

# VACCINES FOR CHILDREN



## Dallas County Health and Human Services

WINTER 2013 - NEWSLETTER



**N**ational Influenza Vaccination Week, (NIVW) is an annual observance highlighting the importance of influenza vaccination while increasing awareness regarding immunization coverage for both children and adults.

Influenza (flu) is a contagious respiratory disease caused by the influenza virus. The virus is believed to spread by droplets from individuals who are infected while coughing, sneezing, or talking. Symptoms can be mild to severe and can lead to hospitalization and even death. Older adults account for more than 90% of deaths attributed to pneumonia and influenza. Other high risk groups include young children, pregnant women and individuals with weakened immune systems.

Children younger than 5 years of age commonly need medical care because of the flu virus. It is reported that an average of 20,000 children under the age of 5 are hospitalized each year due to complications caused by the flu. However, severe complications are most common in children younger than 2 years of age.

The flu may be passed on before symptoms occur as well as while the individual is ill. It may be spread from a healthy adult from 1 day before symptoms develop up to 5-7 days after becoming ill. The virus can be spread from one individual to another up to 6 feet away.

The flu season in the United States can begin as early as October and last as late as May. As the viruses are constantly changing

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## NIVW

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and the body's immunity diminishes over time an annual seasonal flu vaccine (flu shot or flu nasal spray) is the most effective way to reduce chances of contracting the flu and spreading it to others.

CDC's recommendation is that individuals 6 months and older receive a flu vaccine. For children younger than 6 months the flu vaccine is not recommended. However, as this age group is high risk for flu complications, family members should get vaccinated to minimize the spread to the infant. It is important that your health care provider is made aware of any allergic reactions prior to getting vaccinated.

Traditional flu vaccines included trivalent vaccines made to protect against 3 flu viruses. Influenza A (H1N1), (H3N3) and influenza B virus. Added this season are flu vaccines designed to protect against 4 flu viruses known as quadrivalent vaccines.

These vaccines provide protection against influenza A virus and an additional influenza B virus.

- Standard dose trivalent shots are approved for ages 6 months and older
- High dose trivalent shots approved for age 65 and older
- Standard dose intradermal trivalent shot (injected under the skin) approved for ages 18 years of age to 64 years of age
- Standard dose quadrivalent shot
- Standard dose quadrivalent flu vaccine

given as a nasal spray (approved for healthy individuals ages 2 years to 49 years)

Individuals who have a moderate to severe illness with or without a fever should generally not receive the vaccine until they recover. Also, individuals with a history of Guillain-Barre' Syndrome (GBS) who has received influenza vaccine in the past and not at high risk for influenza should speak with their personal physician to decide whether the vaccine is recommended.



## PREVENTIVE MEASURES

- Avoid close contact with individuals who are ill
- Stay home when you are sick
- Cover your mouth and nose when you are coughing and sneezing
- Frequent hand wash or use of hand sanitizer
- Avoid touching eyes, nose or mouth
- Clean and disinfect surfaces and objects that may be contaminated with germs





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## MEASLES/MUMPS/RUBELLA

**M**easles is a highly contagious virus and it is reported as being so contagious, that if one individual has the virus, 90% of those close to the infected individual who are not immune will also become infected. The virus is contagious from 4 days before the onset of a rash to 4 days after the appearance of a rash. Additional symptoms may include a fever greater than or equal to 101 degrees F, cough, runny nose and or eye redness.

Rubella (German Measles) is a milder contagious viral disease characterized by fever, mild upper respiratory congestion, fine red rash lasting a few days and arthritis found mostly in women. If rubella is contracted during early pregnancy, serious damage can be caused to the fetus as well as a miscarriage.

Mumps virus is characterized by, fever, headache, muscle pain, loss of appetite, swollen glands (parotitis) swollen or tender testicles and fatigue (tiredness). Mumps can occasionally cause inflammation of the testicles in males who have reached puberty (orchitis), inflammation of the brain (encephalitis), inflammation of the ovaries (oophoritis), inflammation of the breast (mastitis) and temporary or permanent deafness. However, it is reported most individuals with the mump virus will recover fully.

