





FLOR PUENTES, MPH EPIDEMIOLOGIST/ZIKA FIELD SUPPORT CONSULTANT

ZIKA VIRUS PROTECTION & CONTROL



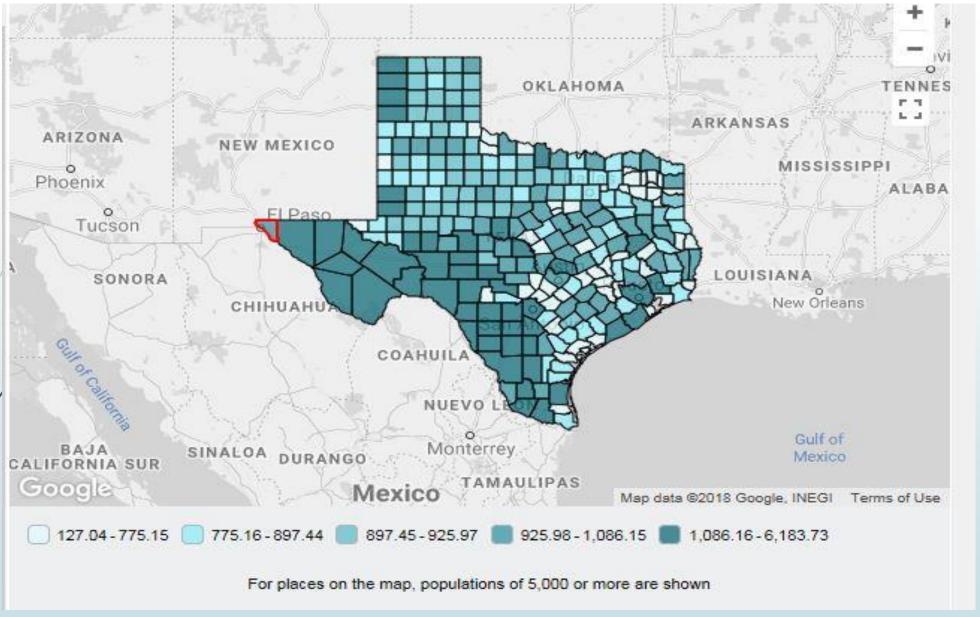




City of El Paso Demographics

- Population: 840,410
- **►** 50.9% Female
- 82.2% Hispanic
- Median Household Income: \$42,075
- Bachelor's Degree or higher: 21.7%
- Border town to Juarez, Chih, Mex (estimated population: 1.3-1.5 million)
- In 2011, more than 3.6 million passenger vehicles, 4.2 million pedestrians and 300,000 commercial vehicles crossed into Ciudad Juárez through the three bridges.









Zika Activities

- Expanding clinical outreach and communication to community healthcare providers
- Assisting in proper testing of at-risk pregnant women
- Sharing Zika information with the community at large through community meetings, events, and other forums
- Collecting data on pregnant women with laboratory evidence of Zika virus infection and their infants with emphasis on birth defects
- > Developing and implementing protocols for case management of Zika positive pregnant women and their infants to ensure proper follow-up
- Providing current educational tools to at-risk pregnant women following CDC guidelines during outreach activities
- Linking patients to care and other appropriate services



Number of completed Provider visits for Zlka Outreach as of end of June 2018

	OB GYN Private Practice	Pediatricians Private practice	Family Medicine	Texas Tech Residents	Texas Tech Nursing School	FQHC CSV/La Fe/Project Vida	WBAMC	UMC Neighborhood Clinics
Completed Visits	126	71	15	16 (OB GYN) 100 (PEDS)	51	24/2/10	30 (PEDS) 41 (OB GYN)	16
TOTAL:								TOTAL:502



PUBLIC HEALTH	Month and Year	Zika PCR positives	Zika PCR negatives	Zika IgM positives	Zika IgM negatives	Total
	May 2018	0	3	0	2	5
	April 2018	0	2	0	0	2
	March 2018	0	3	0	1	4
	February 2018	0	4	1*	3	8
	January 2018	0	6	0	6	12
	December	0	3	0	4	7
	November	0	7	2	7	16
	October	0	6	1	2	9
	September	0	8	1	6	15
	August	0	13	1	5	19
\mathbf{M}	July	0	10	0	0	10
W	June	0	5	0	2	7
M	May	0	3	1	0	4
	April	0	3	0	0	3



Community Outreach Data



Date -	Event Location	Location within the County	Type of Event ▼	# of people reached	# of kits ditributed •
4/5/2018	ESD Code Compliance Training	El Paso	Presentation	60	56
4/7/2018	ESD Earth Day	El Paso	Health Fair	85	84
4/14/2018	Purple Heart Elementary	El Paso	Health Fair	50	0
4/17/2018	Ayuda Inc	San Elizario	Presentation	120	105
4/18/2018	Glen Cove Elementary School	El Paso	Community Event	100	98
4/19/2018	Eastwood Knolls International School	El Paso	SB Presentation	500	20
4/21/2018	Lower Valley Health Fair	El Paso	Health Fair	230	200
4/24/2018	Rio Bravo Middle	El Paso	Health Fair	65	50
4/25/2018	Month of the Military Child	El Paso	Military Event	55	50
4/26/2018	SSG Manuel Puentes Middle	El Paso	Community Event	60	50
4/28/2018	Washington Park Dia de los Ninos	El Paso	Health Fair	700	200
4/30/2018	Don Haskins Recreation Center	El Paso	Outreach	20	18
	12 events			2045	931

