

Public Health Updates: Clade II Mpox; Marburg Virus; Oropouche Virus; Acute Flaccid Myelitis; Respiratory Illness; PD & IV Solution Supplies

October 18, 2024

Please review important updates from Skagit County Public Health.

NOTE: Our 24-hour Communicable Disease phone number is 360-770-8852.

Washington State Department of Health Provider Alert: Increase in Clade II Mpox Transmission in Washington; Updated Screening, Testing, and Vaccine Recommendations

Current Situation

The Washington State Department of Health (DOH) issued a provider alert on 09/25/2024 regarding an increase in clade II mpox transmission in WA.

There are two distinct clades of mpox circulating globally – clade I and clade II.

- Clade I mpox is endemic to central Africa, and is now connected to an outbreak of more than 27,000 cases in multiple countries where clade I is not endemic. There is evidence that clade I mpox is more transmissible, and potentially more severe, with case fatality ratios reported up to 10%. To date, no cases of clade I mpox have been identified in WA or in the United States.
- Cases of clade II mpox, associated with the 2022 outbreak in the US, continue to be identified in Washington (WA). Although current rates are

much lower when compared to 2022, there has been a recent increase in mpox cases in Washington. The majority of recent cases have been associated with transmission during sexual and intimate contact and among those who identify as gay, bisexual, or other men who have sex with men (MSM).

Due to this increase in local transmission of clade II mpox, plus the risk of clade I mpox, DOH recommends that health care providers continue to screen patients for signs and symptoms of mpox, to be aware of current testing resources, to continue to offer vaccination for those who are currently at high risk for acquiring mpox, and to be on alert for suspected cases of mpox clade I. Healthcare providers in Washington should report suspected cases of clade I mpox to their local health jurisdiction. For Skagit County residents report to Skagit County Public Health by calling 360-770-8852.

The WA DOH Provider Alert from 09/25/2024 can be found here.

Additional resources:

- WA DOH mpox page
- WA DOH mpox testing information

CDC Health Advisory: First Marburg Virus Disease Outbreak in the Republic of Rwanda

The Centers for Disease Control and Prevention (CDC) has issued a Health Alert Network (HAN) Health Advisory to inform clinicians and health departments about the Republic of Rwanda's first confirmed outbreak of Marburg virus disease (MVD) with 36 laboratory confirmed cases and 11 deaths reported as of October 2, 2024, including at least 19 cases in healthcare workers. This report summarizes CDC's recommendations for public health departments and clinicians in the United States on case identification and testing and clinical laboratory biosafety considerations. No confirmed cases of MVD related to this outbreak have been reported in the United States or other countries outside of the Republic of Rwanda to date. Currently, the risk of MVD in the United States is low; however, clinicians should be aware of the potential for imported cases. The full health advisory can be found here.

WA DOH Provider Alert: Oropouche Virus in South America and the Caribbean – Be Alert for Imported Cases

Current Situation

The Washington State Department of Health issued a provider alert on 10/15/2024 regarding outbreaks of Oropouche virus in South America and the Caribbean, with travel-associated cases diagnosed among U.S. residents following travel to Cuba. Oropouche virus, an arbovirus spread by some biting midges and mosquitoes, has been causing outbreaks in countries in South America and the Caribbean. CDC has issued a Level 1 travel health notice for some countries in South America and the Caribbean and a Level 2 travel health notice for some countries in South America and the Caribbean and a Level 2 travel health notice for Cuba . No cases of Oropouche have been diagnosed among Washington residents to-date, but people returning from regions experiencing an outbreak could be at risk. Many of the areas where Oropouche virus is circulating are also endemic for other arboviruses, such as dengue, chikungunya, and Zika virus. Testing to rule-out other endemic viruses is recommended for patients presenting with acute symptoms consistent with these conditions.

Actions Requested

Healthcare providers should consider Oropouche virus disease among persons presenting with compatible symptoms who have recently been in an area where the virus is present. Symptoms of Oropouche virus disease include:

- Acute onset of fever, headaches, chills, arthralgia, and myalgia
- Retro-orbital pain, photophobia, nausea, vomiting, diarrhea, fatigue, maculopapular rash, conjunctival injection and abdominal pain may also be present
- Approximately 60% of patients experience a relapse of symptoms days to weeks after initial improvement
- Severe manifestations include hemorrhagic symptoms and neuroinvasive disease

Additional requested actions and guidance can be found in the WA DOH Provider Alert <u>here</u>.

WA DOH Health Update: Remain Vigilant for Acute Flaccid Myelitis this Fall

Current Situation

The Washington State Department of Health issued a provider alert on 10/04/2024 regarding the importance for remaining vigilant for potential cases of Acute Flaccid Myelitis (AFM) this fall.

