



This is an official DHEC Health Advisory

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10528-DHA-08-23-2022-POLIO

Potential for the Resurgence of Vaccine Preventable Diseases

Summary

The South Carolina Department of Health and Environmental Control (DHEC) is sending this Health Advisory to increase awareness about reported polio in New York State and the potential for the resurgence of polio and other vaccine preventable diseases contributed to by a decline in childhood vaccination coverage that indicates the need for enhanced efforts to maintain recommended vaccination coverage.

Background

On July 18, 2022, the New York State Department of Health (NYSDOH) notified CDC of the detection of poliovirus type 2 in stool specimens from an unvaccinated immunocompetent young adult from Rockland County, New York with no history of travel. The patient experienced acute flaccid weakness following symptoms of fever, neck stiffness, gastrointestinal symptoms, and limb weakness. The patient was hospitalized with possible acute flaccid myelitis (AFM). Vaccine-derived poliovirus type 2 (VDPV2) was detected in stool specimens. Additionally, related Sabin-like type 2 polioviruses have been detected in wastewater samples (originally collected for SARS-CoV-2 wastewater monitoring) in the patient's county of residence and in neighboring Orange County up to 25 days before and 41 days after the patient's symptom onset.

Polio viruses are transmitted from person to person through the oral and fecal-oral route. Virus enters through the mouth and multiplies in the throat and gastrointestinal tract. Virus may be excreted in nasopharyngeal secretions for 1–2 weeks and in stools for 3–6 weeks, even in people who develop no symptoms after infection. Worldwide polio vaccination campaigns have been successful in achieving near eradication of polio globally. The last U.S. case of polio caused by wild poliovirus occurred in 1979. However, imported disease may still occur. Anyone who is not vaccinated against polio is at risk of infection if exposed to someone infected with wild polio virus or vaccine-derived polio from the oral polio vaccine used in other countries.

The occurrence of the New York State case (the second identification of community transmission of poliovirus in the United States since 1979), combined with the identification of

poliovirus in wastewater in the case's county of residence and in a neighboring county, indicated community transmission of vaccine-derived polio virus and underscores the importance of maintaining high vaccination coverage to prevent paralytic polio in persons of all ages.

Maintaining recommended vaccination coverage is needed to maintain herd immunity which also protect those who are ineligible for vaccinations due to age or medical conditions. Decreasing rates for routine childhood vaccinations create the potential for the resurgence of vaccine preventable diseases and outbreaks of varicella, pertussis, measles and other diseases. South Carolina data from the 45-day School Immunization Assessment shows that the percent of school children with a valid immunization certificate decreased from 98.1% in 2014-2015 to 95.7% in 2021-2022. For highly transmissible diseases like measles, large outbreaks have occurred in populations with less than 95% coverage. Additionally, in recent years, exemptions from school vaccination requirements have increased in South Carolina. During the past 8 years, the percentage of children in South Carolina public and private K12 schools with a religious exemption has trended upward for the last four years with the most marked increase occurring from 2020 to 2021, the most recent data available. The number of exemptions has nearly tripled from about 5,826 students in the 2014- 2015 school year to about 15,964 students in the 2021-2022 school year, an increase of approximately 10,000 students.

Guidance for Providers

- Providers of vaccinations for children are encouraged to use every medical appointment as an opportunity to review patients' vaccination status and recommend the maintenance of routine vaccination schedules. Health care providers play the most important role in promoting vaccination and ensuring its acceptance by parents and patients. Many studies have indicated that a strong recommendation by a health care provider is a powerful motivator for patients to agree to receive immunizations. A recommendation from a health care provider remains the number one reason parents decide to vaccinate.
- Only the inactivated polio vaccine (IPV) is available in the United States. IPV contains the 3 serotypes, which are grown in Vero cells or human diploid cells and inactivated with formaldehyde. IPV is also available in combinations with other childhood vaccines.
- Be familiar with vaccination and exclusion requirements for vaccine preventable diseases in persons attending school and childcare.
- Immediately report any minor illness followed by the onset of asymmetric acute flaccid paralysis with areflexia, affecting proximal muscles more than distal muscles, to your regional Public Health Office as per the [South Carolina List of Reportable Conditions](#).

