

#### Infections

### Avian Flu H5N1

- Raging worldwide and in the region and nationally
- Still not showing itself as a very common transmissible infection to humans and still not human to human
- Still need to pay attention to it

#### **Tick Borne Illnesses**

- The official news came out that Babesiosis is being diagnosed much more in recent years in Vermont
- Time of the year needs to be expanded

### **Marburg Virus**

- Worst player than Ebola
- No treatment associated with it
- Occurring in Tanzania and Equatorial Guinea
  - Don't have any airports there
- No cases in the U.S., but having an uptick in those parts of the world

#### COVID

- Hospitalizations 23 new admissions last week
- 5% of hospital beds are occupied for COVID and this is low
- Syndromic surveillance is much lower than the prior 2 years currently
  - o About 2% which is measurable but, lower than previous years
- Genetic sampling shows mainly XBB.1.5
- 35% vaccination rate
- Official FDA word has said you don't need another booster yet
- VT deaths are about half of what they were in preceding months
- Concerns by advocates in disability community that their access to Paxlovid has been limited and they're pointing their fingers at clinicians
  - o Say clinicians are not indicated for them, they're not sick enough, etc.
- No more white house task force
  - o In a different phase of things right now, which is a good thing

## **Environmental Health**

- PCB testing in schools
  - Some people are not happy about this testing in schools and are sharing language about why it is important to continue these tests
- Legislature is working on a bill that might restrict products that are made with PFOA's & PFA's (cosmetics, menstrual products, textiles) – unclear where this will go since it is a little unformulated
  - o Primary prevention is the approach

## **Opioid settlement Advisory Committee**

- \$7 million settlement money
  - Not using this funding for school activities, school-based activities, regional activities since \$3 million from the state is going to this every year



- Focus on harm reduction and access to treatment to people that aren't receiving treatment
  - 75% of overdose deaths are people that have never had any treatment
  - 50-60% of deaths happen at home
- Naloxone, fentanyl test strips, xylazine test strips being able to be accessed more
- o Effort to engage people with wounds that have occurred due to xylazine
- Making treatment more user friendly with transportation and adequate hours and staffing for needs
  - Springfield area, Addison County, and Burlington
  - There will be one hub in a correctional facility, most likely Newport
- Get people more engaged through the outreach programs through recovery/sober housing, homeless shelters, on the streets
  - Get a trusted connection with these individuals to get treatment
- Stimulant use disorder individuals who show in our overdose statistics
  - Evidence based management strategy Contingency Management people who stop using the stimulants, then have negative urine tests, and receive gift cards to activate dopamine centers instead

# Legislative

- Joint Interests of the VDH and VMS
  - o Eliminating flavors in menthol vaping
  - o H.22 Opioid Bill
  - o H.230 Suicide Prevention Bill
    - Isn't going the exact way we thought it would legislatively
  - Improve mental health care so people never enter crisis Expansion of Blueprint,
    DULCE, and current hubs
    - House appropriations committee will only give 1 year of pilot funding instead of

### **Questions and Answers**

There were some discussions about pharmacists wanting to be able to test for respiratory viruses. How will this be helpful?

**ML:** We are aware of it, but haven't weighed in. Being framed as a scope of practice – if they can do a COVID test they can do another test. Decisions should be made on how sick the person is, not where they should get their test. There needs to be some messaging for individuals to do clinical reasoning and the pharmacist. There is a review of risk factors during an office visit, including how other drugs will interact.



# Our next call will be May 4th

# **Zoom Information**

https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJ1ZFQ2R3diSVdqdlJ2ZG4yQT09

Meeting ID: 867 2625 3105 / Passcode: 540684

One tap mobile +13126266799,,86726253105#,,,,\*540684# US (Chicago) +16468769923,,86726253105#,,,,\*540684# US (New York)

Information will be posted here: <a href="https://vtmd.org/thursday-public-health-updates">https://vtmd.org/thursday-public-health-updates</a>