

PUBLIC HEALTH Notes

Working with you to protect and promote health and prevent disease



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Jan. - June 2007 to
Jan. - June 2008

NEW RECOMMENDATIONS: RABIES POST-EXPOSURE PROPHYLAXIS TO BAT EXPOSURES

On the advice of the Ontario Provincial Infectious Diseases Advisory Committee (PIDAC), the Ontario Ministry of Health and Long-Term Care has adopted new recommendations for rabies Post-Exposure Prophylaxis (PEP) administration. These recommendations follow recent research demonstrating an extremely low risk of acquiring rabies after non-contact bat exposure.

Rabies PEP is no longer indicated when people are sleeping unattended in a room where a bat was found, or when a bat is discovered in close proximity to a young child or to an individual who is cognitively impaired.

PEP is only indicated when a bat bite or scratch has occurred OR when there is direct contact with a bat (i.e. the bat was observed to touch or land on the person) AND either of the following cannot be eliminated:

- a bat bite or scratch, or
- saliva from a live bat entered an open wound or mucous membranes

An exception to administering PEP would be if the bat lands on the clothing of a person who can be sure that a bite or scratch did not occur and that the bat saliva did not contact an open wound or mucous membrane.

It is imperative to immediately wash and flush the wound/contacted body part with soap and water. This is probably the most effective procedure in the prevention of rabies. Avoid suturing the wound, if possible. Tetanus prophylaxis and antibacterial drugs should be given as required.

If there has been an exposure, as defined above, extreme care should be taken to ensure that there is no further exposure to the bat if it is captured or handled. If the bat is captured, it should be submitted for rabies testing. If there has been no exposure requiring PEP as defined above, the bat should not be captured for testing, thereby reducing risk of direct contact and further exposure.

Unless exposure from the bat is to the head or neck region, PEP can be delayed for up to 48 hours until the rabies test result on the bat is obtained. If PEP was initiated, it can be discontinued if the bat tests negative for rabies.

Note that spelunker exposure requires special consideration.

The above replace any previous recommendations in Ontario with regard to bat exposures.

Reference

Ministry of Health and Long-Term Care. (August 8, 2008). *Recommendations for Rabies Post-Exposure Prophylaxis with Respect to Bat Exposures.*

ALCOHOL USE IN PREGNANCY: PREVENTING FASD

Prenatal exposure to alcohol is a leading cause of preventable birth defects and developmental delays in Canadian children. Over half of pregnancies are unplanned; many women use alcohol before they realize they are pregnant, when the fetus is most susceptible to the negative effects of alcohol on brain development. Alcohol avoidance in the very early prenatal period and throughout pregnancy is the only effective strategy to prevent Fetal Alcohol Spectrum Disorder (FASD).

Women concerned about their drinking should be encouraged to use the confidential line of the *Motherisk Program* at 1-877-327-4636. This program provides women with information and counselling about their alcohol consumption.

Health care professionals should routinely ask all women about their drinking behaviours prior to and during pregnancy. Go to MDCme.ca for the online course, *Fetal Alcohol Spectrum Disorder: Preventing and Addressing Alcohol Use in Pregnancy*.

Recommended prevention strategies include the following:

1. ASK about the frequency of alcohol use and the quantity consumed. *T-ACE* is a useful tool in assessing alcohol use. Contact Public Health for copies of the tool.
2. ADVISE women to stop drinking alcohol if they are at risk of pregnancy due to inconsistent or lack of birth control use, if they are planning a pregnancy, or if they are currently pregnant.
3. ASSIST women through provision of information about the risks of alcohol to the fetus. Women who use alcohol need to know that reliable birth control is necessary, and that they should prevent pregnancy until alcohol use is stopped. Women concerned about the ability to make a change in their alcohol use will require linkage to alcohol treatment services.

Public Health is launching a media campaign, *Get the facts about alcohol and pregnancy*, targeting men and women in their reproductive years. Please display copies of the enclosed poster in waiting rooms, clinic rooms and bathrooms.

