



# Public Health Bulletin

A Publication of the Public Health Department, Jeff Hamm, Health Agency Director  
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## Join Public Health Department on Facebook

Public Health has joined the social networking revolution. A little over a year ago, the department experimented with a Facebook presence in honor of National Public Health Week. However, over the last several months, the department's fan base has more than tripled and activity has increased among those who "like" the page. It's also proven to be a great, easy method of getting the word out about what's new in public health.

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## Public Health Bulletin Switching to E-mail

With more and more people considering their carbon footprint, going green is becoming a popular consideration. Global warming and limited resources are fast becoming a reality, and with the continuously growing demands on paper, forests are in danger of being depleted to meet the heavy demands of growing populations. Public Health would like your help. Rather than mailing our quarterly newsletter, we want to e-mail it to you. Please complete and return the enclosed postcard – by snail mail, e-mail to [pray@co.slo.ca.us](mailto:pray@co.slo.ca.us), fax to 781-1235 or call Pam Ray at 781-5564.

Public Health Department newsletters can also be accessed online at the Public Health Department Web site [www.slopublichealth.org](http://www.slopublichealth.org) (click on *Public Health Bulletins* at the bottom of the home page).

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Penny Borenstein, M.D., M.P.H.



## Sexually Transmitted Diseases - An Oft Neglected Health Threat

A couple of months back, I reported to the Board of the SLO County Medical Association that we were noticing increases in our STD reports. Midway through the year, that upward trend continues. Comparing the first half of 2010 to 2011, there was a 14% increase in reported chlamydia cases (371 vs. 422); 178% increase in gonorrhea (9 vs. 25); and 2 additional cases (latent) of syphilis (5 vs. 7).

We are not fully clear on the reasons for this trend, but they are undoubtedly in part due to some combination of behavior change and outdated treatment practices. Also, while new HIV infections are holding steady at 15-20/year, there has been substantial increase in the number of persons with HIV/AIDS who have sought care in our county – 31 in the past 6 months.

In December 2010, the Centers for Disease Control and Preven-

tion (CDC) released "Sexually Transmitted Diseases Treatment Guidelines, 2010," the first national update for clinical practitioners since 2006. Included in these updated guidelines is new information regarding:

- The increasing prevalence of antimicrobial-resistant neisseria gonorrhoeae
- New treatment recommendations for bacterial vaginosis and genital warts
- The clinical efficacy of azithromycin for chlamydial infections in pregnancy
- Expanded diagnostic evaluation for cervicitis and trichomoniasis
- The sexual transmission of hepatitis C
- The emergence of azithromycin-resistant treponema pallidum

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## Join the Public Health Department on Facebook (cont.)

According to Facebook's own statistics page, approximately 250 million people log into Facebook on any given day and about 30% of its users are located in the U.S. Because of the large audience access this type of media provides, it's no wonder that all types of public services are trying to boost Face-

book support and use it to inform and engage their constituents. On Facebook, not only does the Public Health Department share news of upcoming events, but also important information about local health risks and emergencies. All this is free and no one need subscribe to a newspaper or catch the evening

news to view it.

So, if you care about health in San Luis Obispo County and have a Facebook account, log in and type "San Luis Obispo Public Health Department" into the search window at the top of the page. Next, hit the "Like" button. Then, stay tuned.

## Sexually Transmitted Diseases (cont.)

The guidelines have detailed recommendations on medication selection by disease, clinical prevention guidance, and information on special populations such as: pregnant women, adolescents, children, and persons in correctional facilities.

One of the goals of the CDC's STD Prevention Program is to increase chlamydia screening, while another is to support Expedited Partner Therapy (EPT) as a useful option to facilitate partner management. EPT is the practice of treating sex partners of persons with STDs without an intervening medical evaluation or professional counseling. Under California Health and Safety Code section 120582, physicians, nurse practitioners, physician assistants

and certified nurse midwives may dispense antibiotic therapy to partners of individuals infected with chlamydia, even if they have not been able to perform an exam of the patient's partner(s). The Public Health Department encourages clinical providers to use EPT as a tool in their practice to prevent patient re-infection and further spread of disease.

One important change in the 2010 guidelines is the recommendation for dual drug therapy for all suspected or confirmed cases of GC. This recommendation is primarily in response to rapid increase in anti-microbial-resistant strains of *N. gonorrhoeae*, but is also in recognition that many persons infected with *N. gonorrhoeae* are frequently co-infected

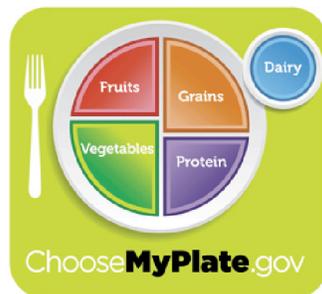
with *C. trachomatis*. If Ceftriaxone or Cefixime is used to treat a GC infection, it should be combined with azithromycin or doxycycline. Please refer to the guidelines for further information.

