



2024 ADPH Updates  
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# Disclosure statement

- I have no financial interests or relationships to disclose.
- I do not intend to discuss an off-label/investigative use of a commercial product/device.

# Reporting updates

- Reminder, reporting is required by rule
  - Physicians are mandatory reporters
- Recent changes
  - Clarification added that the reportable timeframe starts at the point of laboratory test result or diagnosis.
  - For Providers:
    - Begins upon clinical suspicion for the 4-hour diseases/conditions, within 24 hours of presumptive diagnosis for the 24-hr diseases/conditions, and within 3 days for the standard conditions.
  - For Laboratories:
    - Electronic lab test reporting is immediately by phone (4-hr) or within 24 hours for everything else.

# Reporting updates

- Adds birth defects, primary amebic meningoencephalitis, perinatal hepatitis C, and latent tuberculosis infection.
- Birth defects reporting (added 4/14/2024)
  - Alabama implemented birth defect reporting for the prevention and early detection of certain congenital disorders. Birth defect reporting is required within 30 days of diagnosis or associated laboratory tests. Each healthcare facility, healthcare provider, or physician who diagnoses the birth defect must report.

# Reporting updates

- Reportable birth defects include the following:
  - Anencephalus
  - Anotia/microtia
  - Atrioventricular septal defect
  - Cleft lip and/or palate
  - Common truncus arteriosus
  - Gastroschisis
  - Hypoplastic left heart syndrome
  - Limb deficiencies
  - Spina bifida
  - Tetralogy of Fallot
  - Total anomalous pulmonary venous connection
  - Transposition of the great arteries
  - Trisomy 21 (Down syndrome)

# Reporting updates

- Limits COVID-19 cases reported by providers to only be cases known to reside in congregate living facilities.
- Testing of Pregnant Women for Sexually Transmitted Diseases
  - Adds detailed testing recommendations for chlamydia, gonorrhea, syphilis, hepatitis B virus (HBV), hepatitis C virus (HCV), and HIV infections to replace previous guidance.

# Reporting updates

- <https://www.alabamapublichealth.gov/infectiousdiseases/report.html>
  - Print/review the list provided
- <https://redcap.link/REPORT2AL>
  - Some conditions are not mandated, but can be reported as a disease of public health concern

# Reporting updates

- List of contacts:
  - Bureau of Clinical Laboratories 334-290-6130 (24-hour coverage)
  - Infectious Diseases & Outbreaks Division 334-206-5971 or 1-800-338-8374 (24-hour coverage), FAX: 334-206-3734
  - Office of HIV Prevention & Care 334-206-5364 or 1-800-344-1153
  - Division of Immunization 334-206-5023 or 1-800-469-4599
  - Division of Sexually Transmitted Diseases 334-206-5350
  - Division of Tuberculosis Control 334-206-5330



# Measles

- Current situation
  - 151 cases in 22 states (including Florida, Georgia, and Louisiana) – 53 cases in 2023
  - Only 5% of cases with 2 doses of documented MMR
- Reporting
  - Withing 24 hours of presumptive diagnosis

# Measles

- Suspect measles
  - Isolate
    - Consider isolating patient with fever/rash
  - Identify
    - Screen for epidemiologic risk factors
  - Inform
    - Call ADPH immediately or submit a report
    - Even while still in the office
  - Test
    - Swab throat or NP (PCR)
    - Serology rarely needed and unreliable
  - Treat
    - Follow guidelines or advice from medical officer

# Measles

- <https://www.alabamapublichealth.gov/immunization/measles.html>
- <https://www.cdc.gov/measles/index.html>
  - Reeducate yourself on the symptoms, incubation period, symptoms, etc.
  - Submitting pictures can help with the evaluation
  - The testing request is comprehensive

# HPAI

- Highly Pathogenic Avian Influenza
  - H5N1 (Influenza A)
  - Primarily problematic in migratory birds and poultry
  - “Highly pathogenic” refers to birds
  - Mammalian and human transmission has been observed
  - Infections in mammals (including humans) have resulted in mild illnesses

# HPAI

- Current outbreak
  - Many dairy cows infected – 83 herds
    - 9 states, none in Alabama
  - Symptoms include fatigue and decreased milk production, recover well
  - Also, some other species such as barn cats, racoons, mice, etc. (also mild symptoms)
  - Limitations on movement of dairy cattle through USDA
  - Working closely with AL Dept of Ag and Industries
    - Lead agency (Dr. Frazier – state Vet)
  - PPE is available upon request for dairy workers

# HPAI

- Milk supply continues to be tested
  - No infectious products found in pasteurized milk
    - Raw milk or products may be an issue
  - Viral material found
- 3 2024 human cases
  - 2 in Michigan, 1 in Texas
    - Associated with close contact with dairy cattle
    - 2 minimally symptomatic (conjunctivitis)
    - 1 with some URI symptoms and conjunctivitis
    - All recovered and no other transmission was noted
  - 1 in Colorado (2022)
    - Associated with a poultry culling event