Reference

Public Health Agency of Canada. (September 9, 2009). Retrieved from <http://www.phac-aspc.gc.ca/publicat/fasd-fw-etcaf-ca/framework-eng.php>

PRECONCEPTION / EARLY PRENATAL CLASSES: *HEALTHY START – STEP ONE*

To reach pregnant women earlier and to have a more positive influence on their pregnancy outcomes, Public Health is offering preconception / early prenatal classes beginning this fall. Classes will target those who are planning a pregnancy or who are fewer than 18 weeks pregnant.

Health care providers should encourage their patients to contact Public Health following pregnancy planning consultation or upon confirmation of conception. *Healthy Start – Step One* classes are in addition to the regular workshops and series that have traditionally been offered later in pregnancy.

Topics such as fetal development, physiological changes, healthy living, breast-feeding and healthy relationships will be covered during two evening sessions. See enclosed poster promoting the new classes. For more information, contact Public Health at 519-376-9420.

ALCOHOL AND BINGE DRINKING

The Canadian Community Health Survey (CCHS) is a biennial report containing many health indicators including chronic diseases, healthy behaviours, smoking and alcohol consumption. The Grey Bruce Health Unit recently released a report based on the CCHS concerning alcohol consumption and binge drinking.

Highlights:

- Among current drinkers aged 12 and older, 22% in Canada, 21% in Ontario, and 34% in Grey Bruce reported having five or more drinks on one occasion at least once a month in the past year.
- Among males who are current drinkers, 30% in Canada, 29% in Ontario and 45% in Grey Bruce reported having at least five or more drinks on one occasion at least once a month in the past year.
- Among females who are current drinkers, 13% in Canada, 12% in Ontario and 21% in Grey Bruce reported having at least five or more drinks on one occasion at least once a month in the past year.

Overall rates of binge drinking among current drinkers in Grey Bruce have been increasing over the past six years: 18%, 20%, 25% and 34% in 2001, 2003, 2005, and 2007, respectively.

Binge drinking rates in Grey Bruce are significantly higher than Canada, Ontario and other similar regions. The Health Unit reminds you to use the *CAGE + 2 + Y Health Professionals' Screening Tool for Alcohol Use*, and to counsel patients regarding the consequences of their alcohol consumption. Information about the screening tool, low-risk drinking guidelines and programs and services offered by the Health Unit are available on our website and upon request.

Reference

Myatt, M., & Leffley, A. (July 2008). *Alcohol consumption and binge drinking in Grey-Bruce counties: A report from the Canadian Community Health Survey*.

NEW DVD: TUBERCULIN SKIN TESTING

The Mantoux tuberculin skin test is the standard screening method to identify persons infected with *Mycobacterium tuberculosis* (TB). It is essential that TB skin tests be administered and read correctly.

To assist healthcare workers who perform TB skin tests, the Health Unit has developed a 6-minute educational video. This DVD is available upon request and is accessible on our website at: www.publichealthgreybruce.on.ca/Communicable.

Positive TB skin tests and cases of suspect or active TB must be reported to Public Health. If you have questions about TB screening protocol, contact a Public Health Nurse in the Communicable Diseases Program.

The *Canadian Tuberculosis Standards* 6th edition (2007) is available online through the Public Health Agency of Canada website or at a regional Lung Association office.

TB is preventable, treatable and curable. Public Health value your partnership with us in TB control.

Reference

Public Health Agency of Canada. (2007). *Canadian Tuberculosis Standards* (6th ed.). Retrieved online at www.phac-aspc.gc.ca/tbpc-latb/pubs/pdf/tbstand07_e.pdf

FREE HPV VACCINE DEADLINE EXTENDED

The Ontario Ministry of Health and Long Term Care recently announced that the eligibility period for the publicly funded human papillomavirus (HPV) vaccine has been extended. Previously, girls had to get all three doses within the grade 8 school year. Girls who received at least one dose of HPV vaccine in grade 8 may now complete the three-dose series free during their grade 9 year. Those who have yet to get their first dose can do so by September 1, 2008 and still complete the publicly funded vaccine series during their grade nine year until September 2, 2009.

