Hello, I hope you are having a healthy and happy summer so far this year. While summer can typically be time to slow down and relax, the Indiana State Department of Health has been busier than ever.

The State Health Department Office of Minority Health celebrated the 29th year of the INShape Indiana Black and Minority Health Fair in July. Check out page 9 for more information about the annual event at the Indiana Black Expo Summer Celebration.

In June, local, state and national leaders gathered together in Indianapolis and discussed ways on how we can help the next generation be tobacco-free. We were honored to have special guest speaker, Acting U.S. Surgeon General Boris Lushniak, M.D. See page 2 for more details about his visit.

The State Health Department team is always looking for ways to improve services and that includes making our publications even better. I ask that you please take a short survey and give us your feedback about this newsletter. It will take less than 5 minutes and it will help us serve you and your needs better.

Make sure to check out the special section on Middle East Respiratory Syndrome (MERS) starting on page 3. MERS, a potentially fatal viral respiratory illness, was identified in Indiana in April. Indiana was in the national spotlight as it was the first case of MERS in the United States.

I couldn’t be more proud of the outstanding work of my colleagues at the State Health Department. Our team in collaboration with Community Hospital in Munster did a fantastic job in identifying, containing and informing the public regarding this outbreak! We couldn’t have done it without all of our local and federal partners as well, so thank you to each and every person and organization who contributed to this outstanding effort.

Go out and make a difference!

William C. VanNess II, M.D.
State Health Commissioner
Fewer Hoosiers are Smoking than in Past

Local, state and national leaders met earlier this summer to discuss tobacco control and cessation efforts in Indiana and across the United States. Hosted by the Indiana State Department of Health’s Tobacco Prevention and Cessation Commission and State tobacco control partners, the “2014 Partner Information X-Change: Not Another 50 Years,” took place at the Marriott East in Indianapolis.

Dr. VanNess announced to attendees that the Indiana’s adult smoking rate has decreased to 21.9 percent in 2013. This is a decrease from 25.6 percent in 2011.

Special guest, Acting U.S. Surgeon General Boris D. Lushniak, M.D., M.P.H., discussed the 50th Anniversary of the Surgeon General's Report. In 1964, the first federal government report linking smoking and poor health, including lung cancer and heart disease, was released, laying the foundation for tobacco control efforts in the U.S.

“Smokers today have a greater risk of developing lung cancer than they did when the first Surgeon General’s report was released in 1964, even though they smoke fewer cigarettes,” said Dr. Lushniak. “How cigarettes are made and the chemicals they contain have changed over the years, and some of those changes may be a factor in higher lung cancer risks. Of all forms of tobacco, cigarettes are the most deadly – and cause medical and financial burdens for millions of Americans.”

Topics at breakout sessions for attendees included strategies on how to accelerate the decline of tobacco use among Indiana’s most vulnerable populations and how to confront emerging products, industry marketing strategies and their public health implications.

During the closing session, individuals shared stories of how tobacco has affected their lives. Ellie Nicholas, ad participant from the Centers for Disease Control and Prevention’s (CDC) Tips From Former Smokers campaign, spoke about the negative impact that secondhand smoke has had on her life, eventually forcing her to quit her job as a bartender.

Quitting smoking is the single most important thing that a person can do to protect his or her health. The Indiana Tobacco Quitline is a free service to help Hoosiers quit smoking. Call 1-800-QUIT-NOW or visit www.QuitNowIndiana.com.

New Master of Public Health to focus on Health Disparities

Learn more and apply at www.UIndy.edu/health-sciences/mph

As of July 30, 2014,

12,324 individual records have been accessed

and 47,926 PINs issued by providers!

Learn how to access your vaccination records at www.MyVaxIndiana.in.gov
On May 2, 2014, the first case of Middle East Respiratory infection (MERS) was confirmed in the United States. The traveler, a U.S. citizen, came to northwestern Indiana from Saudi Arabia, via London and Chicago. MERS is a viral respiratory illness that is relatively new to humans and was first reported in Saudi Arabia in 2012.

On June 23, 2014, Governor Mike Pence made a special visit to the State Health Department to thank employees. Pictured (L-R): Mark Glazier, Amanda Turney, Lee Christenson, Amy Reel, Ken Severson, Dana Greenwood, Debbie Beers, Janet McCutchan, Governor Pence, Billy Brewer, Ray Beebe, Stephanie Dalenberg, Stephanie Dearth, Courtney Hamilton, Brian Pope, Jamie Yeadon-Fagbohun, Susan Henry, Lixia Liu, Donna Allen and Dr. VanNess.

