

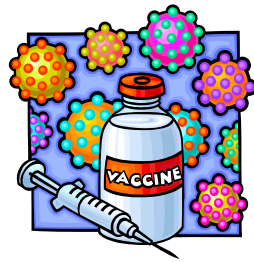
Trumbull County Health Department H1N1 Newsletter

October, 2009



H1N1

This virus was first identified in the United States in April, 2009 and continues to circulate in the U.S. and the world. The CDC believes that most of the influenza currently being seen is H1N1. The current circulating form does not seem to be an especially virulent form but there have been some deaths related to this virus.



Vaccination Clinics

We are beginning to see vaccine shipments arrive at the local health departments. The live attenuated (nasal mist) was shipped the week of October 5 and we expect to see some initial shipments of the injections beginning October 15. These initial shipments will be very small and we don't expect to see large amounts of vaccine locally until early November.

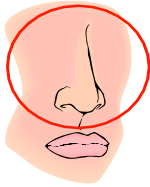
The Trumbull County Health Department, along with the other health departments in the county, is making plans for community and/or school based clinics and the dates, times and locations will be posted as soon as we have verification from Ohio Department of Health on the arrival of vaccine. Information and consent forms for the school based clinics will be coming home from school with your child the latter part of October. We plan to provide clinics in the schools throughout the month of November. Information about pre-registration for the community based clinics will also be provided once dates are finalized. Your physician and other providers in the community will also be able to provide the immunization; they will also be following the CDC priority group guidelines.

There will be no charge for H1N1 vaccine provided through the Trumbull County Health Department

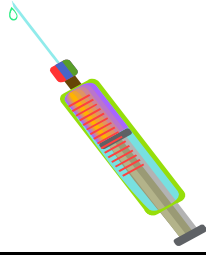
Just a reminder: This year there will be seasonal and H1N1 flu shots. The seasonal flu shots are the shots that are offered every year and it is recommended that you get your seasonal flu shot now. The H1N1 is a separate vaccine and will not be available until mid October/early November for prioritized groups. It will continue to be administered to other groups as it becomes available. The health departments will offer ongoing clinics to serve our residents.



Children under the age of 10 years will need two (2) doses spaced at least 21 days apart.



The Nose



What's the Difference????

You may hear that there is a nasal spray as well as an injection available for the H1N1 vaccine. The nasal spray is a live attenuated form of the virus that is sprayed into the nasal passages and gets absorbed through the mucous membrane. Attenuated means it has been weakened so that it does not cause the actual disease. Because it is a live vaccine, as a precaution it is only recommended to be given to those 2 years - 49 years of age who have no medical conditions or weakened immune systems. It is not recommended for pregnant women. The injections are made of killed virus so it can be given to anyone who does not have an allergy to eggs or other ingredients in the vaccine.

Priority groups for the H1N1 vaccine

Although the CDC says that eventually there will be vaccine available for all who want it, the initial release of vaccine will be prioritized for the following persons:

- Pregnant women
- Caregivers of infants under 6 months of age
- Medical persons who will have direct contact with persons or materials that are contaminated with H1N1virus.
- Children and young adults 6 months-24 years of age
- Persons 25-64 years with medical conditions



Thimerosal

Thimerosal is a preservative that is added to multi dose vials of vaccines. The H1N1 vaccine for children 6 months-23 months is in individual dose vials and contains no thimerosal. We will also have individual doses for other ages that will be thimerosal free, but the multi dose vials will contain thimerosal just as all influenza vaccine has in the past. Numerous studies have shown no correlation between thimerosal and autism. Attached to this newsletter is a Q&A about thimerosal. If you would like more information please go to the CDC website (cdc.gov)



Prevention Your Health is in your Hands Wash Them!

Whether you are in one of the priority groups or whether or not you choose to get immunized you can help protect yourself and prevent spread of the disease by doing the following:

- WASH YOUR HANDS
- Cover your cough/sneeze
- WASH YOUR HANDS
- Eat a healthy diet
- WASH YOUR HANDS
- Get plenty of rest
- WASH YOUR HANDS
- Stay home if you are feeling ill* (at least 24 hours after fever is gone)
- WASH YOUR HANDS
- Get a seasonal flu shot

*contact your health care provider if you experience the following:

- Trouble breathing (in children fast breathing)
- Pain or pressure in chest or abdomen
- Confusion
- Sudden dizziness
- Severe or persistent vomiting
- (in children) bluish or gray skin color
- (in children) not waking or interacting or being so irritable that the child doesn't want to be held.
- Flu like symptoms that do not improve or improve but then return with fever and worsening cough

Your local health department will continue to provide you with updated information as we receive it. Please feel free to call us at 330-675-2590, then press #3 if you have questions or would like additional information.



