

ISSUE 19

NOVEMBER/
DECEMBER
2023

JUST THE FACTS

A MONTHLY NEWSLETTER FROM YOUR
METRO HEALTH CLINICIAN AMBASSADORS



**METROPOLITAN
HEALTH DISTRICT**

MONTHLY HIGHLIGHTS

Nov. 5-11: National Diabetes Education Week

Whether your patient is at risk for Type 2 diabetes or has already received a diagnosis, Metro Health can help with three different types of NO COST workshops to the Greater San Antonio/Bexar County area:

Prevent T2

The PreventT2 curriculum is for individuals seeking to prevent or delay Type 2 Diabetes. This curriculum promotes modest weight loss (5%-7% of current weight if overweight or obese) and increased physical activity through a 12-month lifestyle change program. The lifestyle change program curriculum emphasizes self-monitoring, self-efficacy, and problem-solving. The workshop sessions are 1 hour and progress from weekly to bi-weekly and monthly over 12 months.

Viva Health/Health & Wellness

Developed in collaboration with Metro Health's Community Nutrition program, this curriculum offers a broad overview of nutrition, physical activity, stress management and goal setting. It is a tool for those looking to prevent or delay chronic disease, better manage symptoms of chronic disease and/or just broaden their knowledge of health, wellness and nutrition. It is also a great resource for loved ones and caregivers of those with chronic disease. The workshop series includes 1½-hour sessions once a week for seven weeks. Participants who complete the entire series are eligible to receive a \$20 H-E-B Gift Card.

Diabetes Garage Self-Management for Men

The Diabetes Garage is a curriculum designed to address diabetes disparities among Hispanic/Latino and racial minority men. It is a tailored diabetes education and support curriculum that uses automotive maintenance comparisons to improve men's interest and engagement in diabetes education programs. The goal is to improve and maintain the health of men living with diabetes, by providing a space where men can talk about diabetes with other men. The series includes 2-hour sessions that occur once a week for four weeks. Participants who complete the entire series are eligible to receive a \$20 H-E-B Gift Card.

Our staff will contact the referred patient and follow up with you and your organization on their status. Refer patients by clicking [here](#). Individuals also can self-enroll by calling (210) 207-8802 or visiting the DiabetesHelpSA website [here](#).

It's vital to highlight that Bexar County consistently surpasses the state of Texas in diabetes hospitalization and diabetes amputation rates, with males significantly more affected than females. Additionally, diabetes mortality rates for Black and Hispanic males are twice that of White males, and for females in these groups, nearly three times higher.

Diabetes Health Fair

In honor of American Diabetes Month, join Metro Health's Diabetes Prevention and Control Team for a diabetes health fair on Wednesday, Nov. 15, from 4:00 PM to 7:00 PM at the Frank Garrett Multi-Service Center. This event aims to raise awareness about the serious consequences of diabetes and spotlight the wealth of resources and services available in San Antonio for diabetes prevention and management.



December 1: World AIDS Day

December 1st is [World AIDS Day](#), which commemorates its 35th anniversary this year. This global event underscores the ongoing threat of HIV and AIDS worldwide. It serves as a moment for reflection, honoring those we have lost, and recognizing advances in dismantling barriers to care and eradicating HIV-related stigma. The theme for this year, "World AIDS Day 35: Remember and Commit," encourages collective remembrance and steadfast dedication to this cause. According to CDC.gov, 52% of all new HIV diagnoses were in the South, including Texas, and each case is one that could possibly have been prevented. The vast majority (about 80%) of new HIV infections in the U.S. are transmitted from people who either do not know they have HIV, or are not receiving any HIV care. We can do our part by:

- Routinely testing everyone at least once between the ages of 13 and 64, and testing people with certain [risk factors](#) annually.
- Creating a stigma-free environment in our offices and hospitals. Read guidelines from the End Stigma End HIV Alliance of San Antonio [here](#).
- For people who test positive, encouraging treatment initiation within 7 days ("Rapid Start"). A list of participating clinics is [here](#).
- Wearing a red ribbon on Dec. 1-3 as a symbol of commitment to this cause, and to show the world that you stand against HIV stigma.
- Exploring CDC's HIV Nexus page for clinicians [here](#).