Reference

Link-Gelles R, Lutterloh E, Schnabel Ruppert P, et al. Public Health Response to a Case of Paralytic Poliomyelitis in an Unvaccinated Person and Detection of Poliovirus in Wastewater — New York, June–August 2022. *MMWR Morb Mortal Wkly Rep* 2022;71:1065-1068.

Resources for Additional Information

DHEC: <https://scdhec.gov/health/vaccinations/childcare-school-vaccine-requirements>

CDC: <https://www.cdc.gov/healthywater/surveillance/wastewater-surveillance/wastewater-surveillance.html#how-wastewater-surveillance-works>

CDC: <https://www.cdc.gov/vaccines/imz-managers/coverage/schoolvaxview/data-reports/index.html>

CDC: <https://www.cdc.gov/vaccines/vpd/polio/public/index.html>

DHEC contact information for reportable diseases and reporting requirements

Reporting of **Poliomyelitis** is consistent with South Carolina Law requiring the reporting of diseases and conditions to your state or local public health department. (State Law # 44-29-10 and Regulation # 61-20) as per the DHEC 2022 List of Reportable Conditions available at:

<https://www.scdhec.gov/sites/default/files/Library/CR-009025.pdf>

Federal HIPAA legislation allows disclosure of protected health information, without consent of the individual, to public health authorities to collect and receive such information for the purpose of preventing or controlling disease. (HIPAA 45 CFR §164.512).

Regional Public Health Offices – 2022			
Mail or call reports to the Epidemiology Office in each Public Health Region			
MAIL TO:			
<u>Lowcountry</u> 4050 Bridge View Drive, Suite 600 N. Charleston, SC 29405 Fax: (843) 953-0051	<u>Midlands</u> 2000 Hampton Street Columbia, SC 29204 Fax: (803) 576-2993	<u>Pee Dee</u> 1931 Industrial Park Road Conway, SC 29526 Fax: (843) 915-6506	<u>Upstate</u> 352 Halton Road Greenville, SC 29607 Fax: (864) 282-4373
CALL TO:			
<u>Lowcountry</u> Allendale, Bamberg, Beaufort, Berkeley, Calhoun, Charleston, Colleton, Dorchester, Hampton, Jasper, Orangeburg Office: (843) 441-1091 Nights/Weekends: (843) 441-1091	<u>Midlands</u> Aiken, Barnwell, Chester, Edgefield, Fairfield, Kershaw, Lancaster, Lexington, Newberry, Richland, Saluda, York Office: (888) 801-1046 Nights/Weekends: (888) 801-1046	<u>Pee Dee</u> Clarendon, Chesterfield, Darlington, Dillon, Florence, Georgetown, Horry, Lee, Marion, Marlboro, Sumter, Williamsburg Office: (843) 915-8886 Nights/Weekends: (843) 409-0695	<u>Upstate</u> Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, McCormick, Oconee, Pickens, Spartanburg, Union Office: (864) 372-3133 Nights/Weekends: (864) 423-6648
For information on reportable conditions, see https://www.scdhec.gov/ReportableConditions		<u>DHEC Bureau of Communicable Disease Prevention & Control</u> Division of Acute Disease Epidemiology 2100 Bull St • Columbia, SC 29201 Phone: (803) 898-0861 • Fax: (803) 898-0897 Nights / Weekends: 1-888-847-0902	

Categories of Health Alert messages:

Health Alert	Conveys the highest level of importance; warrants immediate action or attention.
Health Advisory	Provides important information for a specific incident or situation; may not require immediate action.
Health Update	Provides updated information regarding an incident or situation; unlikely to require immediate action.
Info Service	Provides general information that is not necessarily considered to be of an emergent nature.