

AMPLIFY

Amplify Awareness: Recognizing the Comeback of Eradicated Diseases

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Financial Disclosure

- Nothing to disclose

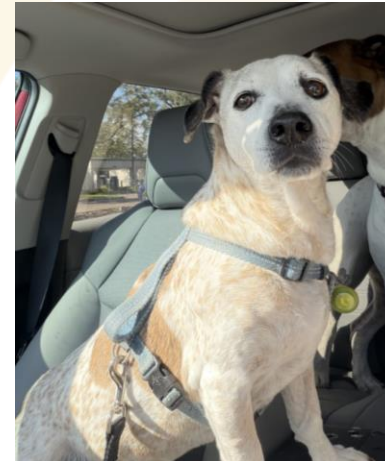
About Me



Leah Blizard

Physician Assistant

Family Medicine and Urgent Care Background



Anti Vax Era

- Fear of vaccines and myths surrounding them are not new
 - Impacting North America and Western Europe
- Who is on the front line of recognition in acute illnesses?

Eradication

- Elimination of the disease **EVERYWHERE**
 - Preventative measures **ARE NOT** necessary
 - Only 1 human disease has ever been eradicated – any guesses?

Elimination

- It is no longer **HERE**, but it is still **ELSEWHERE**
 - Preventative measures **ARE** necessary
 - How a geographic area loses elimination: US - 12 months of consistent transmission

Herd Immunity

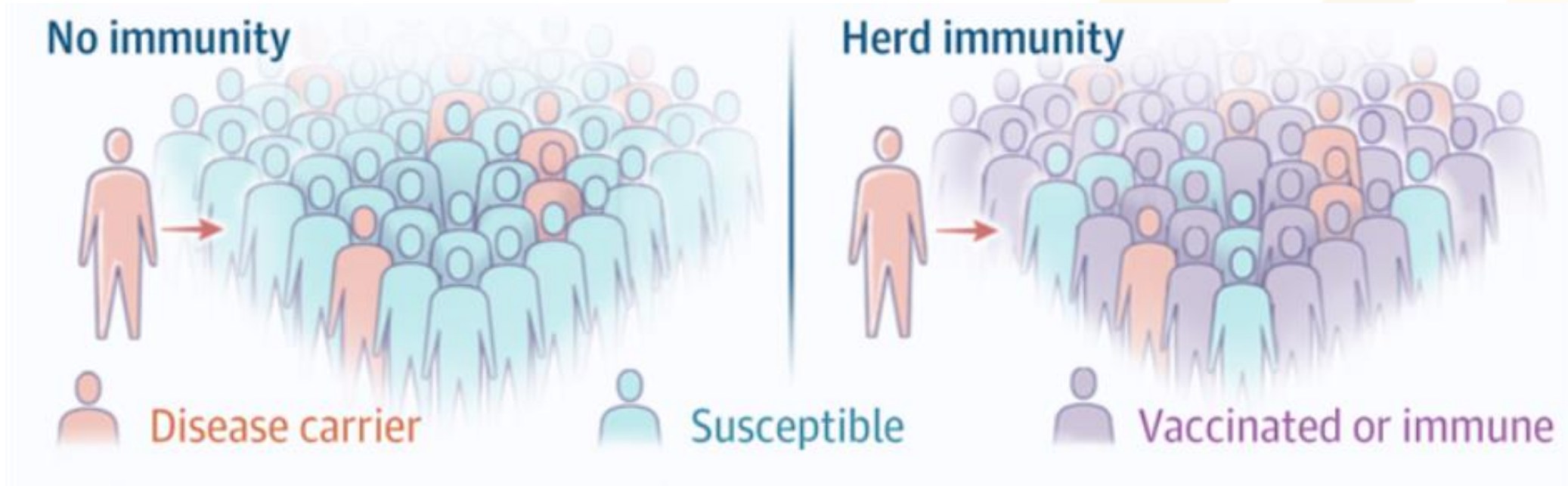


Image Source: JAMA

R_0 (R-Naught)

- Basic Reproduction Number
- Represents the average number of infections that will be produced by a single infected individual
- Closely related to herd immunity

What's the difference between an endemic, epidemic and pandemic disease?

