

Update for Post-Acute Care Clinicians

January 2023



Mortality rates from COVID-19 among the elderly

A recent <u>Centers for Disease Control and Prevention report</u> showed that adults ages 65 years and older continue to have the highest COVID-related mortality rates. The COVID-related death rate among unvaccinated people who are 65 years and older has consistently been higher than the rate among vaccinated people.

Clinicians are best positioned to advocate for vaccination to help increase uptake. Some helpful tips to encourage vaccination can be accessed here:

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Updates

Invasive Group A streptococcal (iGAS) infections

Invasive Group A streptococcal infections include bloodstream infections, necrotizing fasciitis and toxic shock syndrome.

The CDC released a <u>HAN</u> on Dec. 22, 2022 notifying a possible increase in iGAS infections among children at a hospital in Colorado. Potential increases in pediatric iGAS cases in other states were subsequently noted. This increased number of pediatric iGAS cases in some jurisdictions has occurred in the setting of increased circulation of respiratory syncytial virus (RSV), influenza viruses, SARS-CoV-2 and other respiratory viruses.

Invasive Group A streptococcal infections are reportable in Indiana. Based on preliminary data, there was an increased number of such reports in all age groups in 2022.

Per the Indiana Communicable Disease Rule, providers, hospitals, and laboratories are required to report cases of invasive group A Streptococcus. Reports should be submitted to the Indiana Department of Health via the <u>NEDSS Base System</u> (NBS) or by faxing a <u>communicable disease report form</u> to 317-234-2812.

Clinicians are recommended to

- Offer prompt vaccination against influenza and varicella to all eligible persons who are not up to date
- Consider iGAS as a possible cause of severe illness, including in children and adults with concomitant viral
 respiratory infections. Illness due to iGAS in persons with known viral infections may manifest as persistent
 or worsening symptoms following initial improvement.
- Educate patients, especially those at increased risk, on signs and symptoms of iGAS requiring urgent medical attention, especially necrotizing fasciitis, cellulitis, and toxic shock syndrome
- Obtain culture for suspected iGAS infections, including blood, wound, and pleural fluid cultures, as clinically indicated
- Follow clinical practice guidelines for diagnosis and treatment of GAS pharyngitis
- Notify appropriate local or state public health departments as soon as possible about unusually aggressive or severe iGAS cases affecting children younger than 18 years of age or clusters of iGAS infections in persons of any age
- Ask laboratories to hold iGAS isolates or send them to the state public health laboratory for temporary

Polypharmacy and antipsychotic use

Polypharmacy and antipsychotic use are common problems among nursing home residents. Please address the appropriateness of all medications of each resident regularly. It has been noticed that many nursing home residents are on antipsychotics for a diagnosis of schizophrenia without clinical evaluation or evidence of such a condition based on chart reviews. CMS is conducting targeted, off-site audits to determine whether nursing homes are accurately assessing and coding individuals with a diagnosis of schizophrenia.

Clinician Calls

Join Monthly Webinars with CMO Dr. Lindsay Weaver

Chief Medical Officer Lindsay Weaver, M.D., FACEP, provides monthly the latest updates on prevailing clinical and public health concerns on statewide clinician call. Please send an email to <u>Tami Barrett</u> if you would like to receive an invitation to join the webinars. If you are unable to attend the live webinar, you will have the opportunity to review the slides after each webinar as they will be emailed to you. The 2023 webinars are planned on the following dates: Feb. 24, March 24, April 28, May 26, June 30, July 28, Aug. 25, Sept. 29, Oct. 27 and Dec. 1.

Please complete this survey to suggest meeting topics: CLICK THIS LINK

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Indiana Department of Health

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