The transmission of the mumps virus is reported as likely to occur before the salivary glands begin to swell and within 5 days after the swelling begins. CDC recommends isolating individuals who have contracted the mumps for 5 days after their glands begin to swell. The incubation time after an individual is exposed to the virus can range from 12-25 days. Measles, Mumps and Rubella spread from person to person in the air. It can easily be contracted by being near an individual who is infected.



The MMR vaccine is the most effective route to preventing the disease.

ACIP (Advisory Committee on Immunization Practices) recommends the MMR vaccine be administered to both children and adults. The MMR vaccine is a live, attenuated (weakened) combination vaccine which protects against measles, mumps and rubella. Some health care providers may carry the MMRV vaccine, (measles, mumps,

rubella and varicella also known as chickenpox).

Review your child's medical record to see if he or she is current with vaccinations.

For adults, one dose of MMR is recommended if not at high risk for exposure and transmission. A second dose of MMR is recommended a minimum of 28 days after the initial vaccination for adults who are students in postsecondary educational settings.

### MMRV Vaccination schedule for children

- Administration of the 1st MMR vaccination at 12-15 months and the 2nd vaccination at 4-6 years of age. The 2nd dose however can be administered before 4 years of age as long as it has been at least 4 weeks between the first and second dose.
- For children traveling internationally, a dose should be administered at 6-11 months before departure. Re-vaccination with MMR at 12-15 months and a second dose at least 4 weeks later.
- All school age children who are on a catch up vaccination schedule should have 2 doses of MMR vaccine.
- Ensure that all school-aged children and adolescents have had 2 doses of MMR vaccine; the minimum interval between the 2 doses is 4 weeks.

## HPV Vaccine

**H**uman Papillomavirus, also known as HPV, is a very common virus that is spread by skin-to-skin contact during any type of sexual activity with another person. HPV infection is common in people in their teens and early 20s. Each year in the United States, about 19,000 cancers caused by HPV occur in women and cervical cancer is the most common. Every year, about 12,000 women are diagnosed with cervical cancer, and about 4,000 women die from it. About 8,000 cancers caused by HPV

occur each year in men in the United States and oropharyngeal cancers are the most common. There are many different types of HPV. Some types can cause cervical, vaginal, and vulvar cancer in women and penile cancer in men. These HPV types can also cause anal cancer and some head and neck cancers in both women and men. Other types of HPV can cause genital warts in both women and men. Genital human papillomavirus (HPV) is the most common sexually transmitted infection in the United States. About 79 million Americans, most in their late teens and early 20s, are infected with HPV. About 14 million people become newly infected each year.

HPV vaccines protect against Human papillomavirus (HPV) infection and the diseases that are caused by HPV.

There are two different HPV vaccines (Cervarix® or Gardasil®) that can be given to girls and young women. Only one HPV vaccine—Gardasil®—can be given to boys and young men. Both Cervarix and Gardasil protect against HPV types that cause most cervical cancer and have been shown

to prevent cervical cancer. Gardasil has been studied and shown to protect against cervical, anal, vaginal and vulvar cancers. Gardasil also protects against HPV types that cause most genital warts and has been shown to prevent genital warts.

HPV vaccination is recommended for pre-teen girls and boys at age 11 or 12 years. The vaccine series can be started beginning at age 9 years. Vaccination is also recommended for 13 through 26-year-old females and 13 through 21-year-old males who have not completed, or on a catch-up schedule for the vaccine series.

Parents and caregivers are encouraged to ask about vaccinations every time they take children for a healthcare visit. Providers should encourage parents that HPV vaccines offer the best protection to girls and boys who receive all three vaccine doses and have time to develop an immune response—it's important to get your child protected. The immune response to this vaccine is better in preteens, and this could mean better protection for your child.



- HPV4 or HPV2 is recommended for the prevention of cervical precancers and cancers in females.
- HPV4 is recommended for prevention of cervical and anal precancers, cancers, as well as genital warts in females.
- HPV4 is recommended for prevention of anal precancers and cancers, as well as genital warts in males.
- HPV vaccine is a 3-dose series. Administer the second dose 1 to 2 m after the first dose and the third dose 6 m after the first dose (at least 24 weeks after the first dose).

