

BOARD OF PUBLIC HEALTH MEETING
Meeting Minutes for June 14, 2022

Members Present:

James Curran, M.D., M.P.H., Chair
Mitch Rodriguez, M.D., Secretary
Kathryn Cheek, M.D., F.A.A.P.
Robert Cowles III, M.D., F.A.C.S.
Tai Valliere-White, M.D., F.A.C.S

Members Absent:

John Hauptert, F.A.C.H.E., Vice Chair
Sangmin Ryan Shin, M.D., M.A., F.A.A.O.S.
Cynthia A. Mercer, M.D
Major General Thomas M. Carden, Jr.

The Board of Public Health held its monthly meeting on June 14, 2022. The meeting was virtual and was led by Chairman James Curran, M.D. An agenda and the list of attendees are attached hereto and made official parts of these minutes.

I. & II. Call to Order and Roll Call:

The meeting was called to order at 1:00 p.m. by Dr. Curran, following a roll call by Dr. Mitch Rodriguez, the following members were absent: John Hauptert, Sangmin Shin, Cynthia Mercer and Major General Thomas Carden.

III. Approval/Adoption of Minutes:

Dr. Rodriguez presented the minutes of the May 10, 2022, board meeting for discussion and approval. There was no discussion. The minutes passed unanimously.

IV. New Business:

Introduction - Commissioner Kathleen E. Toomey, M.D., M.P.H.

Commissioner Toomey described that today's meeting is going to start with a very interesting epidemiology update, and commented that for the last two and a half years DPH had been working almost exclusively on COVID, and the fact that DPH is able to jump right back to address everything from hepatitis in children, monkeypox and active surveillance for avian influenza exposure in workers, is an example of how Public Health must have the ability and flexibility to respond at a moment's notice to any public health threat.

- A. Epidemiology Updates –Pediatric Hepatitis, COVID-19, Avian influenza and Monkeypox - Cherie L. Drenzek, D.V.M., M.S.

Snapshot of COVID-19 (6/14/22): "BA.2 Wave

- In the US, COVID case numbers have been flat, hospitalizations are slightly up; deaths are slightly down.
- Some areas of the U.S. are still experiencing case surges (Wyoming, Oklahoma, Arkansas, South).
- In Georgia, case numbers have increased by about 20% in the last week.
- The magnitude of the wave is likely greater than surveillance numbers show because of home tests and other factors.
- Vaccination, boosters, surveillance, testing, and traditional mitigation are critical to control this wave and WHEN we face other variants that emerge and result in surges over the next several years.

Global Monkeypox Outbreak, 2022

- Monkeypox is not new. It is a rare disease caused by *Monkeypox virus*, which was discovered in 1958, and is endemic in Central and West Africa.
- All US cases are among adults, most male, most identify as MSM median age 38 years (range 23-76 years).
- Most reported international travel, but not to central or West Africa.
- Main risk factor reported was close physical contact with someone who had lesions.
- Many had co-infections with STIs like *Chlamydia*, Syphilis, HSV.
- Tried and true public health interventions to prevent spread: case isolation, contact tracing, risk assessment, contact monitoring, medical countermeasures if appropriate (e.g., smallpox vaccine under IND).
- Raise index of suspicion among clinicians and educate about testing at GPHL.
- If a clinician has a concern about a rash, should call 1-866-PUB-HLTH to consult about monkeypox testing. Note co-infections with common STIs as well.

Highly Pathogenic Avian Influenza (H5N1)

- HPAI is carried by wild migratory birds and can spread to commercial flocks -Huge economic impact (depopulation) USDA has a strong surveillance program to detect HPAI (2022 has been a huge year).
- Agriculture response includes biosecurity, surveillance, and testing of flocks in the control zone.
- DPH's primary role is to monitor persons exposed to affected birds (employees, responders) for ILI (modified electronic system) and provide testing for H5N1 infections.
- We monitored about 20 persons, all healthy.