Endemic disease



Constantly present in a population or region, with relatively low spread

Epidemic disease



Sudden increase in cases spreading through a large population

Pandemic disease



Sudden increase in cases across several countries, continents or the world

Image Source: BBC

Always ask!

Is this patient vaccinated?

MEASLES

Measles = Rubeola

- Day 0: Exposure
- Day 7-14: Symptoms begin – "3 C's" + high fever
 - 2-3 days after symptoms begin: Koplik Spots
 - Painless
 - 3-5 days after symptoms begin: Rash
 - Starts at scalp
 - Red/reddish brown
 - Fever and rash peak simultaneously

Measles = Rubeola

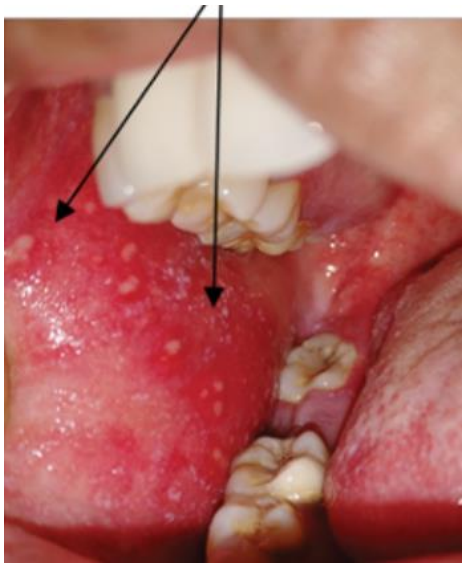


Image Source: JAMA



Image Source: Getty Images



Image Source: British Journal of Dermatology



Image Source: Mayo Clinic



Image Source: Science Photo Library

Measles = Rubeola

- Contagious 4 days prior to the rash appearing and 4 days after = 9 days total
 - Respiratory droplets and airborne transmission
 - Basic reproduction number: 12-18
- Complications:
 - Otitis media
 - Pneumonia
 - Encephalitis
 - Immune amnesia
 - SSPE

Measles = Rubeola

- One dose of the MMR vaccine is ~93% effective against measles
- Two doses is ~97% effective
- CDC recommends children should routinely get 2 doses of MMR vaccine:
 - First dose at age 12 through 15 months
 - Second dose at age 4 through 6 years (before school entry)

RUBELLA

Rubella = German Measles

- Day 0: Exposure
- Day 12-23: Symptom onset
 - Low grade fever
 - Conjunctivitis
 - Cough
 - Runny nose
 - Lymphadenopathy
- Rash begins 1-5 days after
 - Starts on face
 - Pink or light red
 - Fever fades as rash appears



Image
Source:
BBC



Rubella = German Measles

- Contagious 7 days before and 7 days after rash appears = 15 days total
 - Respiratory droplets
 - Basic reproduction number = 4
- Complications:
 - Arthritis
 - Congenital Rubella Syndrome

Rubella = German Measles

- One dose of rubella vaccine is ~97% effective
- CDC recommends children should routinely get 2 doses of MMR vaccine:
 - First dose at age 12 through 15 months
 - Second dose at age 4 through 6 years (before school entry)

POLIOMYELITIS

Poliomyelitis

- Day 0: Exposure
- Most people with polio are asymptomatic
- Day 3-6: nonparalytic symptoms
 - 25% have flu-like symptoms
 - Lasting 2-5 days, then self-resolves
- Day 7-21: onset of paralysis
 - Fewer than 1% of cases per CDC



Image Source: Malevus

Flu-Like Symptoms?