Date	Event Location	Location within the County	Type of Event	# of people reached	# of kits ditributed
5/1/2018	Friendly Senior Center	El Paso	Presentation	18	18
5/2/2018	Marty Robbin Recreational Center	El Paso	Outreach	35	30
5/3/2018	Gary Del Palacio Recreational Center	El Paso	Outreach	50	30
5/5/2018	YMCA	El Paso	Health Fair	50	40
5/8/2018	David Ortiz Recreational Center	El Paso	Outreach	50	44
5/10/2018	Texas Kids Dental	El Paso	Outreach	35	29
5/10/2018	Don Haskins Recreational Center	El Paso	Outreach	45	35
5/11/2018	Pregnant Military Women VA Clinic (Yecenia)	El Paso	Outreach	80	50
5/12/2018	Cielo Vista Mall	El Paso	Health Fair	150	120
5/15/2018	Marty Robbin Recreational Center	El Paso	Outreach	100	93
5/17/2018	Gary Del Palacio Recreational Center	El Paso	Outreach	10	4
5/19/2018	Robert R Rojas Elementary	Socorro	Health Fair	15	11
5/23/2018	David Ortiz Recreational Center	El Paso	Outreach	10	2
5/24/2018	Don Haskins Recreational Center	El Paso	Outreach	15	12
5/24/2018	Pavo Real Recreational Center	El Paso	Outreach	15	6
5/30/2018	Multipurpose Recreational Center	El Paso	Outreach		

Texas Zika Cases by County:

County	2015	2016	2017
(A - Ja)	Cases	Cases	Cases
Angelina	0	2*	0
Bastrop	0	1	0
Bell	0	7	0
Bexar	0	21	4
Brazoria	0	2	1
Brazos	0	4	1
Burnet	0	1	0
Cameron	0	26†	14‡
Collin	0	7	3
Dallas	0	45*	3
Denton	0	9	1
El Paso	0	3	0
Ellis	0	1	0
Fort Bend	1	10	0
Frio	0	1	0
Galveston	0	9	0
Gray	0	1	0
Grayson	0	1	0
Gregg	0	1	0
Hamilton	0	1	0
Harris	7	75	11
Hays	0	1	0
Hidalgo	0	6	7‡
Hockley	0	1	0
Jackson	0	1	0

County	2015	2016	2017
(Je - W)	Cases	Cases	Cases
Jefferson	0	2	0
Jones	0	1	0
Kerr	0	0	1
Lee	0	1	0
Lubbock	0	1	1
Matagorda	0	1	0
Medina	0	1	0
Midland	0	1	0
Montgomery	0	1	0
Navarro	0	1	0
Palo Pinto	0	1	0
Parker	0	1	0
Randall	0	1	0
Rusk	0	1	0
Smith	0	1	2
Starr	0	1	0
Tarrant	0	28	1
Travis	0	18	1
Upshur	0	1	1
Val Verde	0	1	0
Walker	0	1	0
Webb	0	6	1
Willacy	0	1	0
Williamson	0	5	1
Wise	0	1	0

In 2015 there were a total of 8 confirmed Zika cases and 315 in 2016. There have been 54 cases reported for 2017, though that number could still change.

All cases are travel related except:

* Includes sexually transmitted cases in Texas: Angelina (1), Dallas (1)

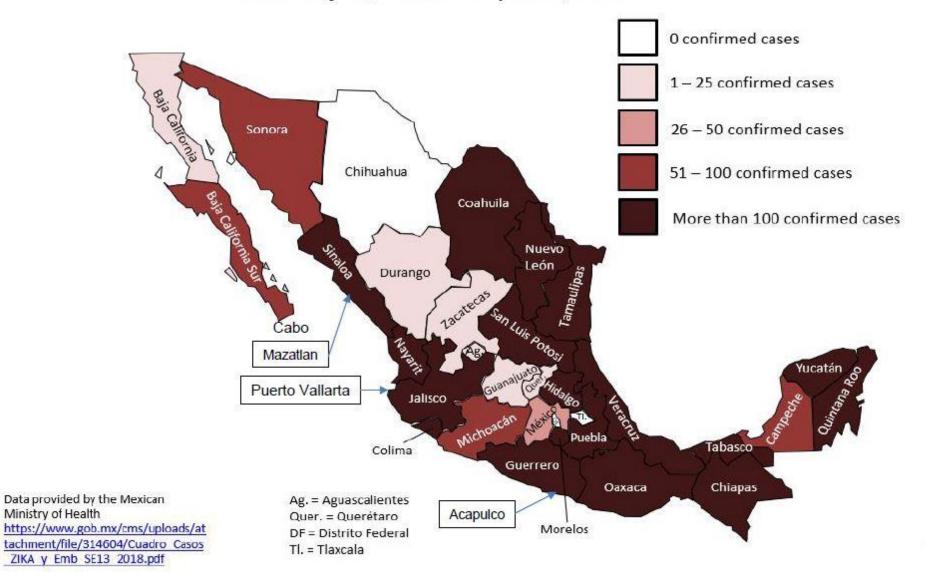
† Includes cases transmitted by mosquitoes in Texas: Cameron (6)