Not pictured: Jim Huston, Joan Duwve, Judy Lovchik, Pam Pontones, Jennifer Brown, Shawn Richards, Kevin Thompkins, Michelle Sandoval, Steve Allen, Yvonne Alexander, Mary Hawn, Omar Perez, John Lee, Ruth Boston and Randy Snyder.

“Thank you to staff at the State Health Department and partners for your time and commitment in investigating and containing this outbreak. A special thanks also goes to the CDC, Lake County Health Department and Community Hospital in Munster.”

- State Health Commissioner Dr. VanNess
**Timeline of Events**

**Wednesday, April 30**

- State Health Department Lab receives call from Community Hospital in Munster, Indiana requesting specimen submission for MERS testing.

**Thursday, May 1**

- State Health Department Lab identifies specimen as positive for MERS and overnights sample to the CDC for confirmation.

- State Health Department Leadership and partners hold call to discuss next steps.

_Pictured (clockwise): Randy Snyder, John Hill, Amy Reel, Jim Huston, Dr. VanNess and Judy Lovchik._

**Friday, May 2**

- CDC holds a national telebriefing to inform the public that MERS has been confirmed in a patient in the U.S.

- Representatives from the CDC arrive in Indiana to assist in the investigation.
Saturday, May 3
• State Health Department Call Center opens at 8 a.m.; remains open throughout outbreak.

Monday, May 5
• Governor Pence, the CDC team, Dr. VanNess and Community Hospital in Munster host news conference to update status of patient, announce there are no additional cases and discuss ongoing investigation.

Ongoing
• CDC works with Indiana, Illinois and others to conduct the disease trace investigation and contact individuals who may have been exposed.

Friday, May 9
• Patient is released from the hospital after multiple tests from the State Laboratory and CDC confirm negative MERS results. Patient is considered recovered and cleared to travel if necessary.
Stephanie Dearth, supervisor of the State Health Department Virology Lab, listened to her voicemail at work on April 30. It was from Community Hospital in Munster requesting Middle East Respiratory Syndrome (MERS) testing. Recognizing the urgency, Stephanie immediately returned the call and sent an email to alert the State Health Department Respiratory Epidemiologist about the request. Within an hour, the test request was authorized and a teleconference was held with the State Lab, Epidemiology and Public Affairs offices, the CDC and the hospital. The specimens were scheduled to be delivered to the State Laboratory for testing the next morning.

When she told me the news, I had goose bumps. I realized this may be the first MERS case in the U.S. The weight of the situation was also felt by Dr. Omar Perez, the director of clinical microbiology. It was determined that the most experienced senior microbiologist, Jamie Yeadon-Fagbohun, would be the best choice to run the test. Jamie, who was known for her high quality work, had over five years of experience at the Lab. She had worked on the response to the H1N1 pandemic, the discovery of novel H3N2v and many other high-profile outbreak investigations. She had worked under pressure before, but nothing like this.

Immediately after the arrival of the patient’s swab, Jamie took the specimens to the bioterrorism suite where she put on her protective gown and respirator and began processing the specimens. She wiped all the surfaces that the specimens might come into contact with and took every precaution to prevent potential carryover. Around noon, Jamie resurfaced from the bioterrorism suite, her face reddened by the pressurization in the lab and her respirator.

By 3 p.m. that afternoon, the test runs were completed. After carefully reviewing the test results, Stephanie and Omar came to my office. They told me that the serum sample was positive for all three genetic markers detected by the screening and confirmatory tests. As much as I was prepared for a positive result, I was still shocked to hear it.

The perceived pressure earlier in the day turned into real pressure that was building with every thought of the potential impact. The lab team – Jamie, Stephanie, Omar and I – met again to review the testing details such as how the samples were arranged in the run, where the controls were situated, etc. With all possible errors ruled out, the team was confident in the results and ready to share the news with the rest of the nation. As planned, the specimen was shipped to the CDC lab for final confirmation of the MERS results.

The State Health Department, Community Hospital and various CDC teams reconvened by several telephone conference calls to plan the response actions based on the public health lab’s test results. The response plan would be executed as soon as CDC’s confirmatory test results were made available, which was scheduled to occur Friday afternoon.

The wait felt like eternity. Finally, the confirmation email from CDC arrived and I read the following: “CDC confirms Indiana MERS on 5/2/2014 at 1:30 p.m.”

While it was not good news to hear that MERS had made its way into the U.S., it was extremely validating to know that our team quickly and successfully accomplished the task at hand. I was very proud of my colleagues. I also knew that our work had just begun. Soon, more specimens would be sent to the labs and our quick, safe and accurate testing would be critical in the effort to detecting and containing MERS.