Acute Flaccid Myelitis (AFM) is a rare but serious acute-onset paralytic disease. Although AFM can occur in patients of any age, it mainly affects children. As we enter the fall season, increased circulation of respiratory pathogens, including enteroviruses, is to be expected. Circulation of Enterovirus D-68 (EV-D68) has been associated with an increase in cases of AFM in previous years. While Washington has had zero AFM cases reported so far in 2024, at least 14 cases of AFM have been reported in the US, and wastewater monitoring has indicated increased circulation of EV-D68 in recent weeks.

Actions Requested

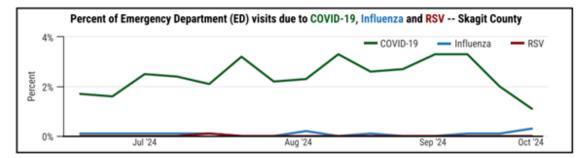
- Healthcare providers should maintain vigilance for cases of AFM. To ensure rapid identification of suspected cases, we request the following:
 - Report suspected cases of AFM patients to your local health jurisdiction (LHJ) within 24 hours.
- AFM should be suspected in patients of ANY age who present with:
 - Acute onset of flaccid weakness in one or more limbs, AND
 - An MRI showing gray matter lesions spanning one or more spinal segments.
- In addition to AFM, clinicians should also consider Polio as a differential diagnosis, especially in patients who are not vaccinated for polio and who have had recent travel to areas with high risk for polio.

- Patients with AFM can progress rapidly to respiratory failure. Clinicians should monitor respiratory status of patients suspected of AFM and should have a low threshold to admit patients to the hospital.
- Be aware that there are several specimens that you may be asked to collect to aid case confirmation, including serum, respiratory, stool, and CSF.
 - For a list of specimens and appropriate handling, refer to this table from CDC.
 - Specimens can be sent to the Washington State Public Health Laboratories (PHL) for shipping to the CDC. Shipping to PHL must be arranged IN ADVANCE by contacting your LHJ.
 - Be aware that confirmation for cases of AFM is completed at the Centers for Disease Control and Prevention (CDC) and may take several weeks.
- Be aware that there are no licensed treatments for AFM, and that care is mainly supportive. For additional information on AFM, please visit the following:
 - AFM information for healthcare providers from CDC: <u>https://www.cdc.gov/acute-flaccid-myelitis/hcp/clinical-overview/index.html</u>
 - AFM physician consult and support portal: <u>https://wearesrna.org/living-with-myelitis/resources/afm-physician-support-portal/</u>
- Understand CDC's infection prevention guidelines for suspected AFM patients: While there are no pathogen-specific recommendations for infection prevention, the CDC interim recommendation for management of patients with acute flaccid myelitis is Standard + Contact + Droplet precautions, consistent with CDC's infection prevention recommendations for EV-D68.
- See the full WA DOH Provider Alert <u>here</u>.

Respiratory Illness Report

Skagit County Public Health is publishing a weekly respiratory illness report, showing current trends for COVID-19, influenza and RSV, as well as other common respiratory pathogens. The reports are available in English and Spanish, and will be posted to our website each week, on our <u>communicable disease page</u>, in the section titled: "Respiratory Illness Data and Reports". Previous season reports are available on the website as well. Data for this report are collected from our three hospital partners in Skagit County, and extracted from the ESSENCE syndromic surveillance system.

Below is a graph from the most recent respiratory report, showing that there has been a decrease in the percent of emergency department (ED) visits associated with COVID-19 in the last week, but an increase in the percent of ED visits associated with influenza.



CDC Health Advisory: Peritoneal Dialysis (PD) and Intravenous (IV) Solution Supply Disruptions

The Centers for Disease Control and Prevention (CDC) has issued a Health Alert Network (HAN) Health Advisory to inform healthcare providers, pharmacists, healthcare facility administrators, and state, tribal, local, and territorial health departments of a supply disruption of peritoneal dialysis (PD) and intravenous (IV) solutions from the Baxter International's North Cove facility in North Carolina, due to Hurricane Helene. The supply disruption may impact patient care and require adjustments to the clinical management of patients. Healthcare providers, pharmacists, healthcare facility administrators, and state, tribal, local, and territorial health departments, regardless of supply chain disruptions, should immediately assess their supply and develop plans and mitigation strategies to reduce the impact on patient care.

In Washington State, questions about supplies can be directed to the Norwest Healthcare Response Network at: <u>hecc@nwhrn.org</u> or 425-988-2897. The Network has also provided a resource providing mitigation strategies for scarce resources, available <u>here</u>.

Thank you for your partnership in keeping Skagit County healthy!



Skagit County Public Health Communicable Disease Division

Business hours phone: (360) 416-1500 After hours urgent provider line: (360) 770-8852

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