- Fever
- Age < 5 years old
- Unvaccinated/incompletely vaccinated
- Recent travel abroad
- Asymmetric flaccid paralysis
 - Proximal muscle involvement
 - Lower limb involvement more common
 - Progression \leq 3-4 days

Poliomyelitis

- Contagious for 7-10 before onset of symptoms
 - Basic reproduction number ~4-6 (in developed countries)
 - Fecal-oral transmission
 - Respiratory droplets
- Can shed virus for 6 weeks
- Complications:
 - Paralytic Polio
 - Aseptic meningitis
 - Respiratory failure

Poliomyelitis

- Two doses of the Inactivated Polio Vaccine are at least 90% effective against paralytic polio per CDC
 - Three doses are ~99% effective
 - Fourth dose is a booster
- 4 doses are recommended:
 - 2 months
 - 4 months
 - 6-18 months
 - 4-6 years old

DIPHTHERIA

Corynebacterium diphtheriae

Diphtheria

- Day 0: Exposure
- Day 2-5: Symptoms appear
 - Fever
 - Fatigue, weakness
 - Sore throat
 - Swollen glands
 - Pseudo membrane in the nose or throat



Image Source: CDC



Image Source: Wikipedia

Diphtheria

- **Contagious:**
 - Respiratory droplets
 - Contact with infected wounds
 - Contaminated objects
 - Basic reproduction number = ~ 2.5
- **Complications:**
 - Kidney failure
 - Myocarditis
 - Neuropathy
 - Skin infection

Diphtheria

- 5-dose series is ~89% effective
 - Reaches 98% within 1st year of the 5th vaccine
 - Declines to 71% after 5 years
- DTaP:
 - 2, 4, 6 months
 - 15-18 months
 - 4-6 years
- Tdap:
 - 11-12 years
- Booster every 10 years

Not Eliminated, Still Endemic Honorable Mentions

VARICELLA

Varicella = Chicken Pox

- Day 0: Exposure
- Day 10-21: Symptoms begin
 - Fever, fatigue, headache
- Day 12-23: Rash begins
 - Highly pruritic, vesicular -> scabs
 - Present for 5-10 days
 - Often starts on scalp and face

Varicella = Chicken Pox



Image Source: Mayo Clinic



Image Source: Skin Deep

Varicella = Chicken Pox

- Contagious

- 1-2 days prior to rash onset
- Until all lesions are scabbed over
- Basic reproduction number: 10-12

- Complications

- Bacterial soft tissue infections
- Pneumonia
- Encephalitis, cerebellar ataxia
- Hemorrhagic complications
- Sepsis
- Dehydration

Varicella = Chicken Pox

- Two doses of the vaccine are ~90% effective
- Regimen:
 - 1st dose: 12-15 months
 - 2nd dose: 4-6 years



