



Medical Health Officers
UPDATE for Physicians

July 25, 2014

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MHO UPDATES, go to:

[www.interiorhealth.ca/
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Treatment as Prevention for Substance Use Disorders

CBSBC Methadone Workshop comes to Kelowna Saturday September 13th, 2014

As physicians, we usually think of addiction services for persons with acute and/or chronic substance use disorders through a treatment lens. It is just important to consider the prevention aspects of such services both for individuals and the general population. As one component of a comprehensive approach to addictions, methadone maintenance has also been shown to effectively decrease the incidence of HIV infection, HCV infection, illicit opioid overdose deaths, and illegal activities.

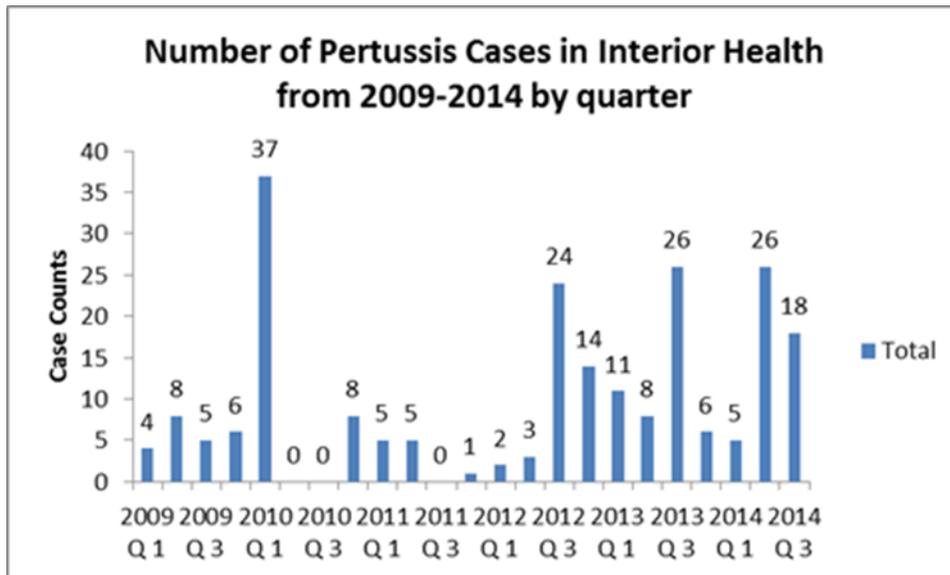
While Interior Health is committed to ensuring access to the full spectrum of addiction services, there is a growing need for active participation of the medical community in providing high quality care for persons who inject drugs (PWIDs). As such we hope you will consider this accredited UBC CPD activity as an opportunity to learn about, and contribute to the health of both your own patients and the broader population we serve.

For more information please go to: <https://www.cpsbc.ca/for-physicians/professional-development/methadone-101-hospitalist-2014-09>

Pertussis Cases on the Rise

In the last five years, there has been a significant increase in the incidence of pertussis. This is directly attributable to low vaccination rates in several local health areas. Please remind your patients about the importance of vaccination to prevent pertussis and other infectious disease outbreaks. Also be sure to review your infection control practices within the offices when patients present with a cough, fever, and/or rash (e.g. Provide masks for patients in waiting rooms, hand-washing, etc.

<http://www.cdc.gov/HAI/settings/outpatient/outpatient-care-guidelines.html>)



Update on Enterics

In BC, summer marks the start of the bacterial and parasitic diarrheal season with an increase in the number of infections and outbreaks associated with *Salmonella*, *E. coli*, and *Cyclospora*. Norovirus and other viruses occur more commonly in the winter months. Last year, the three most common settings from which outbreaks occurred were community, food service establishments and private functions and the most common mode of transmission was foodborne.

Most enteric pathogens cause diarrhea, abdominal cramps, nausea, or vomiting of several days' duration. Most infections and intoxications are self-limited; however, some require treatment and may lead to complications. BCCDC and the BC Medical Journal provides guidance on key clinical characteristics to help distinguish between different types of enterics and provides recommendations on when to request laboratory testing including new tests for *Entamoeba histolytica*. BCMJ, Vol. 56, No. 5, June 2014, page(s) 220-221 <http://www.bcmj.org/bc-centre-disease-control/infectious-diarrhea-0>

Gastroenteritis epidemics (regardless of pathogen) are reportable in BC. If you see an increase in GI illness in your practice and/or have cases of GI illness that appear to be linked, please report this to the Communicable Disease Unit at 1-866-778-7736 during business hours, or to the Medical Health Officer on call after hours at 1-866-457-5648.

Water Safety

Summer also heralds the start of water-related injuries. More people die from drowning in the Interior region than in any other area of the province. Drowning can happen fast and often in less than a minute. So far this year BC has experienced 25 deaths due to accidental drowning, 15 of which have occurred in the Interior. Drowning is almost always preventable.

Please remind your patients that there are many ways to reduce the risk of drowning such as always swimming with a buddy, not mixing alcohol and other substances with water activities, and closely supervising children when around water.