The full guidelines can be found at [www.cdc.gov/std/treatment/2010/clinical.htm/](http://www.cdc.gov/std/treatment/2010/clinical.htm/). In addition to the downloadable version on the CDC Web site, the CDC offers free versions for the iPad, iPhone and iPod Touch. These versions are only available through the CDC Web site, and not through iTunes or the app store.

Remember to ask about sexual behaviors and counsel all at-risk patients on the health implications of STDs. Provider attention can help reduce the spread of these non-benign infections.

## USDA Unveils New Healthy Eating Graphic

Last month, the USDA unveiled a new info-graphic called MyPlate, which aims to help Americans make better decisions about healthy eating. The graphic is part of First Lady Michelle Obama's obesity initiative and replaces the somewhat confusing MyPyramid



graphic that was released in 2005. It is a way to help all Americans combat obesity, which affects 1 in 3 kids today. MyPlate depicts sections of a dinner plate, each designating healthy portions of food including fruits, vegetables, grains, protein and dairy.

## SLO County Emergency Medical Services Agency - New Web Site

Since 1981, the San Luis Obispo County EMS Agency has been dedicated to the assurance of optimal pre-hospital care in San Luis Obispo County. Its goal is to continuously improve the quality of the emergency medical care delivery system, by coordinating the county's emergency medical services system (EMS) including ambulance companies, fire departments and hospitals.

The EMS Agency works with both the private and public sectors to bring pre-hospital EMS coverage to our county's residents and visitors. The EMS Agency also plays an active part in local medical disaster preparedness. Visit at: [www.sloemsa.org/](http://www.sloemsa.org/).

## New Postpartum Depression Support Line

As of July 1, 2011 the Postpartum Depression Support Line Voice Mail (805) 549-7786 will be closed. Alpha Pregnancy & Parenting Support will respond to the Postpartum Depression Support Line (805) 541-3367. The Postpartum Depression Support Line is made possible with funds provided by First 5 San Luis Obispo County.

### How Mothers with Hepatitis B Can Safely Breastfeed

By Genevra Pittman  
(Reuters Health)

New mothers with hepatitis B can safely breastfeed their babies, as long as they take a few important precautions, according to a new study. The hepatitis B virus causes inflammation and swelling of the liver and can lead to chronic damage to the organ. The infection is spread through blood, unclean needles, and sex. It may also pass from a mother to her baby during pregnancy and labor. It has been unclear whether breastfeeding may also transmit the virus.

A recent report in the *Archives of Pediatrics & Adolescent Medicine*, which reviewed past studies, allays those fears. Even in mothers with the virus, "breastfeeding should be recommended as a valuable source of nutrition to infants," study author, Dr. Zhongjie Shi of Temple University in Philadelphia, told Reuters Health in an e-mail. The

researchers combined data from 10 previous studies, all conducted in China, which compared rates of hepatitis B in the babies of more than 1,000 mothers with the virus. About half of those mothers breastfed their babies.

To prevent transmission of hepatitis B from the mom, babies are given a vaccine and another injected medication [immunoglobulin] soon after birth, and are vaccinated two or three more times during the first few months of life. By their first birthday, 31 babies out of the 637 with breastfeeding mothers tested positive for hepatitis B. That compared to 33 babies out of 706 who had mothers who didn't breastfeed. Most of those infants, the researchers explained, had been infected with the virus during pregnancy or childbirth.

Shi said that blood is the easiest way for hepatitis B to travel from mother to baby, followed by amniotic fluid and vaginal secretions. He added that hepatitis B is up to

100 times more infectious than HIV. Moms should avoid breastfeeding if they have cracked or bleeding nipples or lesions on their breasts, the authors note, as that could be a way to transmit the virus more easily.

According to the World Health Organization, about 350 million people worldwide are living with chronic hepatitis B infection, while as many as 2 billion have been infected. About one in four people infected with the virus as a child ultimately dies of liver cancer or liver scarring caused by the disease.

Shi concluded that while more studies on this topic are needed, the new results are most valuable in developing countries and areas with high (hepatitis B) prevalence or heavy population, such as India, China, and southeast Asia.