Image Source: CDC

PERTUSSIS

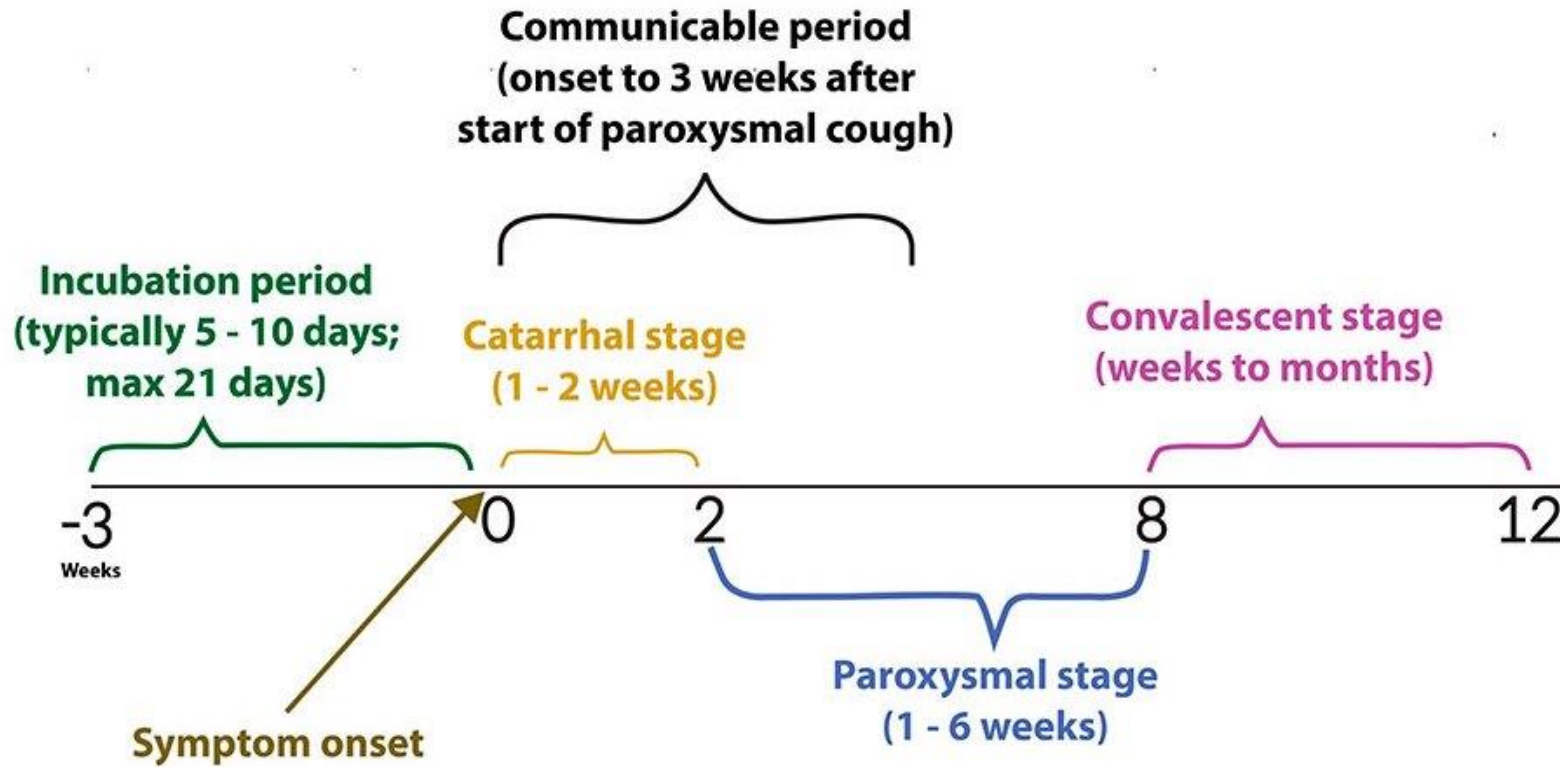
Bordetella pertussis

Pertussis = Whooping Cough



- Day 0: Exposure
- Day 5-10: Symptoms begin
 - Stage 1: Catarrhal
 - 1-2 weeks
 - Stage 2: Paroxysmal
 - 1-6 weeks
 - Stage 3: Convalescent
 - Weeks to months

Pertussis Disease Progression



cdc.gov/pertussis



The timeline shows the typical clinical course of pertussis in weeks.

Pertussis = Whooping Cough

- Contagious:
 - Respiratory droplets
 - BSN = ~5.5
 - Public health challenge
- Complications:
 - 1/3 of patients are hospitalized
 - Apnea and pneumonia are most common
 - Many others including otitis media, urinary incontinence, syncope, encephalopathy, pneumothorax, seizures, rib fractures

- When to treat? Assess for 4 clinical characteristics:
 - Paroxysmal cough
 - Post-tussive emesis
 - Inspiratory whoop
 - Absence of fever

Pertussis = Whooping Cough

- DTaP:
 - 2, 4, 6 months
 - 15-18 months
 - 4-6 years
- Tdap:
 - 11-12 years
- Vaccine schedule is the same as Diphtheria
 - However, there are no recommendation for booster doses against Pertussis with exception of pregnant individuals
 - Waning immunity beyond 2-4 years

MUMPS

Mumps

- Day 0: Exposure
- Day 12-25: Symptoms begin
 - Fever
 - Headaches
 - Myalgias
- 1-2 days later: Parotitis begins
 - 75% bilateral involvement
 - Swelling peaks in 1-3 days and subsides over a week

