

**Skokie Board of Health
October 13th, 2016**

Present

Dr. Drachler
Ms. Nickisch Duggan
Mr. Nidetz
Dr. Sood
Ms. Jones Thorne
Dr. Topouzian

Ms. Urbanus
Dr. Usman
Ms. Varma
Dr. Vernon
Dr. Werner
Dr. Williams

Excused

Mr. Abbasi
Dr. Dave
Dr. Polin
Dr. Shim

Absent

Dr. Gaynes
Mr. Pandya
Dr. Prince

Dr. Catherine A. Counard, Director of Health
Bruce A. Jones, Staff
Guest, Guillermo Adao
Guest, Iryna Karetska

1. **Call to Order:** The meeting was called to order at 7:01 p.m. by Dr. Drachler, Chairman.
2. **Approval of Minutes:** The minutes of the previous meeting were approved.

3. Presentation

Becky Smith, MD – Zika Virus Update

**Hospital Epidemiologist Head, Division of Infectious Diseases NorthShore University Health System
(A copy of the presentation is attached)**

Dr. Smith covered in great detail the Epidemiology, Transmission, Clinical Manifestations, Diagnosis, Treatment, Prevention, Challenges in this Epidemic and Anticipating Future Spread of Zika.

Family: *flaviviridae* Genus: *flavivirus* Hosts: non-human primates, **humans**.

Mosquito Vectors: *Aedes aegypti* (principle vector); *Aedes albopictus* (Asian tiger mosquito).

Most recent of 4 arboviral diseases in the Western Hemisphere in the last 20 years: Dengue, West Nile Virus, Chikungunya.

US Cases

Locally Acquired: 105 (all in Florida)

Travel Associated: 3,712

Lab Acquired: 1

Sexually transmitted: 30

Guillain-Barre syndrome: 13

US Territories

Locally Acquired: 24,118 (23,665 from Puerto Rico)

Travel Associated: 83

Guillain-Barre syndrome: 39

Pregnant Women with Any Lab Evidence of Zika Virus Infection

US States and DC: 837

US Territories: 1,638

Treatment is supportive care – fluids, antipyretics

Transmission Mosquito bites, Maternal-Fetal, Sexual, Blood transfusion/organ transplantation, Zika virus RNA has been detected in Blood, Urine, Semen, Saliva, CSF, Amniotic fluid, Breast Milk, and Organs/tissues.

Clinical Presentation - Adults

20-25% of infected individuals will have symptoms within 2-14 days of exposure.

Common symptoms: Fever (37.8-38.5 C), Maculopapular rash, Arthralgia (small joints of hands and feet), Conjunctivitis (non-purulent), Myalgia, Headache, and Retro-orbital pain.

Illness lasts from a few days to 1 week and rarely do people require hospitalization or die from Zika.

Neurological complications: Guillain Barre Syndrome (AIDP), Meningitis, Meningoencephalitis and Myelitis.

Clinical Presentation - Children

Intrauterine (congenital) infection: Vertical transmission during pregnancy.

Intrapartum infection/perinatal transmission: Vertical transmission during delivery.

Postnatal infection/children: Transmission via mosquito bites

Intrauterine Infection – causes birth defects

Microcephaly

Arthrogryposis

Ocular abnormalities

Hearing difficulties

Early and late miscarriages

Infection can be clinically relevant at all stages of pregnancy and result in deleterious outcomes

Breast Feeding

Zika virus RNA has been identified in breast milk, but attempts to culture the virus have been unsuccessful.

No cases of Zika virus infection associated with breastfeeding have been reported.

CDC encourages mothers with Zika virus infection and living in areas with ongoing Zika virus transmission to breastfeed their infant based on risk benefit ratio.

Effect on Future Pregnancies

No evidence that maternal infection has impact on future pregnancies (viremia lasts 7 days).

Sexual Transmission

Pregnant women whose male partners have known Zika virus infection or are at risk for Zika virus infection (based on travel history) should use **condoms** for all types of encounters (vaginal, oral, anal) or abstain from sexual intercourse **for the remainder of the pregnancy.**

Detection of Zika in Semen

Zika virus RNA was detected in semen of five men more than 90 days after symptom onset, with the longest period of reported detection 188 days after symptom onset.

Women with symptomatic Zika virus disease and asymptomatic women with possible Zika virus exposure should wait until **8 weeks** after symptom onset before attempting conception.

Men who have a diagnosis of Zika virus disease should wait at least **6 months** after symptom onset before attempting conception.

Men without symptoms but with possible Zika exposure should wait at least **6 months** before attempting conception.

Prevention

Mosquito control

Disrupt life cycle' Remove containers that can hold standing water, Genetically modified/infected mosquitos
WHO OX513A (Oxitec) genetically modified males released in environment, larvae die early, used in
Dengue Wolbachia-infected mosquitos and repellent/physical barriers.

Vaccine

No approved vaccine currently

Many candidate vaccines using variety of approaches are in the process of being developed.

Antibody dependent enhancement:

Antigen-specific antibodies bind the virus and target the immune complex Fc-receptor expressive cells
leading to enhanced infectivity of the virus.

This could occur due to the cross-reactivity with other flaviviruses.

Human dengue virus antibodies enhance invitro infection with Zika virus.

Challenges in the Zika Outbreak

Densely crowded populations/urban areas

Immunologically naïve populations

Mosquito vector has adapted to urban living

International travel facilitates spread (we live in a global community)

Infected individuals can be bitten by local mosquitos when they arrive home, spreading infection to others

Conclusive evidence to support link between Zika virus infection and congenital CNS malformations

Multiple updates and constantly changing information

Vulnerable patient population (pregnant women, fetuses)

Unanswered Questions

What is the frequency of adverse pregnancy and pediatric outcomes?