SOURCE: *Archives of Pediatrics & Adolescent Medicine*, online May 2, 2011

## Oral Health is an Integral Part of the Overall Health of Children

Dental caries is a common and chronic disease process with significant consequences. Despite improvements in caries prevalence for older children, dental caries for the youngest of children has not decreased over the past decade.

The pediatric patient population visits the pediatrician more often than the dentist. As a result, pediatricians and other child health professionals can have a major impact on oral health outcomes for children. Because of the opportunities provided by early intervention such as counseling families, identifying high-risk children, initiating timely dental referrals, and administration of appropriate fluoride modalities, it is critical that pediatricians be knowledgeable about dental caries, prevention of the disease, and interventions available to the pediatrician and the family.

The American Academy of Pediatrics (AAP) is dedicated to addressing the rising health concern of dental caries in the pediatric patient population and has devel-

oped the AAP Oral Health Initiative. The Oral Health Initiative provides information and training to help prepare pediatric health care professionals to engage in oral disease management within their own practices.

The initiative's Web site ([www.aap.org](http://www.aap.org)) includes features such as state listings and resource pages for practicing clinicians, professionals in training, and families. It also includes information on fluoride reimbursement, the Chapter Oral Health Advocates Project, and the Chapter Advocate Oral Health Training. A training/video page provides visitors with information about various oral health trainings, as well as video clips on knee-to-knee positioning, fluoride varnish application, oral health exams during well-child visits, and lift-the-lip examinations. In addition, individuals may subscribe to the Pediatric Oral Health Monthly E-Newsletter.

Additionally, each chapter of the AAP has an oral health advo-

cate who is responsible for collaborating with local AAP members on the Oral Health Initiative. Chapter 2 of the AAP includes seven of the ten southern California counties: Kern, Los Angeles, Riverside, San Bernardino, San Luis Obispo, Santa Barbara and Ventura. Chapter 2 Oral Health Advocate Joseph Gatan has expressed interest in coming to present information about the initiative, to learn more about how San Luis Obispo County is addressing dental caries, and how AAP can help. Visit the California Oral Health Advocate pages to learn more about the ongoing regional efforts.

If you would like more information regarding dental caries, effective strategies to prevent it, or would like to join the SLO County Children's Oral Health Coalition, please contact the Oral Health Program Manager Theresa (Tracy) Anselmo at [tanselmo@co.slo.ca.us](mailto:tanselmo@co.slo.ca.us) or 781-5503.

(Excerpted from AAP, Oral Health Initiative)

## What is Covered When Your Patient Wants to Quit Smoking

CenCal Health covers the following products that can help your patient quit smoking:

- Nicotine patches, gum or lozenges
- Zyban
- Chantix

Members must enroll in a smoking cessation program for behavior modification.

If your patient wants to quit smoking:

1. Discuss quitting options with your patient. Write them a prescrip-

tion for desired product.

2. Let them know they need to enroll in a "stop smoking" program and obtain a Certificate of Enrollment.

3. Tell patient to take both the prescription and certificate to their pharmacy to get the prescription filled.

There are two ways your patient can obtain a certificate:

1. Call the Smokers Helpline at 1-800-NO-BUTTS
2. Call the SLO Public Health De-

partment to register at 781-5564.

New six-session classes begin in:

### **San Luis Obispo**

July 25, 5:30 p.m. to 7:00 p.m.

2180 Johnson Avenue, SLO Public Health Campus Blue Room

### **Grover Beach**

July 26, 6:00 p.m. to 7:30 p.m.

286 South 16th Street, Building B

### **Paso Robles**

July 27, 5:30 p.m. to 7:00 p.m.

723 Walnut Street

## Fetal Alcohol Spectrum Disorder (FASD) Day in September

Every year on September 9, International FASD Awareness Day is observed. Proclamations are issued, bells are rung at 9:09 a.m. and people around the world gather for events to raise awareness about the dangers of drinking during pregnancy and the plight of individuals and families who struggle with Fetal Alcohol Spectrum Disorders (FASD).

The first FASD Day was celebrated on 9/9/99. This day was chosen so that on the ninth day of the ninth month of the year, the world remembers that during the nine months of pregnancy a woman should abstain from alcohol.

San Luis Obispo County will acknowledge FASD Day by displaying more than 3,000 white flags on the courthouse lawn. Each white flag represents a baby born in our county who has been exposed to substances during pregnancy since 2003. We would like to acknowledge those OB providers who screen for substance use during pregnancy, understanding the adverse health consequences alcohol and other substances can cause during pregnancy.