Mumps



Image Source: CDC



Image Source: Merck Manual

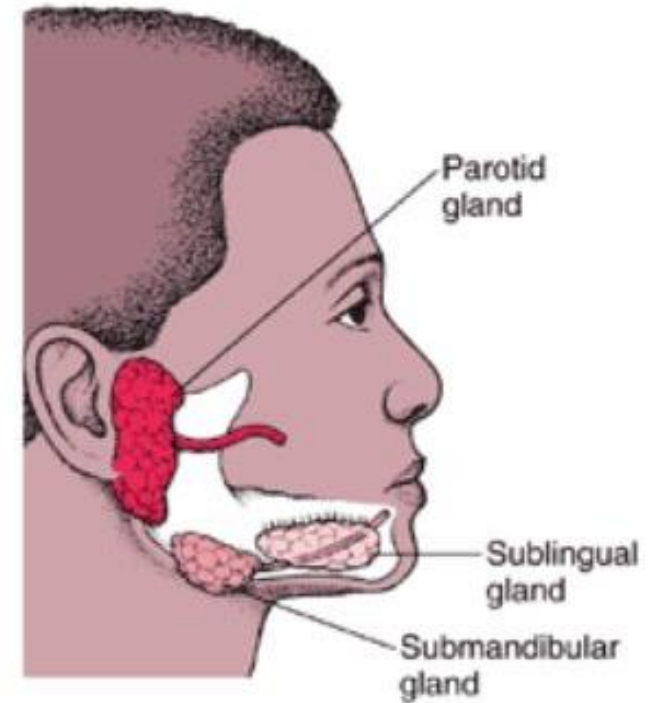


Image Source: CDC

Mumps

- Contagious:
 - 2-3 days before parotitis begins + 5 days after it begins = ~9 days total
 - Respiratory droplets
 - Basic reproduction number = ~4-7
- Complications
 - Orchitis
 - Oophoritis
 - Mastitis
 - Meningitis
 - Encephalitis
 - Pancreatitis
 - Hearing loss

Mumps

- One dose of the MMR vaccine is ~72% effective against mumps
- Two doses is ~86% effective
- CDC recommends children should routinely get 2 doses of MMR vaccine:
 - First dose at age 12 through 15 months
 - Second dose at age 4 through 6 years (before school entry)

Not Eliminated, Still Vaccinate

- *Haemophilus influenzae*
- Pneumococcal
- **Meningococcal ACWY/B**
- Human papillomavirus
- Tetanus
- **Hepatitis A/B**
- **Respiratory syncytial virus**
- **Rotavirus**
- **Influenza**
- **COVID**

2026 Updates

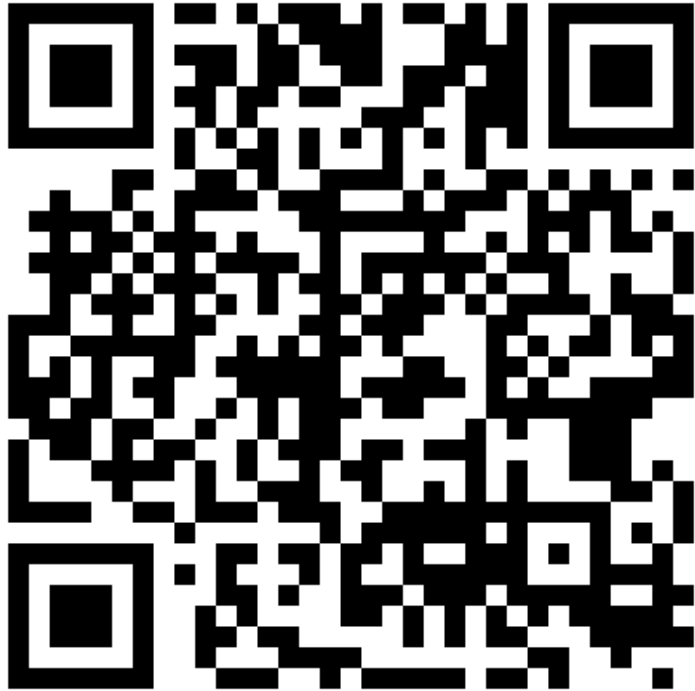
Always ask!

Is this patient vaccinated?



Thank You!

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AFTER THE CONVENTION

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