

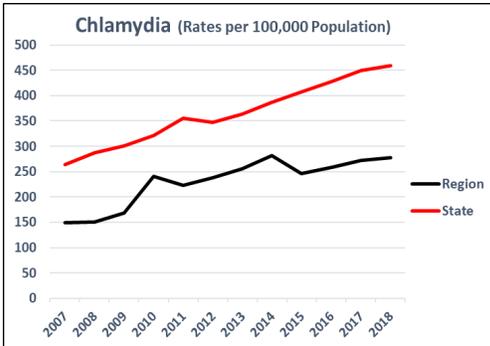


**Douglas**  
Public Health Network

**Coos Health & Wellness**  
Together, Inspiring Healthier Communities  
**Public Health Division**

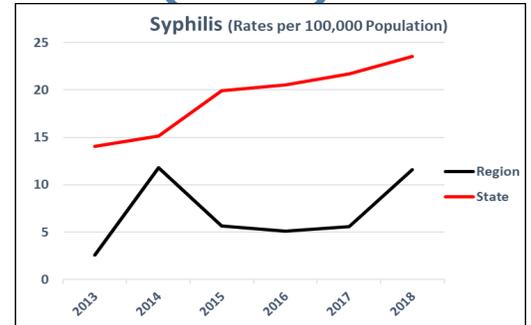
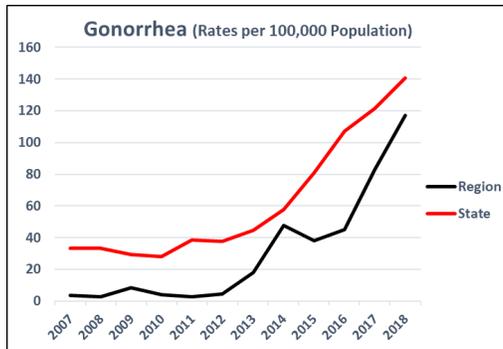


## SEXUALLY TRANSMITTED INFECTIONS (STIs)



The incidence for Chlamydia has been high for years and continues to steadily increase. Chlamydia is often referred to as the “silent infection” as most infected people are asymptomatic.

The region has experienced a sharp increase in Gonorrhea cases over the past 5 years. Left untreated Gonorrhea can result in serious complications. Unfortunately, like Chlamydia, untreated Gonorrhea is not uncommon.



Especially concerning for the region is a recent increase in Syphilis cases. From 2007 to 2013, there were only 11 reported cases. In 2018 alone there were 23 cases, including one congenital case in Douglas County in 2018. As of April 1 of this year, the region has already documented 6 cases.

As a region, HIV counts prior to 2018 are too low to report for confidentiality reasons and rates would be unreliable. However, there were 11 cases in 2018—8 of which were in Coos County.

### What does **PUBLIC HEALTH** do?

Trained Communicable Disease staff at your local health authority (LHA) investigate confirmed and suspect cases to:

- Ensure proper treatment of all reported cases
- Conduct confidential interviews with cases to gather information regarding risk behaviors and contact info for all potentially exposed partners.
- Notify partners of potential exposure and encourage testing and treatment if necessary.
- Educate cases/partners on the importance of STI screening and treatment and various options for preventing STIs in the future.

**\*In 2018, regionwide, 334 contacts were identified via LHA investigation with 113 subsequently successfully treated. (Untreated contacts either refused treatment, were unable to be reached, were not preventatively treated and tested negative, or were already treated at time of notifications.)\***

### What can **YOU** do?

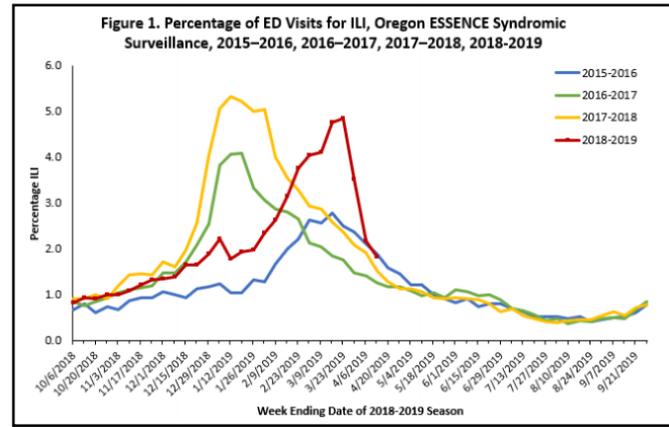
- Presumptively treat suspect cases, including case partners if present. DO NOT wait for lab results to if you suspect a patient may have an STI.
- Report all confirmed AND suspect cases to local public health, especially if treated. Only positive labs are reported to public health. Suspect cases are reportable but can go unreported/uninvestigated without provider reporting if labs are inconclusive or negative.
- Offer STI screening for your patients during well-visits, if available from your practice, regardless of whether the patient specifically requests it.
- Offer extragenital STI screening, if available from your practice, for patients who have oral and/or anal sex.
- Encourage safe sex practices and educate patients about preventing STIs/unwanted pregnancies .