The publicly funded HPV vaccination program in Ontario will continue to be offered and delivered to all grade 8 girls throughout the 2008/09 school year. This is a voluntary, school-based vaccination program organized by Public Health. Eligible females who are unable to take part in grade 8 school-based clinics, or who have started and need to complete their series in grade 9, may receive HPV vaccine at high school based clinics delivered by Public Health or through Public Health community clinics in Owen Sound, Walkerton or The Plex in Port Elgin.

Reference

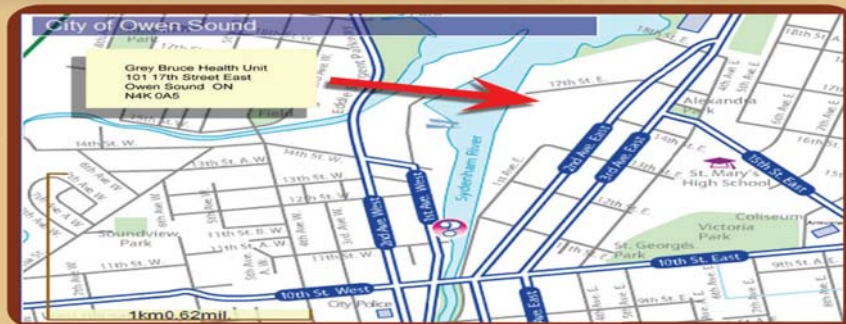
Ministry of Health and Long-Term Care. (June 12, 2008). *Memorandum to Medical Officers of Health and Vaccine Preventable Diseases Managers Re: Change to the Human Papillomavirus (HPV) Publicly Funded Vaccination Program – Extension of Eligibility Timeframe for Grade 8 Girls.*

Public Health is moving...

Programs and services will be available from the new
Grey Bruce Health Unit location Monday, August 25, 2008.



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Healthy Start - Step One Planning a Pregnancy?

Two evening classes especially
designed for you!

Healthy Start—Step One

Important information for those planning a pregnancy or less than 18 weeks pregnant.

Preconception / Early Prenatal teaching provides women with the opportunity to learn about healthy lifestyles, nutrition and potential hazards when they have the greatest potential to make a difference.

Healthy Start – Step One classes will begin this fall in Owen Sound and Walkerton. All women or couples who are planning a pregnancy, or who are less than 18 weeks pregnant are encouraged to attend. This program will run in addition to the regular prenatal series / workshop that is presently offered.

Have The Healthiest Baby Possible

Topics will include:

- Fetal Development
- Physical Changes
- Healthy Lifestyle (for mom, dad and baby)
- Environmental Issues
- Healthy Relationships
- Pre-term Labour
- Benefits of Breast-feeding
- Fatherhood