# H5N1

- Current risk to the US population is still felt to be low
  - The virus does not seem to have gained mutations to increase its spread in humans or resistance to antivirals
  - The US has several vaccine candidates ready (well-matched) if widespread activity occurs
  - There are millions of doses of antivirals in the SNS (beyond the commercial supply)
  - Conjunctival specimens can be collected and sent to CDC with an emergency authorization (FDA) along with NP swab in VTM

# HPAI

- Testing

- May show up as “type A”, but H1N1 or H3N2 not detected or inconclusive
- May only show up as “A” on office testing
  - Would look for an epi link before reporting
- As of April 14, 2024, labs are required to report all PCR positive influenza results to look at geographic patterns
- Routine vaccination of workers is encouraged
  - Possibility of reassortment

- More info:

- <https://www.cdc.gov/flu/avianflu/avian-flu-summary.htm>



# HPAI

- Reporting to ADPH
  - Novel Influenza A viruses are “Immediate, Urgent”
  - Reporting is required
    - Within 24 hours of presumptive case
- Use the REPORT system
  - <https://www.alabamapublichealth.gov/infectiousdiseases/report.html>
    - Or
  - <https://epiweb.adph.state.al.us/redcap/surveys/?s=H37ENP8ADD>
- More info:
  - <https://www.cdc.gov/flu/avianflu/avian-flu-summary.htm>

# Syphilis

- Updates
  - Syphilis continues to be an issue, particularly congenital syphilis
  - Testing is now required in the first trimester, third trimester (28-32 weeks), and at delivery (ADPH rule updated/approved)
    - Most cases are missed opportunities
    - Regardless of risk factors
    - Sexual health history

# Syphilis

- ACOG
  - Updated their recommendations (4/2024)
  - “However, in the context of the rapidly increasing rates of congenital syphilis, obstetrician–gynecologists and other obstetric care professionals should screen all pregnant individuals serologically for syphilis at the first prenatal care visit, followed by universal rescreening during the third trimester and at birth, rather than use a risk-based approach to testing.”

# Syphilis

- Bicillin availability has improved
  - No shortages at county HDs
  - Still recommend cautious use

# HIV

- Testing required
  - First trimester
    - All pregnant persons not previously confirmed as HIV infected.
  - Third trimester (28-32 weeks)
    - All pregnant persons at 28-32 weeks gestation, regardless of risk factors unless previously confirmed as HIV infected.
  - Delivery
    - All pregnant persons not previously confirmed as HIV infected.
- <https://www.alabamapublichealth.gov/std/prenatal-std-testing.html>
- [https://www.alabamapublichealth.gov/std/assets/prenatal\\_testing.pdf](https://www.alabamapublichealth.gov/std/assets/prenatal_testing.pdf)

# Operation Wipe Out Cervical Cancer

- Current Situation:
  - 4<sup>th</sup> highest cervical cancer mortality in nation
  - 40% women w/abnormal results do not follow up
  - HPV Vaccination lower than nation
- Response:
  - Gather rural primary care physicians to determine barriers/solutions for Action Plan (Summit held Sept 2022)
  - State Health Officer launched Action Plan for Elimination of Cervical Cancer as Public Health Problem in Alabama (Press Conference May 2023)
  - Alabama is 1<sup>st</sup> and only state in nation to announce & implement plan to eliminate cervical cancer (Continues to receive national and international attention)
- Action Plan:
  - Increased HPV vaccination
  - Increased cancer screening through regular HPV/Pap testing
  - Increased appropriate follow-up for women who have an abnormal test results

# Call to Action

- Attend/View Wipe Out Regional Meetings in Your Area (CME available)
  - (<https://www.alabamapublichealth.gov/bandc/news>)
- Address known barriers to prevention and screening
  - Recommend HPV vaccination, screening, follow-up
  - Explain what screening consists of, particularly in the event of abnormal results
  - Educate female patients about HPV virus being leading cause of cervical cancer
  - Schedule screening with HPV/Pap right away, if it is due

# Call to Action

- Provide HPV vaccination / Encourage parents to talk to child's doctor about HPV vaccination
- Conduct HPV/Pap co-test with reflex to determine HPV type
- Use the ASCCP app (on phone) to determine follow-up based on test results and history (One time cost: \$10)
- Explain abnormal finding to patients in detail to ensure they understand the importance of follow-up and the danger of cervical cancer.



# Call to Action

- Consider contracting with ADPH's ABCCEDP Program: Uninsured women receive free screening/diagnostic/treatment; providers reimbursed at Medicare rate (1-877-252-3324)
- Encourage staff to educate, inform, and engage w/female patients re: HPV vaccination, screening, and follow-up importance
- Become an advocate for "Wipe Out Cervical Cancer" ([operationwipeout.org](http://operationwipeout.org))

# Call to Action

- Use your credibility as a physician to spread the word in your office and community about the possibility of eliminating cervical cancer in our lifetime
- View Conquering Cancer in Alabama: A Documentary (35 min)
  - <https://operationwipeout.org/get-involved/partner-resources/>

# Questions?

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