

UPDATES ON INFECTION CONTROL

FDA APPROVES 2008-09 FLU VACCINES, TARGETS NEW STRAINS

The US Food and Drug Administration has approved the vaccines that will be used for the upcoming flu season. Each season's vaccines are altered to anticipate the three virus strains most likely to be circulating. All three strains were changed this year, which officials called an "unusual occurrence."

There's always the chance that the scientists' best guesses regarding which strains will be prevalent will fall short, as was the case during the 2007-08 US flu season when the vaccines' overall success rate was about 44%. But even if the vaccines and the circulating strains aren't an exact match, they will provide some protection and may reduce the severity of the illness or prevent flu-related complications, officials said.

Read more at CDC website: <http://www.cdc.gov/flu>.

RAPID INFLUENZA TESTING EVALUATION

The Joint Commission and the Centers for Disease Control and Prevention (CDC) are evaluating how rapid tests for influenza are used in outpatient medical settings by surveying community health centers, solo and group practice physician offices, and hospital emergency departments. To efficiently gather data, an online collaborative forum (WikiHealthCare) on the subject of rapid influenza testing has been developed and launched. Users can share their experiences, post resources, and

engage in online dialogs about influenza testing.

Visit WikiHealthCare at <http://wikihealthcare.jointcommission.org>.

MDR-TB CHALLENGING GLOBAL CONTROL OF THE DISEASE

According to a study published in the August issue of the *American Journal of Respiratory and Critical Care Medicine*, current TB elimination strategies are not effective in countries with high rates of multi-drug resistant tuberculosis (MDR-TB).

Analyzing World Health Organization data from 2003 to 2004, researchers found that patients in countries with high initial MDR-TB prevalence (>3%) were nearly twice as likely to fail initial treatment compared to patients in countries with lower rates. More than 20% of all patients who received standardized treatment in these countries required re-treatment.

The authors concluded that the currently recommended TB initial and re-treatment regimens should be updated and revised in countries where the prevalence of initial drug resistance exceeds 3%.

Read more at <http://ajrccm.atsjournals.org/cgi/content/abstract/178/3/306> and <http://healthfinder.gov/news/newsstory.asp?docID=617952>.

ANTIBIOTICS ARE OVER PRESCRIBED

Too many people see antibiotic medication as a "cure-all" technique. Of course antibiotics can

be effective in bacterial infections, yet they are even prescribed for presumed viral infections. Why do health professionals continue to over prescribe, and why do patients demand antibiotics? Will antibiotic-resistance infections continue to rise?

To better educate the public and healthcare professionals, the American Academy of Urgent Care Medicine has teamed up with the US Food and Drug Administration to produce the brochure, "Preserve a Treasure." This brochure is available along with public service announcements and posters in English and Spanish at http://www.fda.gov/cder/consumerinfo/antibiotics_all_resources.htm.

2008 UPDATE ON WEST NILE VIRUS INFECTIONS

A recent article published in *Morbidity and Mortality Weekly Report (MMWR)* summarizes the 2008 surveillance data on the West Nile Virus (WNV) received as of July 22nd. The data indicate that of 14 states reporting, 43 cases of human WNV have been diagnosed. Of the 43 cases, 16 showed neurologic manifestations and 27 showed no evidence of neuroinvasion. None of the cases proved fatal. The article also summarizes data collected on animal species that were infected with WNV. Find the *MMWR* at <http://www.cdc.gov/mmwr/PDF/wk/mm5729.pdf>, CDC information at <http://www.cdc.gov/ncidod/dvbid/index.html> and USGS Disease Maps 2008 at <http://diseasemaps.usgs.gov>.