



## MONTHLY MORBIDITY REPORT

PUBLIC HEALTH STATISTICS and  
DIVISION OF DISEASE CONTROL

DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
OFFICE OF PREVENTIVE AND PUBLIC HEALTH SERVICES  
P.O. BOX 60630, NEW ORLEANS, LOUISIANA 70160

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## HAEMOPHILUS INFLUENZAE VACCINE

A polysaccharide vaccine was licensed on April 12, 1985 for the prevention of Haemophilus influenzae type b disease. Haemophilus influenzae type b is the most common cause of bacterial meningitis in the United States. Louisiana has reported 161 cases from 1983 to mid-1985. Of these, only 34 (21%) were individuals 2 years of age or older. The ACIP recommendations are complex because the need for the vaccine and its efficacy vary with age. The Louisiana Immunization Advisory Committee recently met and

developed the following recommendations which are similar but not identical to the ACIP recommendations. Louisiana physicians will have to exercise some individual judgment in deciding to whom the vaccine should be given because there are not sufficient data to support universal policies. The use of Haemophilus influenzae b vaccine does not alter the present recommendations utilized for prophylactic treatment for contacts of Hib meningitis cases.

Louisiana Office of Preventive and Public Health Services  
Recommendations for Haemophilus influenzae Vaccine

1. Immunization of all children at 24 months of age is recommended.
2. Immunization of children at 18 months of age, particularly those in known high-risk groups, may be considered.

Children who attend day-care facilities are at particular risk of acquiring systemic Hib disease. Initial vaccination at 18 months of age for this high-risk group should be considered. Re-immunization at a later date may also have to be considered.

Children with chronic conditions known to be associated with increased risk for Hib disease should receive the vaccine, although only limited data on immunogenicity and clinical efficacy in this group are available. These conditions include anatomic or functional asplenia, such as sickle cell disease or splenectomy, and malignancies associated with immunosuppression.

3. Vaccine is not recommended for children under 18 months of age.

Recommendations for Haemophilus influenzae Vaccine (continued)

4. Immunization of individuals over 24 months of age who have not yet received Hib vaccine should be based on risk of disease. The risk of invasive Hib disease decreases with increasing age over the age of 2 years. Because the vaccine is safe and effective, however, physicians may wish to immunize previously unvaccinated healthy children from 2 years through 5 years of age to prevent the Hib disease that does occur in this age group. The potential benefit of this strategy in terms of cases prevented declines with increasing age of the child at the time of vaccination.
5. Simultaneous administration of Hib and DTP vaccines at separate sites can be performed because no impairment of the immune response to the individual antigens occurs under these circumstances.

The use of Haemophilus influenzae type b polysaccharide vaccine in accordance with the Louisiana Immunization Advisory Committee is endorsed and encouraged by the Department of Health and Human Resources, Office of Preventive and Public Health Services. However, due to the lack

of federal funds to provide vaccine to those who cannot afford it and the present financial posture of the state, the health department cannot provide a vaccine supply or initiate a statewide immunization effort at this time.

**BULLETIN**

In order to accurately assess a cost benefit analysis for a possible future Haemophilus influenzae immunization program, it is imperative that complete statistics are obtained on the actual number of Haemophilus influenzae meningitis cases occurring in our state. Physicians are urged to notify the health department of any cases they identify.

## INFLUENZA IMMUNIZATION PROGRAM 1985 - 1986

Health Department Clinics will provide influenza immunization again this year to individuals who are at high risk of serious illness or death from influenza infection. Vaccine will be available starting September 16, 1985 and will be offered to individuals 65 years of age and older and to all persons with chronic disorders of the cardiovascular, pulmonary and/or renal systems, metabolic disorders, severe anemia and/or compromised immune function.

Influenza strains anticipated to be prevalent in 1985-1986 will be closely related to A/Philippines/2/82 (H3N2), A/Chile/1/83 (H1N1) and B/USSR/100/83. These are the strains included in the vaccine this year. Although the components of the vaccine are identical to those in last year's vaccine, any remaining supplies have expired and should not be used.

Because of budget restrictions Health Department vaccine will be limited to the above broadly defined high risk groups; however, the United States Public Health Service Immunization Practices Advisory Committee (ACIP) has further classified these groups on the basis of priority and has added additional categories. Highest priority is given to adults and children with chronic disorders of the cardiovascular and pulmonary systems that are severe enough to have required regular medical follow-up or hospitalization during the preceding year, and to residents of nursing homes and other chronic care facilities (e.g. institutions having patients of any age with chronic medical conditions).

Because of the potential for introducing influenza to high risk groups such as patients with severely compromised cardiopulmonary or immune systems or infants in neonatal intensive care units,

physicians, nurses and other personnel who have extensive contact with such patients should be vaccinated annually. The Health Department does not have vaccine supplies sufficient to immunize this group of otherwise healthy individuals. Health care institutions are encouraged to develop their own immunization programs.

