
Photo courtesy of Maansi Murty, M.S. student in the Tropical Medicine Department, JABSOM, UHM.

Hepatitis Vaccination Resource for Healthcare Providers

Current recommendations for Hepatitis A and B vaccinations for healthcare providers.

Oscar Herrera-Restrepo, Kimberly Davis, Carolyn Sweeney, Eric Davenport, Parinaz Ghaswalla & Philip O. Buck (2022) Hepatitis A and B vaccination in adults at risk: A survey of US healthcare providers' attitudes and practices, Human Vaccines & Immunotherapeutics,
DOI: 10.1080/21645515.2022.2123180