**\*If you have any questions regarding STIs including recommended treatment guidelines or where to refer patients for testing and/or treatment, please contact your LHA. Your LHA may also be able to provide context and clarity for positive Syphilis labs.\***

# DISEASE SPOTLIGHT: INFLUENZA

The number of influenza cases has decreased significantly in recent weeks. However, influenza remained at moderate to high levels and widespread across much of the country heading into April; and Oregon was no exception. While the lengthy season nationwide was due largely in part to a shift from H1N1 to H3N2, for which this year's vaccine was less effective, this trend was not as evident in Oregon. The predominant strain in Oregon continued to be H1N1. (This year is the red line on the graph to the right.)

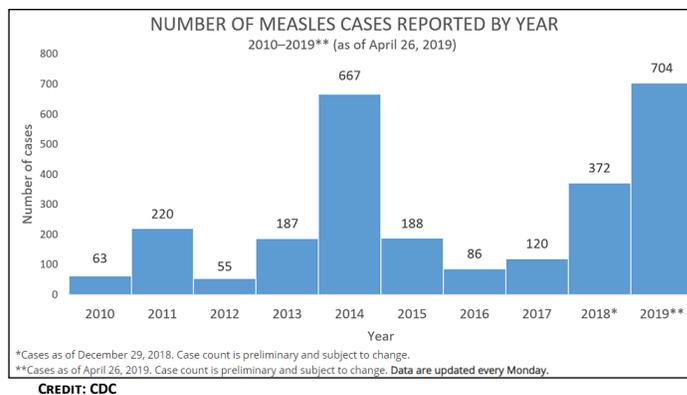
**-The best way to prevent the flu is vaccination. It is never too late to vaccinate, and most pharmacies will still have vaccine in stock late into the season. Please encourage your unvaccinated patients to get the vaccine.**



## \*MEASLES UPDATE\*

This year is the worst year for measles in the United States since the disease was declared eliminated in 2000. (See graph below.) Already there are more cases reported in 2019 than have been more than 700 cases of measles reported nationwide. After six weeks with no new cases, Clark County, WA has declared their measles outbreak over. The final case total is 71 confirmed cases. Of these cases, 61 were unimmunized. Fifty-two were 10 years old or younger. One person was hospitalized. This outbreak was also linked to 1 case in King County, WA and 4 in Multnomah County, OR.

In Oregon, five additional cases, not linked to outbreaks, have also been reported in Multnomah (2), Marion (2), Clackamas (1), and Columbia (1) counties.



Measles is an EXTREMELY contagious, serious disease currently roaring back in the United States in levels not seen in decades. There are currently 6 states with ongoing outbreaks: New York (Rockland County (over 200 cases) and New York City (over 400 cases)), New Jersey (two outbreaks, one linked to the NY outbreaks), California (Butte, LA, and Sacramento Counties), Michigan, Georgia, and Maryland.

**\*Please encourage all patients born after 1956, with no evidence of immunity, to get vaccinated.\***

**\*If you have a patient with suspected measles, please contact your local health department IMMEDIATELY. DO NOT wait for lab results.\***

**\* DO NOT evaluate/treat suspect cases come in your office if possible. See them at home or from the parking lot.\***

### WHO YA GONNA CALL?



#### DOUGLAS:

Phone: (541) 677-5814  
Fax: (541) 464-3914  
After Hours: (541) 440-4471

#### COOS:

Phone: (541) 266-6700  
Fax: (541) 888-8726  
After Hours: (541) 435-4525

#### CURRY:

Phone: (541) 813-2535, ext. 3441  
Fax: (541) 813-2536  
After Hours: (541) 396-2106