After considering the needs for the above target groups, the ACIP gives the next priority to persons at moderately increased risk of serious illness compared with the general population. This includes otherwise healthy individuals over 65 years of age and adults and children with chronic metabolic diseases (including diabetes mellitus), renal dysfunction, anemia, immunosuppression, or asthma that are severe enough to have required regular medical follow-up or hospitalization during the preceding year.

Physicians are encouraged to administer vaccine to any person who wishes to reduce their chances of acquiring influenza infection. Also, vaccination programs for persons who provide essential community services are recommended.

Only one 0.5 ml dose of whole or split virus is required for persons over 12 years of age. Children 6 months to 12 years of age who have not received influenza vaccine from 1978 to 1985 should receive two doses of split virus vaccine. If vaccine has been administered during these years one dose is sufficient. The dosage of split virus vaccine for children is 0.25 ml for those 6 to 35 months of age and 0.5 ml for those 3 to 12 years of age.

Questions concerning the influenza immunization program may be directed to the respective parish health units or to the Division of Disease Control at (504) 568-5005.

## SELECTED REPORTABLE DISEASES (By Place of Residence)

STATE AND PARISH TOTALS	VACCINE PREVENTABLE DISEASES					ASEPTIC MENINGITIS	HEPATITIS A AND UNSPECIFIED**	HEPATITIS B	LEGIONELLOSIS	MALARIA***	MENINGOCOCCAL INFECTIONS	SHIGELLOSIS	TUBERCULOSIS, PULMONARY	TYPHOID FEVER	OTHER SALMONELLOSIS	UNDERNUTRITION SEVERE	GONORRHEA	SYPHILIS, PRIMARY AND SECONDARY	RABIES IN ANIMALS (PARISH TOTALS CUMULATIVE, 1984 )
	MEASLES	RUBELLA*	MUMPS	PERTUSSIS	TETANUS														
TOTAL TO DATE 1984	0	0	0	3	1	11	126	124	0	4	35	17	114	1	41	6	10246	512	19
TOTAL TO DATE 1985	10	0	2	5	0	18	64	81	1	0	17	12	132	0	52	3	9673	448	8
TOTAL THIS MONTH	9	0	0	3	0	3	19	24	1	0	4	2	26	0	16	1	2161	92	4
ACADIA								2							3		12		
ALLEN												1					7	1	
ASCENSION								1									4		
ASSUMPTION																	14	1	
AVOUELLES																	3		3
BEAUREGARD																	5		
BIENVILLE																	11		
BOSSIER																	12		
CADDO							2					7					251	7	
CALCASIEU																	99	5	
CALDWELL							1										1		
CAMERON																			
CATAHOULA																	5		
CLATBORNE																	2		
CONCORDIA										1		1					11		
DESOUD																	1		1
EAST BATON ROUGE	1										2				3		137	10	
EAST CAPROLL																	9		
EAST FELICIANA																	3		
EVANGELINE																	3		1
FRANFLIN												1					17	1	
GRANT																	1		
IBERIA							1	1									28	1	
IBERVILLE																	2	3	
JACKSON																	8		
JEFFERSON						1	1	3				1					127	4	
JEFFERSON DAVIS																	7		
LAFAYETTE								4				1			4		76	2	
LAFOURCHE							1					1			1		25		
LASALLE																			
LINCOLN							1										23		
LIVINGSTON															1				
MADISON																			
MOREHOUSE												2					47		
NATCHITOCHE																	5	3	
ORLEANS							5	5				3					702	33	
OUACHITA												1					109	3	1
PLAQUEMINES				3														1	
POINTE COUPEE																	4		
RAPIDES																	119	2	2
RED RIVER																			
RICHLAND																1	9	1	
SABINE																		1	
ST. BERNARD								3				1					3		
ST. CHARLES							1					1					5	1	
ST. HELENA																	1		
ST. JAMES																	11		
ST. JOHN								1									3	1	
ST. LANDRY											1	2					17	2	
ST. MARTIN							1										6		
ST. MARY								1				1					4	1	
ST. TAMMANY	6					2											24	2	
TANGIPAHODA							1	1	1								9	1	
TENSAS															1		9		
TERREBONNE							1				2				2		65		
UNION																	10	3	
VERMILION							1	1				1			1		7		
VERNON																	44	2	
WASHINGTON	2							1											
WEBSTER							1	1									12		
WEST BATON ROUGE																	2		
WEST CAPROLL																	4		
WEST FELICIANA												1					17		
WINN																	2		
OUT OF STATE																	6		

\* Includes Rubella, Congenital Syndrome.

\*\* Includes 8 cases of Hepatitis Mon A, and Mon B.

\*\*\* Acquired outside United States unless otherwise stated.

From January 1, 1985 - May 30, 1985 the following cases were also reported:  
1-Brucellosis; 1-Coccidioidomycosis; 2-Reye Syndrome.

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