Want to learn more about how you can help your patients protect themselves from HIV? [Schedule an appointment](#) for your team with a Clinician Ambassador to learn more about HIV Pre-exposure Prophylaxis (PrEP), which is over 99% effective in preventing HIV transmitted through sex. PrEP is safe, effective and recommended with an A grade by the [US Preventive Services Task Force \(USPSTF\)](#) for adults and adolescents at risk for HIV.

Wednesday, Nov. 15, 9:00 AM to 4:00 PM - HIV & SUD Virtual Symposium

Join UT Health San Antonio for their 4th Annual HIV & SUD Virtual Symposium. This free event will focus on integrated care to support complex disease management and will target health care workers and community members to support essential comprehensive care. Featured topics include HIV and SUD Data, Maternal Health and Infant Feeding, SUD and Cognitive Health, and HIV and Transactional Work.



[Register Here](#)



Tuesday, Dec. 19, 11:00 AM - 12:00 PM - Opiate Use Disorder and HIV

The New England AIDS Education & Training Center is offering a series of seminars to all providers on topics of interest and importance to the care and management of patients with HIV. Sandy Springer, MD, will present on Opiate Use Disorder and HIV.

[Register Here](#)



Tuesday, Jan. 9, 12:00PM – 2:00PM - What You Need to Know About Trans and Gender-Diverse People | Session 1: Understanding Gender Diversity

This session will introduce gender diversity and provide an overview of relevant terms and concepts. We'll define and discuss sexual orientation, gender identity, and the appropriate use of language and pronouns. Attendees will explore the importance of prioritizing gender-diverse people in our public health and health equity work.

[Register Here](#)



American Academy of Pediatrics Respiratory Season Webinar Series

– These free webinars provide important clinical updates and helpful information for clinicians on a range of topics in the wake of the new RSV prevention products, and updated COVID-19 vaccines. The page also lists timestamps to help busy providers find the most pertinent information quickly. Visit www.aap.org to view the available webinars.

Mental Health & HIV - This is a free recorded presentation from the New England AIDS Education & Training Center that provides an overview of the intersection of mental health problems and HIV infection. It includes both clinical care approaches and barriers to care integration. It highlights the important roles all health care providers play in addressing the mental health needs of their patients. Click [here](#) to register to view it.

Diabetes is Primary (DIP) CE Certificate Program 2023 – This free online educational program from the American Diabetes Association for primary care professionals is designed to help increase knowledge and strategies to improve patient outcomes. This course is based on the American Diabetes Association (ADA) Standards of Care in Diabetes. The program includes 9 CE modules and is available until Nov. 30. Enroll [here](#).

UT Health San Antonio's Overdose Prevention Key Updates & Refresher Trainings

Sign up for an upcoming live Zoom training to learn more about factors and trends that lead to overdose and the newest information on overdose prevention. Registration required. Continuing Education available.

Live on Zoom (Please do not register for more than one date.)

[November 14 12:00-12:30 PM CST](#)

[December 12 12:00-12:30 PM CST](#)

[November 29 12:00-12:30 PM CST](#)

[December 19 12:00-12:30 PM CST](#)

[December 6 12:00-12:30 PM CST](#)



SA KIDS B.R.E.A.T.H.E.

Metro Health's SA Kids B.R.E.A.T.H.E. program hosted its first-ever Asthma Day event Oct. 7 at the Frank Garrett Multi-Service Center on the City's near West Side. The two-hour event provided children enrolled in the program with unique, engaging asthma education, along with additional program support for their parents, in a community setting, and attracted nearly two dozen parents and children.

UT Health-San Antonio medical students Ruoxan Su and Heyji Ro conducted most activities, some of which were designed or suggested by former Northeast ISD Asthma Educator Diane Rhodes. Metro Health Asthma Educator and Supervisor Paul Kloppe delivered training on how to use inhalers, deploying humor that delighted the crowd.