What is the spectrum of adverse outcomes?

Does timing of infection during pregnancy or severity of maternal infection correlate with the occurrence of
adverse outcomes?

Are other co-factors involved?

How long does Zika remain infectious in semen?

Discussion after the presentation:

Dr. Counard asked whether neonate testing was being done. Dr. Smith said yes they are testing for possible
effects from the Zika virus infection using an algorithm.

Dr. Drachler asked about the cost associated with this program. Dr. Smith said that the focus of our limited
resources should be on pregnant women, women considering becoming pregnant, and their partners. Too
many other people are being tested and all of the available funds are being consumed. Dr. Drachler agreed
there is little risk to the healthy adult population.

Dr. Drachler asked about keeping up with all the rules and the changes in protocol on a day-to-day basis.
Dr. Smith explained she constantly checks updates from CDC to stay current on the issue.

Dr. Williams commented he gets updates from the "HAN" network about Zika as well as other disease
updates. Dr. Smith said she does get updates from the "HAN" and "SIREN" networks.

Dr. Williams wondered if more money should be directed towards educational materials, to decrease the
amount of testing being done.

Dr. Drachler added that there are still so many unknowns with the virus and the outcomes that people want to know everything is being done to assure a healthy pregnancy and thus his question about the cost involved.

Dr. Werner asked about any recommendations or travel advisories for very young children. Dr. Smith replied there were no specific travel advisories for children but she agreed this could be an area of concern.

Dr. Drachler asked if Zika has been found in Hawaii. Dr. Smith said the virus has not yet been documented in Hawaii.

The Board thanked Dr. Smith for her timely, thorough review.

4. Chair's Report:

Dr. Drachler reminded the group that he would like our new member, Dr. Shim, to give a brief personal/professional overview. Unfortunately Dr. Shim was unable to attend tonight's meeting, so that will be for a future date.

Dr. Counard introduced the public health interns that were present: Nursing Student Guillermo Adao and Dr. Iryna Karetska. Both spoke briefly about their experience with the Skokie Health Department.

Dr. Drachler commented on the FY2016 Skokie Annual Report that had been distributed, and the great work the Department and Board has completed over this past year.

5. Director's Report:

September Monthly Report highlights – a copy is attached:

All FY16 State and Federal grant funds received!

We have now received all FY16 State and Federal grant funds, for a total of \$221,689. This amount closely matches the projected amount of \$222,800 submitted with the Health Dept. FY16 budget proposal.

Meeting with Dr. Lee Francis, CEO of Erie Family Health Center

Following up on our concerns regarding the Erie Evanston/Skokie clinic being closed to new adult patients, the John Lockerby, Dr. Counard and Nurse Reisberg met with Dr. Lee Francis and Ms. Amy Valukas from Erie. According to Dr. Francis, Erie has put in an offer to rent the remaining available space at the Evanston/Skokie site, which would double the capacity of the clinic (currently at 7,800 patients). The expansion is expected to be accomplished within the next year.

Customer Satisfaction Surveys give positive reviews!

All told we received 237 Customer Satisfaction Surveys for the Personal Health, Animal Control, Rodent Control and Food Safety programs. The surveys were offered over a six month period to all individuals and food service facilities that had interactions with Health Department staff. The results were overwhelmingly positive! Great job team!

First Community flu shot clinic held 9/28/16

Nearly 700 Skokie residents received flu shots during the first community flu shot clinic. We would not be able to provide this service without the assistance of the Medical Reserve Corps and many other volunteers. Three additional clinics are scheduled during October.

Pat Urbanus commented that the new community flu shot clinic arrangement is far more efficient. Dr. Counard thanked her for assisting during the clinic and agreed that the new format allows the Department to serve a larger number of residents quickly.

6. Old/New Business

Pat Urbanus asked about the topic of changing stations and breast feeding locations. Dr. Counard will follow up with the Managers office staff person assigned to address this issue.

Dr. Williams mentioned he heard yesterday that Highland Park just approved "Tobacco 21" and that he also mentioned again to Mayor Van Dusen the possibility of increasing the age in Skokie. Dr. Counard added that Mayor Van Dusen is committed to addressing this issue in the coming year.

Dr. Counard reminded the Board that we are focusing on the health needs of the South Asian community as part of the 2017 IPLAN State re-certification process. She said she would like to interview Board members from the South Asian community, and would contact everyone to set up a time.

Pat Urbanus asked about the status of the MGP Plant on Oakton Street. Dr. Counard explained that the Metropolitan Water Reclamation District of Greater Chicago (MWRDGC) plans to now build a phosphate removal plant on that site and the Park District will not be able to move forward. Dr. Counard reminded the group that many drinking water pipes in the Village and neighboring communities are made from lead, and the phosphate coats the inside of the pipes to keep the lead out of the water. The phosphate must be removed prior to sending the treated waste water into the Mississippi.

Dr. Williams commented that he received an e-mail that the Asian Human Services Dental Clinic in Skokie will be opening soon. Dr. Counard said that she would be interested in attending the grand opening.

Dr. Drachler reminded the Board that our next meeting will be on Thursday, November 10, 2016 at 7:00 p.m. in Skokie Village Hall "1st Floor Conference Room A". David Clough, MPA, Public Health Analyst, will present on Skokie Mortality Data & Aggregate Hospital Admission Data for Skokie Residents

Dr. Drachler asked if the Skokie elections are taking place this November. Mr. Jones explained that Skokie elections are typically held in the spring and there should be a Skokie election in early 2017.

Adjournment The meeting adjourned at 8:13 p.m.