

PROVIDER UPDATE

News from your local Health Department

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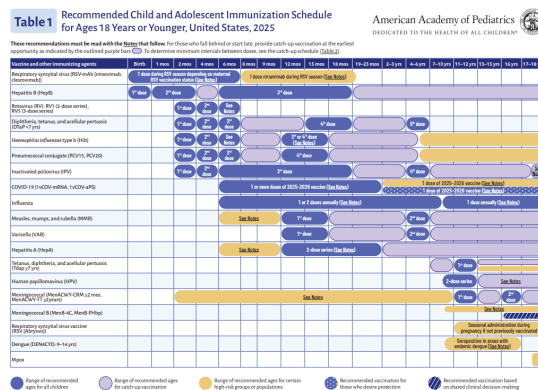
Year to Date CD Report

Vaccine Recommendations

As fall and winter respiratory virus season begins, several vaccines are available to reduce illness, hospitalizations, and deaths. With the changes made earlier this year at the Federal government level in how vaccine recommendations are considered and made by the ACIP and the CDC, I think it is important to review the current recommendations of the leading national medical organizations and MDHHS. These are the recommendations that I will be using in my agency standing orders as well as for our communications.

Both the American Academy of Pediatrics (AAP) and the American Academy of Family Physicians (AAFP) have put out their own evidence-based Immunization Schedules. Many other medical groups, including the American College of OB/GYN (ACOG) and the American College of Physicians (ACP), are also now making or endorsing these recommendations that may differ from the CDC. These recommendations are consistent with FDA approval and reflect the scientific consensus regarding the safety and benefits of immunization.

In general for all routine vaccines, the Health Department will be following and recommending the [AAP Child and Adolescent Immunization Schedule](#) and the [AAFP Schedules for Adults](#). Please familiarize yourself with these guidelines.



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Anaplasmosis

Anaplasmosis, caused by *Anaplasma phagocytophilum* and transmitted by the blacklegged tick (*Ixodes scapularis*), continues to emerge in northern Michigan. Providers should maintain a high index of suspicion during tick season, as symptoms are often nonspecific (fever, headache, myalgia, malaise, GI symptoms) and lab findings may include leukopenia, thrombocytopenia, and elevated liver enzymes. Prompt treatment with doxycycline is critical and should not be delayed while awaiting lab confirmation.

Local Case Counts (2025):

- Benzie-Leelanau District Health Department (BLDHD): 27 cases (up from 10 cases last year)
- District Health Department no. 4: 2 cases (0 cases reported last year)
- Health Department of Northwest Michigan (HDNW): 3 cases (0 cases reported last year)



The majority of cases present between late spring and early fall. Providers are encouraged to consider anaplasmosis in patients with compatible symptoms and recent outdoor exposure, even if a tick bite was not noted. Early testing (PCR during the first week of illness, or paired serology later) is important to confirm diagnosis and support surveillance efforts. However, treatment with doxycycline should not be delayed while awaiting results, as prompt therapy reduces the risk of severe disease.

References:

- [CDC Anaplasmosis](#)
- [CDC- Clinical Care of Anaplasmosis](#)
- [MDHHS Anaplasmosis](#)
- [MDHHS- Got a tick? Submit a pic!](#)

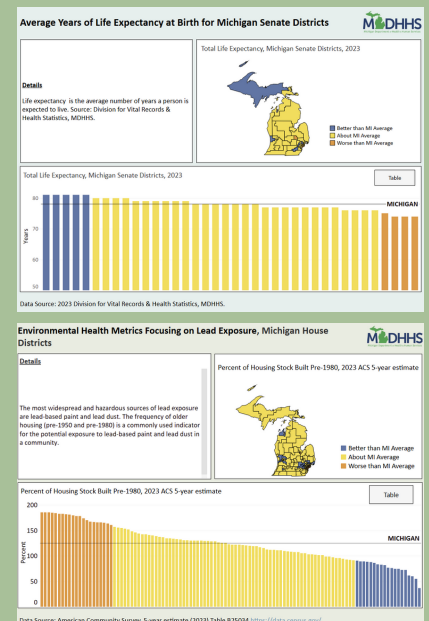
Michigan Public Health Data Dashboards

The Michigan Public Health Data Dashboards provide public health community profiles at the legislative district level. The two dashboards include information for Michigan Senate districts and for Michigan House districts. Our service region comprises of Senate District 32, 36, and 37. Additionally, our service region at the house level comprises District 103, 104, 105, 106, and 107.

Detailed information, methodology and definitions for each public health metric, including the currently available timeframe of data, can be found directly in the dashboards. These public health metrics include data on HIV&STI, Immunizations, Social Determinants of Health, Lead Health Metrics, Opioid Overdose Deaths, Life Expectancy, Birth Metrics, Death Metrics and Premature Deaths.

The dashboards will be updated by MDHHS as new data becomes available for each metric to provide a comprehensive and up-to-date view of public health across the state.