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## PERTUSSIS (WHOOPIING COUGH)

**P**ertussis (whooping cough) is a highly contagious respiratory tract infection caused by a bacteria called (*Bordetella Pertussis*) which usually spreads from person to person by coughing or sneezing while in close contact. It is especially contagious in those who are too young to be fully vaccinated. Many infants who get whooping cough (pertussis) are infected by their parents, siblings, and caregivers who may not know they have the disease.

The disease usually begins with cold-like symptoms and is the most contagious during this phase. As pertussis progresses, symptoms may include paroxysm (many rapid coughs followed by a high pitched sound known as a whoop), vomiting and exhaustion.

Centers for Disease Control reports, approximately 1/2 of babies younger than 1 year who develop pertussis will need treatment in the hospital, approximately 1 of 4 hospitalized babies will develop pneumonia, approximately 2 of 3 infants will experience difficulty breathing and the disease can be deadly for 1 of 2 babies hospitalized with pertussis.

Vaccination is the best way to prevent pertussis. Vaccines are available for infants, children, teens and adults. The childhood vaccine is called DTaP and the pertussis booster is Tdap. DTaP is a combination vaccine that protects against diphtheria, tetanus, and pertussis.

CDC recommends for maximum protection against pertussis, that children should receive 5 DTaP shots. Shots 1-3 at 2, 4 and 6 months of age. Shot 4 should be given between 15-18 months of age. Shot 5 should be given at 4-6 years of age before entering school.

Additional recommendations :

- Pre-teens (age 11 or 12 ) years of age receiving regular checkups should receive a dose of Tdap. Teens who did not get the vaccine at 11 or 12 years of age should receive the Tdap at their next visit.
- Adults who did not get Tdap as a pre-teen or teen should receive one dose of Tdap.
- Pregnant women who have not been previously vaccinated with Tdap should receive one dose of Tdap postpartum before leaving the hospital. CDC additionally recommends pregnant women to receive a Tdap vaccination between the 27th and 36th week of each pregnancy which will create protective antibodies passing some of these antibodies to the baby prior to birth.
- Adults 65 years of age and older who have close contact with infants should receive a dose of Tdap.
- Caretakers and healthcare providers in close contact with infants should also receive Tdap.

### TVFC PROGRAM CHANGES

Effective October 1, 2013 each publicly purchased vaccine must be assigned to a funding source and will be noted on vaccine packing slips:

- VFC for federally VFC eligible children ages 0-18 years
- Medicaid
- Uninsured
- Alaskan Native/American Indian
- Underinsured (federally eligible only at an FQHC, RHC, or deputized public health clinics)
- PUBLIC for Texas VFC(TVFC) eligible children ages 0-18 years
- Federal 317 for underinsured children ages 7-18 years
- State for underinsured children ages 0-6 years
- State for uninsured adults served at Adult Safety Net (ASN) Sites
- CHIP for children enrolled in the Children's Health Insurance Program

Please contact VFC representatives for any clarification.

Parts or full contents used within this newsletter were extracted from the publications of the Centers for Disease Control and Prevention and the Texas Department of State Health Services website.

### VACCINES FOR CHILDREN PROGRAM

#### VFC Supervisor

Gerardette Asfaw, MPH, BSN, RN  
(214) 819-2021

#### VFC Team Lead

Callie Williams, LVN  
(972) 692-2701

#### Data Analyst II

Sunesh Chakravelil, MCA  
(214) 819-2804

#### VFC Community Representative

Bridgett Smith  
(214) 819-2018  
Shunta Porter  
(214) 819-2037  
Corey Woods  
(214) 819-1925

#### ImmTrac Outreach Specialists

Charles Williams, Lead Specialist  
(214) 819-2847  
Juliette McCall  
(214) 819-2049  
Irma Medrano  
(214) 819-2852

#### Vaccine Clerks

Nardos Naffe  
(214) 819-2166  
Miguel Mendoza Jr  
(214) 819-2124

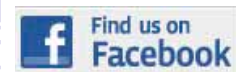
#### TMF Follow-up Personnel

Jean Wilson  
(214) 819-1926

#### Receptionist

Mireya Medrano  
(214) 819-1903

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### Dallas County Health and Human Services

2377 N Stemmons Freeway, Dallas, TX 75207-2710

☎ (214) 819-2000

**Zachary Thompson, M.A.**

Director

**Christopher Perkins, D.O., M.P.H.**

Medical Director / Health Authority