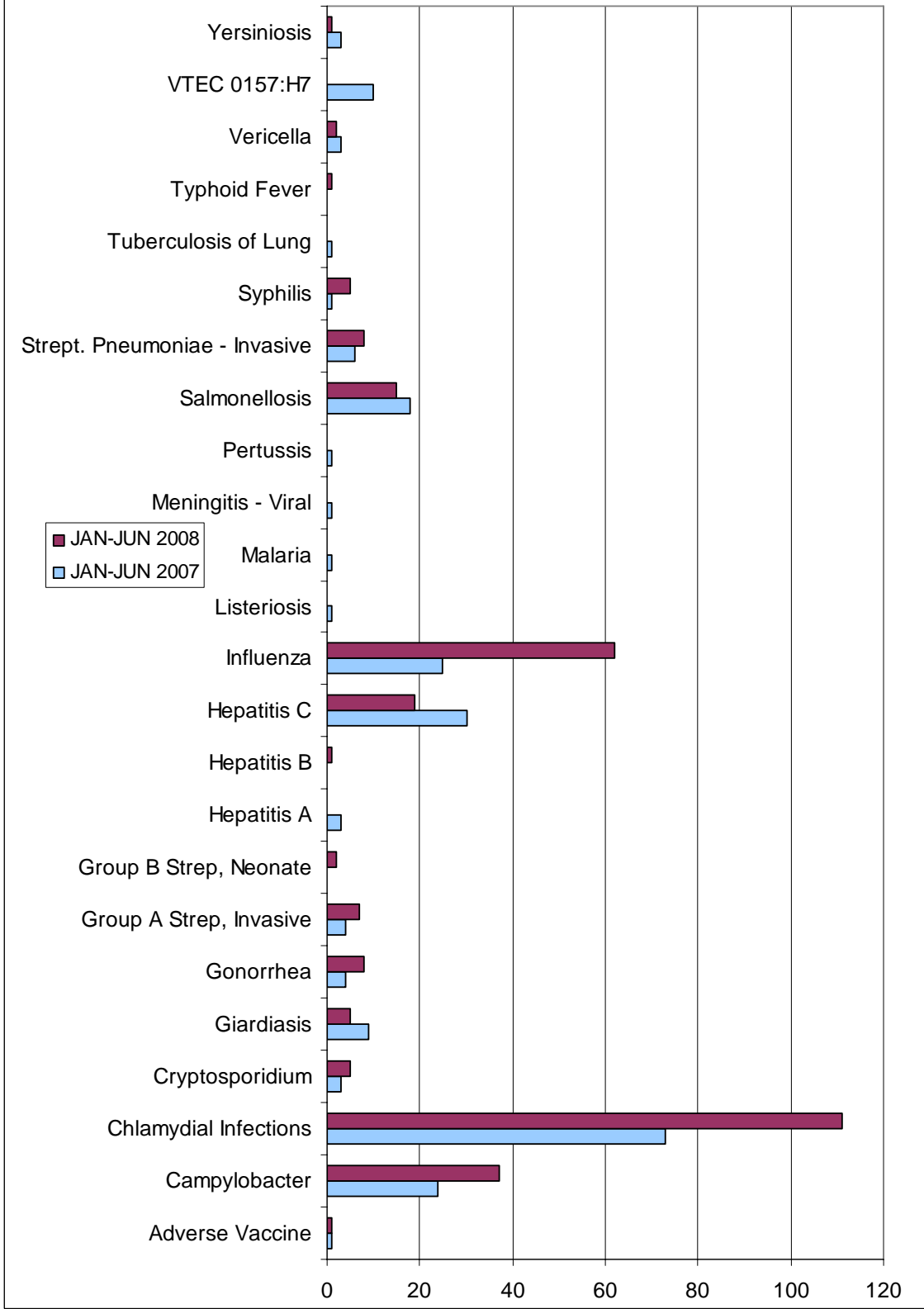
There is no cost to attend this program. Pre-registration is required.

Call 1-800 263-3456 or 376-9420 for more information or to register.

As Soon As You Know, Let Us Know!



Reportable Disease Incidence
January-June 2007 versus January-June 2008



Just found out you're pregnant?

It's never too late to get the facts about alcohol and pregnancy



- Many pregnancies are not planned. If you drank alcohol before you knew you were pregnant, you can make a confidential call to Motherisk for helpful information.
- There are still many things you can do to have a healthy pregnancy and a good start for your baby.
- If you are pregnant or planning a pregnancy, it is safest not to drink any alcohol, because no amount of alcohol has been proven safe.

CALL:

1-877-327-4636

OR VISIT:

www.motherisk.org

FASD Stakeholders for Ontario
Funding for this poster was provided by Public Health Agency of Canada.