Children made balloon models to help them visualize the expansion of a healthy lung versus an asthmatic one. The children also crawled through two red plastic tunnels that represented airways. The first was free and clear, to represent a healthy airway, while the second tunnel was narrower and had obstacles in it, representing an unhealthy airway with constriction, inflammation, and mucous buildup – they had difficulty getting through this tunnel. This activity was a big hit! At other stations, attendees got to experience the different pathways that air travels through healthy and asthmatic lungs, and they learned to identify asthma triggers.

In addition to snacks and drinks, each child received an SA Kids B.R.E.A.T.H.E. backpack.



HEALTH NEWS

CDC Issues Nirsevimab Shortage Advisory

On Oct. 23, the CDC issued a Health Advisory for clinicians about ongoing supply limitations of nirsevimab for preventing RSV in infants. The advisory offers options for safeguarding infants against the virus during this respiratory season. CDC recommends prioritizing the available supply of nirsevimab 100 mg. doses for infants under 6 months of age, as they are at the highest risk for severe RSV. No changes were made to the recommendations for the 50 mg. dosing. Providers were advised to avoid using two 50 mg. doses for infants weighing more than 5 kg. (11 lbs.) to ensure availability for infants weighing less than 5 kg. Furthermore, providers were asked to suspend the use of nirsevimab in [palivizumab-eligible children](#) aged 8-19 months for the 2023-2024 RSV season and provide these children with palivizumab, per recommendations of the American Association of Pediatrics (AAP). For additional information and to access the complete alert, please click [here](#).



Helpful AAP resources are linked below:

- [Practice Readiness Checklist](#): Use this checklist to assess your practice's readiness to administer nirsevimab to patients.
- [Nirsevimab Implementation Guide](#): Use this guide as you roll out nirsevimab to patients.
- [Nirsevimab Administration Visual Guide](#): Use this algorithm/guide to help determine if and what dose is needed for administration.
- [Immunization Information Statement](#): Provide this VIS-like information to parents/caregivers when administering nirsevimab.
- [Coding Guidance](#): Find information about the CPT codes for nirsevimab and its administration, including coding vignettes.
- [Nirsevimab FAQs](#): Find answers to common questions about nirsevimab and administering it to patients. This page also includes a link to submit unanswered questions.

How to Support Mental Health in Health Workers

Health workers who responded to a nationally representative [survey](#) reported more days of poor mental health and were more likely to report burnout in 2022 than in 2018, preceding the COVID-19 pandemic. Health workers experienced larger declines in mental health than did other essential workers during the pandemic. Positive working conditions, such as trust in management and supervisor help, were associated with lower odds of poor mental health symptoms and burnout.



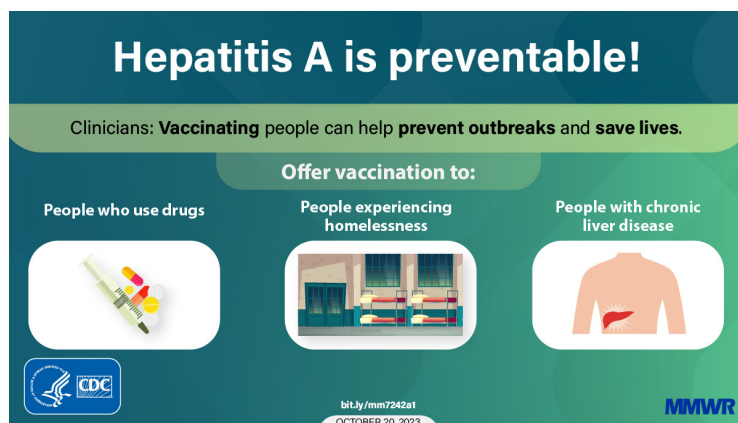
The National Institute of Occupational Safety and Health (NIOSH) has developed a campaign to support healthcare workers called Impact Wellbeing, a social marketing campaign to provide resources for modifying working conditions to improve mental health. Some of the recommendations include “worker participation in decision making, supportive supervision, and increasing psychological safety for help-seeking... and burnout prevention training for supervisors.” Read the article [here](#).