Read the original narrative at the Association of Public Health Laboratories blog.
On May 2, 2014, the Centers for Disease Control and Prevention (CDC) and the State Health Department announced the first North American case of Middle East Respiratory Syndrome (MERS), a potentially fatal viral respiratory illness. MERS first appeared in the Arabian Peninsula in 2012 and has since appeared in some European countries from individuals who traveled to the Middle East. CDC oversaw the national and international outbreak investigation and provided a great deal of support to partner agencies at the local and state level, including to the State Health Department in the ways mentioned below. The Indiana State Department of Health is truly grateful to CDC and all of our partners for the open communication and support.

Confirmed Lab Results
The CDC was able to confirm positive laboratory results for MERS within 24 hours of the specimen being sent. Results were confirmed by CDC on May 2.

Deployed an Epi-Aid Team to Indiana
Immediately following a request for assistance from State Epidemiologist Pam Pontones, CDC deployed an Epidemiology Aid Team to Indiana to assist in investigation and communication for the case. The team was invited on the evening of May 1 and arrived in Indianapolis for a meeting with the State Health Department the afternoon of May 2, the same day the results were confirmed by CDC. By that evening, the team was in Munster and at the hospital the following morning. The team consisted of several experts including: Medical Epidemiologist Danny Feikin, M.D., Dave Daigle, Associate Director of Communications for Public Health Preparedness and Response, Nora Cohen, M.D., Division of Global Migration and Quarantine and Epidemic Intelligence Service Officers Nora Chea, M.D., MSc, Kimberly Pringle, M.D. and Lucy Breakwell, Ph.D., M.S.P.H.

Provided Technical Support and Coordination
In addition to conducting the international and national investigation, the CDC coordinated at least daily calls with all partners involved to share information and discuss next steps. These frequent calls were an essential component in preventing the spread of MERS among the community and medical professionals. CDC continually shared guidance and technical support with the State Lab, media team and epidemiologists.

Provided Media Support
Alerting the public about the case in a timely and accurate manner was critical. To achieve this, CDC worked closely with the State Health Department, the hospital and others to work out the details for a national telebriefing, which was hosted on May 2, shortly after the laboratory results were confirmed. Dave Daigle, along with members of the CDC communications team back in Atlanta, GA, provided the State Health Department with information about the virus, guidance and communicated directly with members of the media. CDC, the State Health Department and the hospital’s communications firm, Borshoff, worked closely on messaging throughout the investigation. All partners worked together to hold a press conference with comments from Governor Pence, Dr. VanNess, the hospital and CDC. The press conference, held May 5, had over 175 reporters in attendance via online or in-person.
Joe Fistrovich became the Chief Financial Officer in May. His previous position was Controller with the State Budget Agency where he also served as acting Chief Financial Officer for the Criminal Justice Institute and the Office of Faith Based and Community Initiatives. Joe has worked as Chief Financial Officer for the Department of Correction. He has extensive knowledge of financial management and has been with the State for 25 years. Joe received his Master of Science at Purdue University and his Bachelor of Arts at Wabash College.

Lee Christenson became the Director of the Public Health Preparedness and Emergency Response Division in January. Lee has nearly 15 years of experience in the emergency management field and has served in various capacities within the Division for the past six years. He has a Bachelor of Science from Indiana University, a Master of Science in Public Safety from Indiana University-Purdue University Indianapolis and is a Certified Emergency Manager through the International Association of Emergency Manager’s.

Laura Chavez became the Director of the Office of Women’s Health in June. She previously worked for HealthNet, Inc. in both direct service and supervisory capacities for nearly nine years. Laura continues to teach parenting education classes in a supplementary capacity. She received her Bachelor of Arts in Psychology from the University of Indianapolis. Laura earned her Master of Public Health from Benedictine University, with a certificate in Health Promotion and Education. She is also a Certified Lactation Counselor.

Katie Gatz became the Director of the Trauma and Injury Prevention Division in May. She previously served as the Division Trauma Registry Manager for two and a half years. Katie also served as Interim Division Director. Before joining the State Health Department, Katie worked at Frito-Lay as a front line supervisor for a year and a half. She earned her Bachelor of Science in Industrial Engineering from Purdue University.

Eden Bezy became Director of the Division of Nutrition and Physical Activity in March. Prior to becoming director, Eden worked in the Maternal and Child Health Division administering substance use and smoking cessation programs for pregnant women. Before working at the State, Eden worked for the Marion County Public Health Department in a direct service program for pregnant and parenting teens. She earned her Master of Public Health from the Fairbanks School of Public Health in Indianapolis with a concentration in Health Policy. Eden earned her Bachelor of Science in Dietetics from Indiana University.

Brian Carnes became the Director of the Office of Vital Records in March. He previously served the past two years as the Director of Trauma and Injury Prevention and Director of Legislative Affairs before that. Prior to joining the State Health Department eight years ago, he was the Deputy Communications Director at the Family and Social Services Administration. Brian graduated from Ball State University with a Bachelor of Science in both Political Science and Public Relations and holds a Master’s degree in Public Administration from Indiana State University.