[Click Here to View Dashboards](#)



Breastfeeding Resources for Your Patients



Providers can connect new parents with their local health department for breastfeeding guidance and ongoing resources, helping families establish and sustain breastfeeding successfully.

One of the programs offered is the [Healthy Futures](#). A partnership, Munson Medical Center and local health departments work together to support breastfeeding families in northern Michigan. This collaboration ensures families receive seamless care from the hospital to the community, with access to lactation consultants, education, and follow-up support.

Hearing and Vision Program

Michigan's Hearing and Vision programs have been in place since 1949, screening over 1 million children annually. As required by the Public Health Code, children must be screened during preschool (ages 3-5) and again before entering kindergarten.

These screenings are FREE for all Michigan children through local health departments. Each year, more than 87,000 children are referred to eye care professionals or physicians for follow-up care, ensuring early identification and treatment of potential issues.

No child is too young to be screened. Upon diagnosis, immediate treatment increases the likelihood of remediating temporary difficulties and preventing them from becoming permanent problems.

To maintain program funding and demonstrate the effectiveness of Michigan's Hearing and Vision Screening Programs, it is essential to submit documentation confirming diagnosis, medical intervention, and treatment recommendations.

When a child is identified with a hearing or vision concern, your role is critical in ensuring timely referral to appropriate specialists. Your partnership helps to provide effective care and support for Michigan's children.

For more information on Michigan's Hearing and Vision Screening Programs click [here](#).

Gun Safety



To help protect Michigan families, especially children, a new firearm safety law went into effect February 13, 2024. Public Act 17 of 2023 require firearms to be unloaded and secured with a locking device or stored in a locked container or lockbox when not in use, particularly when it is reasonably known that a minor may be present in the home.

Providers are encouraged to help raise awareness about this law to promote safety in the communities they serve.

Gun safety in the home is just as important as gun safety outside of the home. With hunting season underway, especially in Northern Michigan, it's important to remind patients about the risks associated with lead ammunition, both for personal safety and public health.

Key Concerns:

- Lead exposure from ammunition: Lead bullets and shots are a major source of environmental contamination. Tens of thousands of tons are released annually during recreational hunting and shooting.
- Human health risks: People who eat wild game harvested with lead ammunition may unknowingly consume tiny fragments of lead that cannot be seen or felt when chewing.
- Vulnerable populations: Lead is especially harmful to developing bodies and nervous systems. Exposure during pregnancy or nursing can pass lead to the fetus or infant through the placenta or breast milk.

Populations Most at Risk:

- Young children and infants who consume venison
- Fetuses
- Nursing babies

For more information see:

- [Lead Bullets and Venison](#)
- [DNR: Lead Poisoning in Wildlife](#)

Recommendations for Patients:

Providers can help reduce risk by advising:

- Avoidance of venison harvested with high-velocity lead bullets for patients who are pregnant, nursing, can become pregnant, or under age 6.
- Choosing whole cuts like steaks and chops over ground venison, which has a higher likelihood of lead contamination.
- Avoiding organ meats from wild game due to potential chemical accumulation.
- Using non-lead ammunition, such as copper bullets or shotgun slugs, which significantly reduce lead contamination.

Choose ammunition that will not leave lead fragments in the meat.		
Worst	Better	Best
Rapidly expanding bullet. - Ballistic tip. - Soft point.	Shotgun slug. Muzzleloader bullet. Non-exposed lead core bullet.	Copper bullet. Lead-free bullet.
These bullets leave the most lead fragments in the meat. The lead can be found throughout the meat, not just along the wound channel.	These fragment much less due to slower velocity, higher mass or a metal completely covering the lead. However, there is still some risk of lead fragments.	Copper and lead-free bullets leave no lead in the meat.

Emergency Preparedness

Emergency Preparedness is often something that our clients may not always think of. It is important to remind residents of how they can protect their health in an emergent situation.

Disability intersects every demographic group, there are people with disabilities of all ages, races, sex or national origin. And, disabilities can impact a person in a variety of ways, both visible and invisible. For people with disabilities and their families, it is important to consider individual circumstances and needs to effectively prepare for emergencies and disasters.

If you have clients who need electricity for medical equipment, offer guidance on power outages and ensuring their equipment is still able to function properly. Providers may also ask for their patients to be put on a list for priority power restoration.



For more information on emergency preparedness, visit www.ready.gov

Arbovirus Report

In Michigan, reported human arbovirus cases for 2025 are up to 40 as of October 10. Outbreaks of WNV have been occurring in Michigan every summer since 2002. Urban areas in Southeastern Lower Michigan and Western Lower Michigan have historically seen the most WNV activity, but notably of the 35 cases reported to date 2 were from Emmet County. Five people have tested positive for Jamestown Canyon virus (JCV) - from Alcona, Macomb, Ogemaw, Roscommon, and Washtenaw counties.

Also, of note locally is that one horse in Benzie County has tested positive for Eastern Equine encephalitis (EEE) along with several birds that have tested positive for WNV in Northern Michigan.

