September 2018

Dear Colleagues:

As the weather cools and school resumes, all New Yorkers face seasonal health threats. I am writing to let you know about some important health messages we have shared recently with schools, pharmacies, and hospitals, and ask you to remind your patients about preventative health actions they can undertake.

**Epinephrine Recommendations:** With students returning to school, it is important that both children and adults who rely on self-injectable epinephrine products to reverse life-threatening reactions to bee stings or other allergens take precautions to ensure that they have access to epinephrine products.

Nationally, some communities have faced spot shortages of the availability of certain epinephrine auto-injectors. If you care for patients who rely on epinephrine, encourage them to check their auto-injectors and direct them to the [FDA list](https://www.fda.gov) of specific lots of 0.3 milligram auto-injectors that have extended expiration dates. Additionally, providers can remind families that they should store their auto-injectors at room temperature. Finally, providers may consult with families to discuss alternative options to auto-injectors, when appropriate.

**Synthetic Cannabinoids and Fentanyl:** Synthetic cannabinoids are also known as synthetic marijuana (although it often does not contain marijuana) or K2, and are often marketed under brand names meant to appeal to youth, such as Spice, Green Giant, AK-47, and Geeked Up. In 2017, 6% of high schoolers reported having used synthetic cannabinoids. As I am sure you are aware, opioid deaths are on the rise. Among youth, the percentage of high school students in New York who have reported using heroin or who have injected an illegal drug has more than doubled from 2005 to 2015. The presence of fentanyl in heroin compounds the potentially lethal effects.

As health care providers, you are positioned to continue to raise awareness about the danger of opioids and synthetic cannabinoids. The recently launched “You Can Be the Difference” campaign includes brochures and videos on prevention, treatment, and recovery services. Additionally, providers can become involved in quelling the devastating impact of the opioid epidemic by becoming qualified to treat their patients who are addicted to opioids or joining a buprenorphine mentorship program. More information on the waiver application and training may be found [here](https://health.ny.gov).

**Tick Precautions:** I would like to take this opportunity to remind you about the continued importance of taking measures to protect against ticks, as a new tick species has been found in the state. The *Haemaphysalis longicornis* tick, commonly known as the “Asian longhorned tick,” was discovered earlier this summer in multiple locations in Westchester and Rockland Counties, and on Staten Island. While the Asian longhorned tick has transmitted disease to humans in other parts of the world, more research is needed to determine whether this can happen in the United States. Ticks collected in the United States and tested so far have been free of human pathogens. Regardless, New Yorkers should continue to take steps to protect themselves, their children, and their pets against ticks and tickborne diseases that are present in New York State.
As the second wave of the tick season occurs in October and November, you may want to remind your patients that they should perform full body checks multiple times during the day to ensure no ticks are attached when working or spending time in wooded areas (such as after hunting or raking leaves). Additionally, patients should contact their health care provider immediately if they have been bitten by a tick of any kind and develop a rash or flu-like symptoms.

**Flu/Pneumonia:** Last winter, we were hit early and hard by the flu virus. At the peak of flu activity in the state, there were more than 18,000 laboratory-confirmed cases in a single week. By May, when I declared that the flu was no longer prevalent in New York, there had been 128,020 laboratory-confirmed cases of influenza reported and 23,317 people hospitalized with influenza. Among children, 20,704 children under the age of five had been diagnosed with lab-confirmed influenza and 1,543 were hospitalized. Sadly, there were also six pediatric influenza-associated deaths. As we approach a new flu season, I urge you to keep these numbers in mind when you discuss the flu vaccine with your patients. Even in seasons with less vaccine effectiveness, the flu vaccine remains our best protection against influenza. I would also like to encourage you to discuss pneumococcal disease vaccinations with your patients, particularly those over the age of 65. It is recommended that patients 65 years and older should be vaccinated with the PCV13 vaccine and a pneumococcal polysaccharide vaccine (PPSV23).

**PANS/PANDA:** This summer, my team met with concerned parents, health care providers and leading experts to discuss the lack of awareness of Pediatric Acute-onset Neuropsychiatric Syndrome (PANS) and Pediatric Autoimmune Neuropsychiatric Disorders Associated with Streptococcal Infections (PANDAS) and what treatment options may be available. The science is evolving surrounding PANS/PANDAS. Parents and caregivers may ask you questions about this condition. We will continue to track the emerging science on this topic. Providers can visit the National Institute of Mental Health’s website for more information and can refer parents to our updated webpage as well.

Finally, September is National Suicide Prevention Awareness Month. In our most recent data from 2014, 1,700 New Yorkers died by suicide. As deaths by suicide are increasing at an alarming rate, please take this opportunity to refamiliarize yourself with warning signs and risk factors for suicidal thoughts and behaviors. Health care providers can serve as a critical link for patients to life-saving mental health services.

Many providers feel unprepared to address behavioral health topics with patients. The upcoming Commissioner’s Medical Grand Rounds Series on October 3rd addresses the Integration of Primary Care and Behavioral Health and may provide key insights on how to tackle these issues. Registration for both in-person and live webcast attendance can be found here.

As always, thank you for the care that you provide to all New Yorkers and your attention to these critical matters.

Sincerely,

Howard A. Zucker, M.D., J.D.