Hepatitis of Unknown Etiology in Children

- As of June 8, a total of 275 children with hepatitis are now under investigation in 39 states (including <10 in Georgia) since then, with 9 deaths.
- 89% of the children were hospitalized, 15% needed transplants, the median age was 2 years. None had hepatitis viruses (A-E). About 45% of the children had adenovirus type 41 infections.
- About 700 suspect cases have also been identified in 34 other countries.
- Currently, the cause of hepatitis in these children is still unknown. Evidence is accumulating that adenovirus infection plays a role, but there may be other co-factors, too.
- Hepatitis remains a very rare illness in young children
- CDC is asking providers to report suspect cases to the state or local health department and consider testing for adenovirus.

B. Update on the infant formula shortage - LaToya Osmani, M.P.H., and Sean C. Mack.

Latoya Osmani introduced Sean Mack, WIC director who presented a brief overview of the infant formula shortage.

Abbott is one of three major manufacturers of infant formula in the US and controls almost half of the market. A voluntary recall was Issued February 17, 2022, including Similac, Alimentum, and EleCare4. The recall came after five children were diagnosed with bacterial infections after consuming products

- GA WIC is working to ensure that the program offers flexibility to WIC participants in obtaining infant formula, working closely with Mead Johnson to address areas with low stock as we make them aware through reports from participants, local agencies, and authorized WIC retailers
- Responses to the shortages:
 - Adding available formulas for redemption
 - Reducing the number of containers on a single voucher
 - Allowing participants to obtain a non-contract formula
 - Donation of returned formula to local community food programs

Most families have multiple safe options for their infants even if their usual formula is not in stock. Parents should work with child's health care provider to determine the best feeding plan. The baby's formula should not be watered down to stretch it out or make homemade formula. Parents should not buy formula from online auctions, unknown individuals, or unknown origins. All women who are medically able, should be strongly encouraged to breastfeed. WIC eligible families have access to an expert with clinical experience or training in helping breastfeeding mothers with complex breastfeeding problems.

Commissioner Toomey stressed that is very important to demonstrate that in the current national emergency of infant formula availability, we were able to create flexibility within the WIC program to allow not only WIC participants to obtain formula, but to help others to find formula, this is an example of how we can legally interpret the rules to maximize flexibility to ensure the health and safety of children in Georgia.

Dr. Cheek expressed thanks for the update and to the local WIC program that has been very helpful. Dr. Cheek asked if the WIC program is thinking about providing breast pumps for mothers who are considering re-instituting breast feeding, not only to new moms, as the program currently establishes. Mr. Mack responded that WIC is not undertaking any changes to the breast-feeding policies, but it is certainly something worth looking into.

Dr. Toomey asked Mr. Mack if there are areas of population within the State that are more heavily affected by the formula shortage than others, what is the assessment based on the WIC inventory. Mr. Mack answered that when WIC receives a report of a shortage or no formula, they immediately contact Mead-Johnson (the WIC formula contractor in Georgia). Mead-Johnson works with retailers to get formula orders increased and product re-stocked. So far, there have not been any prolonged shortages

Dr. Cheek asked what the percentage of births in GA are in the WIC program. Mr. Mack said that 40% to 50%.

C. Closing remarks

Dr. Toomey wanted to stress the importance of the heat alert that is going now throughout the State and the fact that heat can be deadly, particularly to elderly and children. From 1998 to 2021, 35 children died in hot cars. There are hundreds of reports of ER visits and discharges related to heat situations, dehydration, heat syncope, overheating and more complications. Our District

Health Directors, during their community outreach will be contacting individuals who are more vulnerable to heat exposure.

V. Board Comments

VI. Adjournment:

There being no further business to be brought before the board, Dr. Curran motioned for adjournment of the meeting. The motion passed unanimously. Dr. Curran adjourned the meeting at 1:53 p.m.

THESE MINUTES ARE HEREBY APPROVED AND ADOPTED THIS THE 14th DAY OF June 2022.



James Curran, M.D.
Chair



Misael Rodriguez, M.D.
Secretary

Official Attachments:

1. List of Attendees
2. Agenda

June 14, 2022

Board of Public Health Meeting Attendees

Board Members

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Attendees

Public virtual meeting.