



Epi Update for Friday, July 23, 2021

**Office of the Public Health Medical Director
Center for Acute Disease Epidemiology (CADE)
Bureau of HIV, STD, and Hepatitis**

Iowa Department of Public Health (IDPH)

Items for this week's Epi Update include:

- **At-home testing available via SHL, Test Iowa program**
- **Reporting at-home tests not performed at SHL**
- **Increases in early syphilis and congenital syphilis in Iowa**
- **Reminder: VAERS reporting following COVID-19 vaccination**
- **Mental health conditions among public health workers**
- **Meeting announcements and training opportunities**

At-home testing available via SHL, Test Iowa program

The Test Iowa program has recently transitioned from testing sites to an at-home testing model. Individuals can request a kit via the Test Iowa web site, or be directed to a nearby pick-up site. The specimen is collected and packaged at home, then sent to SHL via a prepaid UPS label. Results are provided within 24 hours of arrival at SHL.

For more information about the Test Iowa at-home testing program, visit www.testiowa.com.

Reporting at-home tests not performed at SHL

In addition to at-home tests provided via the Test Iowa program, at-home test kits are available by prescription or over the counter in pharmacies or retail stores. The public health reporting requirements vary, as follows:

- Results of at-home tests that are sent to a laboratory are required to be reported to public health by the laboratory.
- Results of at-home tests that provide immediate results provided with a health care provider supervising remotely should be reported to public health by the health care provider.
- Results of at-home tests with built-in electronic interfaces for reporting to public health will be received by IDPH.

Health care providers can report results from patients who used at-home testing at <https://redcap.link/HomeTestReporting>. This is not necessary for at-home tests sent to SHL for testing via the Test Iowa Program.

Increases in early syphilis and congenital syphilis in Iowa

Syphilis diagnoses are continually increasing in Iowa. There have been 174 cases of early syphilis so far in 2021, an increase of nearly 50% compared to the first half of 2020. Early syphilis is defined as the first three stages (i.e., primary; secondary; and early, non-primary, non-secondary stages). Persons in these stages are infectious and can transmit the bacteria sexually. Although multiple areas of the state are impacted, more than 40% of reported cases of early syphilis in 2021 have been recorded in Polk County.

It is important to remember that diagnostic testing is predominantly based on serology (antibody) assays, so persons may test negative early in the infection, even if they are infected. All persons exposed to someone with early syphilis within the last 90 days should be treated regardless of serological test results.

Iowa has also experienced significant increases in congenital syphilis. Five cases have met the case definition so far in 2021. One case was reported in all of 2020. Congenital syphilis is a serious condition in which a pregnant person passes the infection on to their fetus or newborn. Some cases result in stillbirth or neonatal death.

Congenital syphilis can be averted if pregnant persons are diagnosed and treated early. All pregnant persons should be tested for syphilis in their first trimester at their first prenatal visit. Repeat testing at 28-32 weeks gestation is also often advantageous, as it can detect infection acquired during pregnancy. If pregnant persons present late for prenatal care, they should immediately be tested for syphilis.

For complete STI treatment guidelines, visit www.cdc.gov/std/treatment/default.htm.

Reminder: VAERS reporting following COVID-19 vaccination

Health care providers are required to report to VAERS clinically significant adverse events after COVID-19 vaccination.

Included in the list of adverse events that must be reported following COVID-19 vaccination are cases of Multisystem Inflammatory Syndrome (MIS-A in adults, MIS-C in children), as well as cases of COVID-19 that result in hospitalization or death.

To view full reporting requirements, visit vaers.hhs.gov/faq.html.

Mental health conditions among public health workers

CDC recently published an MMWR highlighting increases in mental health conditions among public health workers during the COVID-19 pandemic. Among 26,174 surveyed state, tribal, local, and territorial public health workers, 53% reported symptoms of at least one mental health condition in the past 2 weeks. Symptoms were more prevalent among those who were unable to take time off or worked ≥ 41 hours per week. Implementing prevention and control practices that eliminate, reduce, and manage factors that cause or contribute to public health workers' poor mental health can help improve mental health outcomes during emergencies.

If you or someone you know needs support, please refer to Your Life Iowa by visiting yourlifeiowa.org, calling 855-581-811, or texting 855-895-8398. Your Life Iowa counselors are available 24/7 to offer support and resources.

Meeting announcements and training opportunities

On August 24th, the Iowa Public Health Association and Midwest Public Health Training Center are hosting a workshop, *Mental Health Needs of Iowa's Public Health Workforce: Beginning the Conversation*, in Des Moines. The workshop is geared toward public health directors, supervisors, and team leads. Space is limited to 60 participants. The goal is to help public health leaders gain insight and tools on how to lead the conversation with their teams. For more information, visit iowapha.wildapricot.org/event-4397302.

Have a healthy and happy week!

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