An Update on Public Health Issues for MTs

- Not possible to do a thorough update in 90 minutes...
- We will do a brief review of the traditional discussions
  - Herpes
  - Hepatitis
  - Flu
  - HIV/AIDS
- We will introduce some emerging and re-emerging infections
  - MRSA, VRE, VRSA
  - C-diff
  - Ebola
  - Measles
  - Pertussis (whooping cough)
  - Chikungunya
  - Dengue fever

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- Herpes simplex
  - Viral (not bacterial)
  - Highly communicable
  - Blisters on a red base
    - Mouth/face
    - Elsewhere
  - "Autoinoculation" is possible, not frequent
Biggest issues for MTs
- What to do if your client arrives with an active lesion?
- (You probably already have it)

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- Hepatitis (A through G)
  - Viruses that attack the liver
  - Loss of liver function
  - Jaundice
  - Malaise
  - LOTS of other symptoms...
  - Long-term risk of chronic liver disease (cirrhosis, failure, cancer)
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Hepatitis A
- Oral-fecal contamination,
- Most extreme symptoms (short term)
- Contaminated food, houseflies...
- About 30% test positive
- Best prognosis for full recovery
- Vaccine available

Hepatitis B
- Blood borne (sex, needles, contaminated tattoo and piercing equipment)
- Super-resilient virus
- Subtle symptoms
- 95% spontaneously resolve
- 5% become long-term carriers, at risk to develop chronic liver disease
  - Cirrhosis, liver failure, liver cancer
- Vaccine is available

Hepatitis C
- Blood borne (needles, etc.)
- Can take decades to develop symptoms
- 25% spontaneously resolve
  - 75% at risk for chronic liver disease
  - (75% of 3.1 million = 200k+)
- No vaccine
- Treatment can be extremely taxing and expensive
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- Biggest issues for MTs:
  - Maintain standard precautions

- Questions for clients:
  - How are you managing your infection?
  - How do the medications affect you?

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- Flu
  - Influenza
    - 200,000 hospitalizations/year
    - 23,000-50,000 deaths/year
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- Type A Flu
  - Most virulent
  - Mutates easily
  - Named for proteins in viral coat:
    - Hemagglutinin (15+ types)
    - Neuraminidase (9+ types)

Seasonal flu
- Usually H2N2 or H3N1
- Fall through Spring

“Swine flu”
- H1N1
- International outbreak in 2009
- Most virulent among young adults (not typical)
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- “Avian flu”
  - H5N1
  - From wild to domestic fowl—easy transmission
  - Hard to get from birds to people—high mortality rate
  - REALLY hard to get from people to people
    (This could change in an instant)

Biggest issues for MTs

- Stay healthy
- Be aware that flu can be contagious after crisis has passed
- What happens when a sick-ish person gets massage?
  (informed consent)
- How will you make adjustments?
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HIV/AIDS
- HIV = human immunodeficiency virus
- AIDS = acquired immune deficiency syndrome
- Being HIV+ ≠ having AIDS
- AIDS is identified with specific IS markers

HIV/AIDS continued
- HIV slowly dismantles IS response, leading to indicator diseases
- The biggest controversy now is when to begin treatment
  - HAART

For MTs, the biggest issues are...
- Who is most at risk for getting sick in this interaction?
- How do the infection and meds impact your quality of life?
  - GI pain
  - Neuropathy
  - Fatigue
  - Insomnia
  - Isolation
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- Antibiotic resistant bacteria
  - MRSA (methicillin-resistant staph aureus)
    - Several subtypes
    - Inside and outside hospitals
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VRSA
- Vancomycin-resistant staph A
  - So far rare, but reported in US and Europe
  - Low level antibiotics may be effective (for now…)

VRE
- Vancomycin-resistant enterococci
  - Bacteria that live in the gut; very hard to fight off
  - In health care settings

Clostridium difficile (C-diff)
- Bacterial infection of the colon
  - Can be fatal (dehydration through diarrhea)
  - Antibiotic treatment can make it worse
    - Infection recurs often
    - Fecal transplants

Ebola
- Virus, may incubate 2-21 days
  - Person is contagious only when symptoms develop
  - Spread through contact with a sick or dead person’s fluids (including saliva, mucus, vomitus, etc)
  - NOT airborne, insect-borne, water-borne
  - High mortality rate
  - Treatment options are limited at this point: supportive therapy
  - Vaccine in development

Sharing isn’t always caring.
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- Dengue fever
  - Virus with mosquito vector
  - Leads to “leaky” capillaries
    - Ascites, pleural effusion
    - Can be fatal
  - In tropical areas
    - Puerto Rico
    - Florida

- Chikungunya
  - Virus with mosquito vector
  - Seen in Americas in 2013
  - Fever and joint pain, can be dangerous in children

- Re-emerging infections
  - Pertussis (whooping cough)
    - Can be fatal in babies, debilitating in others
    - Vaccine needs a booster after 10-15 years
    - 48,7 k cases in US in 2012

  - Measles (rubeola)
    - Can be fatal in children
    - 600 reported cases in US in 2014
    - More than 3 x previous year
Conclusion:
- Knowledge is the best defense
- Be a source of accurate information
  - Follow the science
  - Stay healthy!

Thank you!

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