Alcohol is the number one choice of drug used by pregnant women in San Luis Obispo County. It is not illegal but it is a terrato-

gen and, of all the substances of abuse (including cocaine, heroin, and marijuana), alcohol produces the most serious neurobehavioral effects on the fetus. We also know that alcohol use in pregnancy and FASD is the leading known preventable cause of mental retardation and birth defects, and a leading known cause of learning disabilities in children and adults.

Please join us in recognizing FASD Day on Thursday, September 8 this year at the Veterans Hall in San Luis Obispo, from 8:30 a.m. to 10:30 a.m. Come and learn how you can make a difference for our children and families.

## Health Care Providers Can Identify Intimate Partner Violence

Intimate Partner Violence Day is organized by the Family Violence Prevention Fund and takes place on the second Wednesday in October. This nationally recognized day involves thousands of health care providers, intimate partner violence advocates and other concerned individuals who organize events in their settings to strengthen the health care response to intimate partner violence.

Intimate partner violence is a problem of epidemic proportions in this country. Nearly one third of American women (31 percent) report being physically or sexually abused by a husband or boyfriend at some time in their lives. The rates of abuse among adolescents and within lesbian/gay/bisexual/transgender communities are also staggering. Because victims of intimate partner violence interact

with the health care system when seeking routine or emergency care, health care providers are in a unique position to identify and assist victims, but only if they know how to properly screen their patients for abuse.

The immediate health consequences of domestic violence can be severe and sometimes fatal. In addition, new research also links a history of victimization to long term chronic and behavioral health risks. Healthy People 2010, a prevention agenda for the nation developed by the U.S. Department of Health and Human Services' Office of Disease Prevention and Health Promotion, identifies ten leading health indicators to measure the health and well-being of Americans. Eight out of ten of these, including access to health care, responsible sexual behavior

and substance abuse, have been directly correlated with intimate partner violence. Intimate partner violence is a health care issue, and routine screening for abuse can be a life-saving intervention.

If you would like to view a DVD for medical offices called "Screen to End Abuse," call the Maternal Child and Adolescent Health Division of Public Health at 781-5107 or e-mail [mmcdermott@co.slo.ca.us](mailto:mmcdermott@co.slo.ca.us). This DVD is approximately 32 minutes long and is provided by: [www.futureswithoutviolence.org](http://www.futureswithoutviolence.org) (formerly [endabuse.org](http://endabuse.org)).

### Save the Date

Intimate Partner Violence Forum  
October 13, 2011  
8:30 a.m. to 12:30 p.m.  
San Luis Obispo Veterans Hall

**San Luis Obispo County Reported Cases of Selected Communicable Diseases - Summer 2011**

Disease	2nd Quarter	Total	2nd Quarter	Total
	2010	2010	2011	2011
<b>AIDS/HIV</b>	<b>Not available</b>	<b>3/19</b>	<b>1/2</b>	<b>2/6</b>
Campylobacteriosis	3	98	19	40
<b>Chlamydial Infections</b>	<b>29</b>	<b>694</b>	<b>219</b>	<b>440</b>
Coccidioidomycosis	177	102	64	85
<b>Cryptosporidiosis</b>	<b>16</b>	<b>24</b>	<b>3</b>	<b>5</b>
E. Coli	10	13	1	3
<b>Giardiasis</b>	<b>1</b>	<b>9</b>	<b>2</b>	<b>8</b>
Gonorrhea	0	28	9	26
<b>Hepatitis A</b>	<b>1</b>	<b>1</b>	<b>3</b>	<b>3</b>
Hepatitis B (Chronic)	13	36	12	30
<b>Hepatitis C (Community)</b>	<b>60</b>	<b>274</b>	<b>82</b>	<b>204</b>
Hepatitis C (Correctional)	83	582	149	269
<b>Lyme Disease</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Measles (Rubeola)	0	0	1	1
<b>Meningitis (Bacterial)</b>	<b>1</b>	<b>4</b>	<b>1</b>	<b>1</b>
Meningitis (Viral)	8	35	4	12
<b>MRSA</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>2</b>
Pertussis	188	382	2	12
<b>Rubella</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Salmonellosis	0	35	5	6
<b>Shigellosis</b>	<b>2</b>	<b>5</b>	<b>0</b>	<b>0</b>
Syphilis (Primary/Secondary)	0	0	0	0
<b>Tuberculosis</b>	<b>1</b>	<b>4</b>	<b>1</b>	<b>3</b>

Case counts reflect those reported diseases that meet case definitions as established by the California Department of Public Health. Cases reported by health care providers that do not meet the case definitions are not included in case counts. All cases are for San Luis Obispo County residents only. Persons who do not list San Luis Obispo County as their primary residence and are reported as having a communicable disease are reported in their primary county of residence.



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