Looking for resources for improving health and wellbeing of health care workers in your workplace? Check out this resource from [NIOSH](#) called [Fundamentals of Total Worker Health \(R\) Approaches: Essential Elements for Advancing Worker Safety, Health, and Wellbeing](#), a workbook for better worker health. Additionally, CDC offers a curated list of workplace suicide prevention and response resources [here](#).



Hepatitis A Outbreaks on the Rise

Recent Hepatitis A outbreaks show Hepatitis A vaccines are still not reaching adults at the highest risk of infection, and the consequences can be deadly. Nearly twice as many Hepatitis A-related deaths were reported from 2016–2022, compared to 2009–2015, according to the CDC, which reviewed data from 27 states. Increased Hepatitis A vaccination coverage, particularly among adults at increased risk for infection or severe disease from infection, is critical. Read the article [here](#).



Pentavalent Meningococcal Vaccine: Use Shared Decision-Making

On Oct. 26, the CDC Director allowed the new Men**ABCWY** vaccine to be used in limited scenarios where both Men**ACWY** and Men**B** are recommended for the same visit. These scenarios include:

1. Healthy individuals aged 16–23 years (routine schedule) when shared clinical decision-making favors administration of MenB vaccination.
2. Individuals aged 10 years and older at increased risk of meningococcal disease (e.g., persistent complement deficiencies, complement inhibitor use, or functional or anatomic asplenia) who are due for both vaccines

Protection from the MenB vaccine wanes within a couple of years, so it is usually given just before young adults enter a congregate setting such as college or the military. The MenACWY booster dose, in contrast, is recommended at age 16. Additionally, brands are not interchangeable for the 2-dose MenB series, and it is more reactogenic than the MenACWY vaccine.

Additionally, the CDC Director approved the [Recommended Child and Adolescent Immunization Schedule, United States, 2024](#) and the [Recommended Adult Immunization Schedule, United States, 2024](#).

Texas Leads in Dropping Children from Medicaid

According to the Kaiser Family Foundation's tracker, Texas is the state with the highest percentage of children disenrolled from Medicaid coverage with the end of the Public Health Emergency. About 68% of the 917,000 people who lost coverage were children, and 73% were dropped due to procedural reasons such as missed deadlines and backlogs in processing. If you are looking for ways to assist your patients with re-enrollment or finding health care coverage, you can refer them to 2-1-1 or 1-800-252-8263. Other re-enrollment assistance resources include:

- UHS Connecting Kids to Coverage: [Online](#) or (210) 358-3350
- Health Collaborative Pathways to Coverage: [Online](#) or (210) 761-3420
- If someone is no longer eligible for Medicaid, now is the time to apply for an Affordable Care Act plan. People can get free in-person help from EnrollSA by making an appointment [online](#) or calling 210-997-7997. For reproductive health care, people can try [Healthy Texas Women](#), the [Family Planning Program, Title X](#) and the [Breast and Cervical Cancer Services](#) Program.

State of Texas reports on the end of continuous Medicaid coverage can be found [here](#).



More Children Hospitalized for Flu Last Season

During the 2022-23 influenza season, medical visits and hospitalizations among 5- to 17-year-olds were higher than in the previous five seasons. Significantly, fewer children and adolescents hospitalized for influenza in 2022–23 had been vaccinated. Furthermore, the rate of influenza antiviral medication treatment for pediatric hospitalizations was lower than in pre-COVID seasons, underscoring the importance of timely antiviral treatment. CDC recommends the annual seasonal influenza vaccine for all individuals aged ≥ 6 months. Antiviral treatment is recommended as early as possible (preferably within 2 days of symptoms) for any patient with confirmed or suspected influenza who is hospitalized; has severe, complicated, or progressive illness; or is at higher risk for complications, such as children under 2 years old and children of any age with certain chronic health conditions like asthma, diabetes, or heart or lung disease. To read the CDC report, click [here](#). For influenza vaccine resources, click [here](#). For CDC guidance on influenza antivirals, click [here](#).