JCV is an arbovirus that can cause human disease. Symptoms can include fever, headache and fatigue. The virus can also cause a more severe disease including encephalitis. There are no vaccines to prevent or medicines to treat JCV. In the United States, an average of 23 JCV neuroinvasive disease cases are reported each year (2011-2022). There is significant under-diagnosis and under-reporting of less severe cases of JCV, therefore, reported neuroinvasive disease cases are used to compare trends over time and place. Most JCV cases occur from April through September, with the virus being found throughout much of the United States. Minnesota and Wisconsin have reported more than half of all cases, historically.

The most effective way to avoid reduce the risk of arboviral disease is by preventing mosquito bites. Families can protect themselves when outdoors by using insect repellents proven safe and effective.

Those registered with the EPA contain one of these active ingredients:

- DEET
- Picaridin
- IR3535
- Oil of lemon eucalyptus (OLE) or para menthane-diol (PMD)
- 2-undecanone

For parents with babies and children, always follow instructions when applying insect repellent and in general do not use insect repellent on babies younger than two months old. The best way to apply insect repellent on a child's face is to spray the repellent directly onto your hand and then apply it to a child's face.

Another way to prevent mosquito bites is to control mosquitoes inside and outside of homes by maintaining screens on windows and doors, eliminate stagnate water that can breed mosquitoes, and keeping grass cut short and shrubs trimmed.

For more information see:

- [Michigan West Nile Virus Homepage](#)
- [CDC: Jamestown Canyon Virus](#)

January 1st- September 30th, 2025

2025 Communicable Disease Report

for
Health Departments of
Benzie-Leelanau, District No. 4,
and Northwest Michigan

Counties Include:

Benzie
Leelanau
Alpena
Cheboygan
Montmorency
Presque Isle
Antrim
Charlevoix
Emmet
Otsego

Disease Group	Disease	BLDHD	DHD no 4	HDNW
COVID19/MIS	Novel Coronavirus COVID-19	63	424	459
Foodborne	Campylobacter	4	15	21
Foodborne	Cryptosporidiosis	1	1	0
Foodborne	Giardiasis	4	1	1
Foodborne	Listeriosis	0	1	0
Foodborne	Norovirus	2	1	0
Foodborne	Salmonellosis	2	12	14
Foodborne	Shiga toxin-producing Escherichia coli --(STEC)	0	3	4
Foodborne	Shigellosis	0	2	0
Foodborne	Yersinia enteritis	2	2	4
Influenza	Flu Like Disease*	710	42	3040
Influenza	Influenza	74	279	255
Influenza	Respiratory Syncytial Virus	0	4	13
Meningitis	Meningitis - Aseptic	1	0	2
Meningitis	Meningitis - Bacterial Other	1	1	1
Meningitis	Streptococcus pneumoniae, Inv	3	11	9
Other	Blastomycosis	0	2	0
Other	CPO	0	2	1
Other	Candida auris	0	2	1
Other	Coccidioidomycosis	0	3	0
Other	Cryptococcosis	1	0	0
Other	Cyclosporiasis	1	0	1
Other	Gastrointestinal Illness	219	12	0
Other	Head Lice	20	0	50
Other	Histoplasmosis	1	11	0
Other	Legionellosis	0	3	1
Other	Strep Throat	29	0	190
Other	Streptococcal Dis, Inv, Grp A	2	5	4
Other	Unusual Outbreak or Occurrence	2	1	0
Other	VISA	0	0	1
Rabies	Rabies: Potential Exposure & PEP	10	60	80
STD	Chlamydia (Genital)	27	56	67
STD	Gonorrhea	3	2	7
STD	Syphilis - Early Latent	1	0	2
STD	Syphilis- Secondary	1	0	1
STD	Syphilis - Unknown Duration or Late	0	2	2
Tuberculosis	Latent Tuberculosis Infection	1	0	10
Tuberculosis	Nontuberculous Mycobacterium	0	5	3
VPD	Chickenpox (Varicella)	0	1	3
VPD	H. influenzae Disease - Inv.	0	6	2
VPD	Mumps	0	1	0
VPD	Pertussis	9	2	3
VPD	Shingles	2	0	3
VPD	VZ Infection, Unspecified	1	1	1
Vectorborne	Anaplasmosis	27	2	3
Vectorborne	Ehrlichiosis, all types	1	1	0
Vectorborne	Encephalitis, California Serogroup	1	0	0
Vectorborne	Lyme Disease	72	14	44
Viral Hepatitis	Hepatitis A	0	1	0
Viral Hepatitis	Hepatitis B, Acute	0	3	0
Viral Hepatitis	Hepatitis B, Chronic	0	2	5
Viral Hepatitis	Hepatitis C, Acute	0	1	0
Viral Hepatitis	Hepatitis C, Chronic	2	13	14
	Total	1300	1013	4322



Dr. Joshua Meyerson serves as the Medical Director for three local health departments in northern Michigan: Health Department of Northwest Michigan, Benzie-Leelanau District Health Department, and District Health Department No. 4.