H1N1 Flu

General Questions and Answers on Thimerosal

September 14, 2009, 11:00 PM ET

What is thimerosal?

Thimerosal is a mercury-based preservative that has been used for decades in the United States in multi-dose vials (vials containing more than one dose) of some vaccines to prevent the growth of microorganisms, such as bacteria and fungi, which may contaminate them.

What are preservatives and why are they used in vaccines?

In vaccines, preservatives are used to prevent the growth of bacteria and fungi in the event that they get into the vaccine. This may occur when a syringe needle enters a vial as a vaccine is being prepared for administration. Contamination by germs in a vaccine could cause serious illness or death. In some vaccines, preservatives are added during the manufacturing process to prevent microbial growth.

Will the 2009 H1N1 influenza vaccine contain thimerosal?

The 2009 H1N1 influenza vaccines that FDA is licensing (approving) will be manufactured in several formulations. Some will come in multi-dose vials and will contain thimerosal as a preservative. Multi-dose vials of seasonal influenza vaccine also contain thimerosal to prevent potential contamination after the vial is opened.

Some vaccine manufacturers will be producing 2009 H1N1 influenza vaccine in single-dose units, which will not require the use of thimerosal as a preservative. In addition, the live-attenuated version of the vaccine, which is administered intranasally (through the nose), is produced in single-units and will not contain thimerosal.

I have concerns about the use of thimerosal. Is thimerosal still being used?

People have a right to expect the vaccines they receive are safe and effective. CDC and FDA also hold vaccines to the highest standards of safety. That is why CDC and FDA continually evaluate new scientific information about the safety of vaccines. Since 2001, no new vaccine licensed by FDA for use in children has contained thimerosal as a preservative, and all vaccines routinely recommended by CDC for children under six years of age have been thimerosal-free, or contain only trace amounts, except for multi-dose formulations of influenza vaccine. This was done as a precautionary step and not because there was evidence confirming that thimerosal-containing vaccines were causing health problems. The most recent and rigorous scientific research does not support the hypothesis that thimerosal-containing vaccines are harmful.

Thimerosal is an important preservative that protects vaccines against potential microbial contamination, which may occur in opened multi-dose vials of vaccine. Such contamination could cause serious illness or death. Since seasonal influenza vaccine is produced in large quantities for annual immunization campaigns, some of the vaccine is produced in multi-dose vials, and contains thimerosal to safeguard against possible contamination of the vial once it is opened.

Three leading federal agencies (CDC, FDA, and NIH) have reviewed the published research on thimerosal and found it to be a safe product to use in vaccines. Three independent organizations [The National Academy of Sciences' Institute of Medicine, Advisory Committee on Immunization Practices (ACIP), and the American Academy of Pediatrics (AAP)] reviewed the published research and also found thimerosal to be a safe product to use in vaccines. The scientific community supports the use of thimerosal in influenza vaccines.

Is thimerosal safe when used as a preservative in vaccines?

CDC places a high priority on vaccine safety, surveillance, and research. CDC is aware that the presence of the preservative thimerosal in vaccines and suggestions of a relationship to autism has raised concerns. These concerns make the decisions surrounding vaccinations confusing and difficult for some people, especially parents. Numerous studies have found no association between thimerosal exposure and autism. Since 2001, no new vaccine licensed by FDA for use in children has contained thimerosal as a preservative and all vaccines routinely recommended by CDC for children under six years of age have been thimerosal-free, or contain only trace amounts, except for some formulations of influenza vaccine. Unfortunately, we have not seen reductions in the numbers of children identified with autism indicating that the cause of autism is not related to a single exposure such as thimerosal.

The federal government is committed to assuring the safety of vaccines. This is achieved by FDA oversight of rigorous pre-licensure trials and post-licensure monitoring by CDC and FDA. This commitment not only stems from our scientific and medical dedication, it is also personal – for most of us who work at CDC are also parents and grandparents. We too, place tremendous value on the health and safety of children.