DoxyPEP Public Comment Period Ends Nov. 16

The CDC signaled on Oct. 2 that it will soon issue guidance promoting Doxycycline Post-Exposure Prophylaxis (DoxyPEP) to prevent bacterial sexually transmitted infections (STIs). This approach benefits the health of individuals at higher risk of STIs, including gay, bisexual, and other men who have sex with men, and transgender women. These updated clinical guidelines for healthcare providers will shape the use of DoxyPEP to prevent bacterial STIs. Click [here](#) for an informational presentation from the CDC on the proposed guidelines, including an overview of relevant randomized trials, and click [here](#) to read the guidelines. You may submit comments until Nov. 16 [here](#) online.

MPOX

Mpox Vaccine OK'ed for Routine Use

The mpox vaccine recently was approved for routine use on a 14-0 vote by CDC's Advisory Committee on Immunization Practices (ACIP) and by the CDC Director. At-risk individuals ages 18 and older can now get the 2-dose mpox vaccine as a routine part of their sexual health care. This broadens the vaccine's previous use, which had been limited to outbreak situations.

For CDC guidance on the mpox vaccine, click [here](#) for basics and [here](#) for administration information. For Vaccine Information Statements and other resources, click [here](#). Mpox vaccines continue to be available to patients at the Metro Health STI Clinic at 512 Highland Blvd, Ste 150. Appointments are no longer required.

STOMP Trial

Have a patient looking for mpox treatment with TPOXX? Patients can readily access it through the STOMP trial at UT Health San Antonio. STOMP is a NIAID-funded clinical trial to evaluate the effectiveness of the antiviral tecovirimat, also called TPOXX, for the treatment of human mpox infection. People can self-enroll by visiting stomptpoxx.org/main. For more information, providers can visit clinicaltrials.gov/ct2/show/NCT05534984.

Contact information:

University of Texas San Antonio Clinical
Research Site
7703 Floyd Curl, Dr,
San Antonio, TX 78229
210-567-4823

COVID CORNER

Updated 2022-2023 COVID vaccines are making their way through distribution channels, including a traditionally formulated protein-based vaccine (Novavax) in addition to mRNA vaccines (Moderna, Pfizer). Everyone can still obtain COVID vaccines at no out-of-pocket cost. People without insurance or people who are uninsured can use the Bridge Access Program, with participating major pharmacies listed at Vaccines.gov, and local independent pharmacies listed at CovidAccess.com. The Bridge Access Program will expire by Dec. 31, 2024. People without any health insurance also can use this [COVID-19 vaccine popup locator](#) to find a popup location near them. People who are underinsured, meaning they have health insurance that does not cover the full cost of the vaccines, will need to use a Bridge Access site that is in-network. People with health insurance can use any in-network provider to receive the vaccine without any co-pay or deductible.

Updated Interim Clinical Considerations for COVID-19 Vaccines

CDC recently published updated [COVID-19 vaccine recommendations and interim clinical considerations](#) for people 6 months and older. Key changes included:

Age Transitions:

- If a person moves to an older age group between vaccine doses, provide the vaccine product and dosage for the older age for subsequent doses. However, for children who transition from age 4 years to 5 years, and for children who are moderately or severely immunocompromised and transition from age 11 years to 12 years, the FDA allows an alternative dosage (click [here](#) and see footnotes section). Providers do not need to report these vaccinations to the Vaccine Adverse Event Reporting System.

Interchangeability of COVID-19 Vaccines:

- Administration of COVID-19 vaccine doses from different manufacturers may be considered in some cases (click [here](#) to see more).

COVID CORNER

Click [here](#) for a Checklist of Current Versions of U.S. COVID-19 Vaccination Guidance and Clinical Support Tools, which is updated at least monthly and posted beneath the Key COVID-19 Vaccine Resources. Click [here](#) and [here](#) for the CDC's updated COVID-19 Vaccination Recommendation Infographic.