Jennifer Brown became the State Public Health Veterinarian in April. She has worked as an Epidemic Intelligence Officer at the CDC, as an associate veterinarian at a small animal hospital in northern Virginia and most recently, as a public health veterinarian at the largest local health department in Colorado. Dr. Brown has a Bachelor of Science in Biology from Indiana University, a Doctor of Veterinary Medicine (DVM) from Purdue University and a Master of Public Health in infectious disease epidemiology from the University of North Carolina-Chapel Hill. She was board certified by the American College of Veterinary Preventive Medicine in 2009.

Would you like to work for the State Health Department? Search for employment opportunities at www.in.gov/spd
Attendees at Health Fair Received Free Screenings

The 2014 INShape Indiana Black and Minority Health Fair took place from Thursday, July 17 to Sunday, July 20 during the annual Indiana Black Expo Summer Celebration. Themed “Be Active, Healthy and Happy,” the health fair marked its 29th year.

Attendees this year were able to receive more than $1,000 worth of free exams and screenings. Screenings included blood pressure, glucose, cholesterol, body mass index, hearing screening, foot screening, addiction, prostate and dental.

Additionally, staff offered body health analysis, stroke assessment and HIV testing. Attendees participated in healthy activities such as food demonstrations, fitness-oriented activities, education sessions, videogames, dancing and more. The INShape Indiana Black and Minority Health Fair, which is one of the largest events of its kind, serves nearly 25,000 people each year.

The event is sponsored by the State Health Department with support from Indiana Black Expo, Inc., Community Health Network, WISH-TV and other valued sponsors. The goal of the health fair is to improve the health of underserved and racial and ethnic minority populations of the region.

For more information about the State Health Department office of Minority Health, visit www.minorityhealth.isdh.in.gov.

What is chikungunya virus?
Chikungunya virus is a disease that is transmitted to people by mosquitoes.

What are the symptoms?
Most people exposed to chikungunya will develop symptoms. Chikungunya does not often cause death, but the symptoms can be severe. The most common symptoms are high fever and severe joint pain. Other symptoms may include headache, muscle pain, joint swelling or rash. Most patients feel better within one week, but the joint pain can persist for months in some cases. People who develop these symptoms after traveling to the Caribbean or other areas where chikungunya is found should contact a health care provider immediately.

How can I protect myself?
Take precautions against mosquito bites at home and while traveling. While the chikungunya risk for Hoosiers who have not traveled to the Caribbean is low, State health officials recommend the following to protect against mosquito-borne viruses like West Nile virus and St. Louis Encephalitis:

• Avoid places where mosquitoes are biting;
• Apply insect repellent containing DEET, picaridan or oil of lemon eucalyptus to clothes and exposed skin;
• Install or repair screens on windows and doors to keep mosquitoes out of the home; and,
• When possible, wear pants and long sleeves, especially if walking in wooded or marshy areas.

For more information, visit www.cdc.gov/chikungunya.

Several Hoosiers, who recently traveled to the Caribbean, have tested positive for the chikungunya virus. Transmitted by mosquitoes, chikungunya has been found in multiple Caribbean countries since December 2013. Cases have been identified in travelers returning from the Caribbean, but local transmission has not been identified in the United States.
**Awards**

Sally Petty, Tobacco Control Coalition Coordinator for Daviess County Tobacco Prevention and Cessation Coalition, received the Joy of Smokefree Air Award from the State Health Department Tobacco Prevention and Cessation Commission. Sally received the award for her inspiring work on tobacco control.

**Dr. Judy Lovchik**, Assistant Commissioner, Public Health Protection and Laboratory Services, State Health Department, was elected president of the Association of Public Health Laboratories for next year.

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**Public Health Happenings**

(For more information about a specific event, please use the specific email address listed.)

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**August**

7  Indiana Cancer Consortium District 9 Coalition meeting, whitney@indianacancer.org

8  Indiana State Trauma Care Committee, tbarrett@isdh.in.gov

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**September**

10  State Health Department Executive Board meeting, tbarrett@isdh.in.gov

10  Injury Prevention Advisory Council meeting, kgerz@isdh.in.gov

For more information on these and other state events, visit the State of Indiana events calendar at [http://www.in.gov/core/calendar.html](http://www.in.gov/core/calendar.html)

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The Indiana State Department of Health promotes and provides essential public health services.

Public Health Matters is a free publication that is published electronically every quarter by the State Health Department Office of Public Affairs. For questions, to submit an article or topic, contact Amanda Turney at aturney@isdh.in.gov.