Few High Risk Adults Up to Date with COVID Vaccine

Only 23.5% of adults aged over 65 received a bivalent COVID vaccine, according to a recent [Morbidity and Mortality Weekly Report](#), yet this age group constitutes 62.9% of all COVID-related hospitalizations and approximately half of all ICU admissions. This same demographic accounted for nearly 90% of all in-hospital COVID-19 deaths from January-August 2023. The study also found that nearly all individuals hospitalized for COVID-19 in this age group had two or more comorbidities, a risk factor that quadruples the risk of hospitalization.

Further, bivalent [COVID-19 vaccination uptake was lowest in long-term care](#) (LTC) facility residents in the South and Southeastern U.S., particularly among Black/African American and multiracial residents. This mirrors the broader vaccination challenges in the southeastern U.S., characterized by low vaccination coverage and high vaccine hesitancy. In light of these findings, clinicians should continue counseling patients to stay up to date with COVID-19 vaccinations, especially among patients at high risk for complications and hospitalization. Patients should also receive counseling on risk reduction strategies, such as masking and seeking early treatment with ritonavir-boosted nirmatrelvir or remdesivir. Patients can create a personal plan of action for COVID-19 using this [COVID-19 Personal Plan Worksheet](#).

Updated COVID-19 vaccines are available at most retail pharmacies and at popup locations around the city. Visit the [Metro Health COVID-19 Vaccination](#) page or www.vaccines.gov to find a convenient location for your patients. You can combat COVID-19 misinformation with tools found [here](#) and [here](#). You can find a collection of helpful links for long-term care providers for the respiratory virus season, [here](#), and an FAQ [here](#).

COVID-19 Vaccination by the Numbers

Just 7.1% of US adults ages 18 and older and 2.1% of children (6 months to 17 years) reported receiving the updated 2023-2024 COVID-19 vaccine since it was recommended in September, according to the National Immunization Survey. Receipt of the most recent vaccine was most frequently reported among older adults with insurance and higher incomes. Intent to get children vaccinated was highest among higher income families making over \$75,000 annually. Just under 25% of adults indicated they would definitely get vaccinated, while 37.6% indicated they will probably or definitely not get the vaccine. Providers are encouraged to continue offering vaccines at their worksites, and to participate in vaccines.gov. View the slides [here](#).

Looking for Long COVID Resources?

Long COVID Clinics in San Antonio:

UHS Long COVID Clinic (in-person & telehealth)
210-743-7192 or 210-450-6470

UT Health Post-Covid Recovery Clinic – 210-450-6470,
website: uthscsa.edu

Long COVID fact sheet for patients: [English](#) | [Spanish](#)

Don't turn back
the clock on
preventive care:
**Be Vaccine
Confident**



#VaccineConfident

Ask Your Clinician Ambassadors

Q: How can I stock and administer pediatric COVID vaccines?

A: CDC is working with the American Academy of Pediatrics and manufacturers to reduce supply issues and other barriers faced by pediatric care providers. For example, providers can now order pediatric mRNA COVID-19 vaccines direct from the manufacturer, rather than through a distributor.

Clinicians also may hesitate to order mRNA vaccines due to concerns about cost and potential wastage once a vaccine is removed from ultra-low temperatures. To alleviate this concern, Pfizer now allows three-dose vials authorized for children ages 6 months-4 years to be returned either unopened or partially used at any time for a 100% refund, and returns will be processed within 60 days. (All other mRNA vaccines are provided in single-dose vials.)

For children ages 12 and older, Novavax may be a more convenient option, as it is stored at standard refrigerator temperatures. The 2023-24 version was only recently authorized, on Oct. 3, so expect supplies to ramp up over time.

One way to obtain vaccines at no cost is by participating in the Vaccines for Children program, which helps keep children in their medical home and serves our community's neediest; learn more [here](#).

While it's not common, even healthy children can become severely ill from COVID-19, particularly infants. According to CDC COVID-NET, 53% of children under 2 years old who were admitted to an ICU with COVID had no underlying conditions.

Do you have a burning public health question? You're not alone! Ask your Clinician Ambassador by sending an email to lucinda.zeinelabdin2@sanantonio.gov or diana.morales1@sanantonio.gov. We'd love to answer your questions and share valuable information with our clinician community.

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