‡ Includes cases transmitted by mosquitoes in Texas: Cameron (1), Hidalgo (4)





Confirmed Zika Cases in Mexico by State January 1, 2016 – April 2, 2018

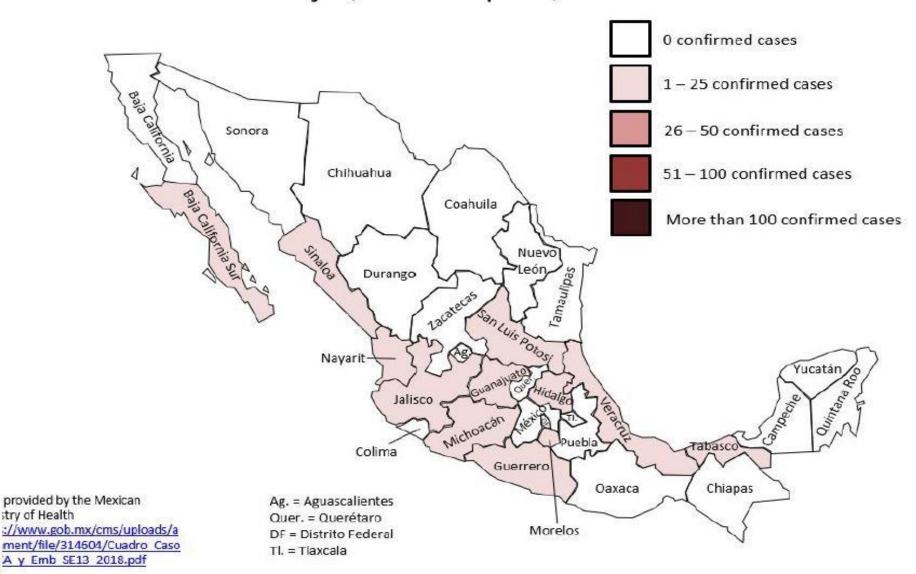




stry of Health

Confirmed Zika Cases in Mexico by State January 1, 2018 – April 2, 2018







Recommended Texas Zika Testing Changes Effective January 1, 2018



Based on the high false positivity of Zika IgM tests, the cross-reactivity with dengue IgM, the possible extended Zika viremia of pregnant women, and the persistence of Zika IgM antibodies, we propose the following changes to Zika testing recommendations in Texas:

Asymptomatic Pregnant Women

With ongoing risk of possible Zika exposure OR residing in Texas area at high risk of local transmission (Cameron, Hidalgo, Kinney, Maverick, Starr, Webb, Willacy, Val Verde or Zapata counties):
Test at three times during pregnancy by PCR.

Differs from current DSHS recommendation by removing IgM testing. Ideally, testing should be at first prenatal visit and each subsequent trimester.

Asymptomatic Pregnant Women

With travel to an area of active Zika transmission or sexual exposure but no ongoing exposure: Recommend PCR testing as soon as possible through 12 weeks after exposure.

Differs from current DSHS recommendation by removing IgM testing. CDC does not recommend testing of asymptomatic pregnant women with travel or sexual exposure to Zika who do not have ongoing exposure (see category above).

Category	CDC	Current Texas	Recommended Change
Asymptomatic Pregnant Woman with ongoing risk of possible Zika exposure OR residing in Texas area at high risk of local transmission	Test three times during pregnancy with PCR	Resides in Cameron, Hidalgo, Kinney, Maverick, Starr, Webb, Willacy, Val Verde or Zapata counties OR resided in area with ongoing exposure: • Test 3 times during pregnancy with PCR and IgM	Resides in Cameron, Hidalgo, Kinney, Maverick, Starr, Webb, Willacy, Val Verde or Zapata counties OR resided in area with ongoing exposure: Test 3 times during pregnancy with PCR
Asymptomatic Pregnant Woman with travel to an area of active Zika transmission or sexual exposure but no ongoing exposure	No testing recommended but allowed per patient, provider or jurisdiction recommendations. If test: PCR and IgM concurrently	As soon as possible through 12 weeks after last exposure: test with PCR and IgM concurrently	As soon as possible through 12 weeks after last exposure: • test with PCR









John Hellerstedt, M.D.



Texas Department of State Health Services

Zoonosis Control Branch

Texas zika Testing Engistiney enteria					
pidemiologic Risk Group	DSHS Testing Recommendations ³				
t during or within 2 weeks of travel to or residence in an area of active transmission ¹ Twistin 2 weeks of sexual exposure to a partner with possible 7 ika	As soon as possible (up to 12 weeks) after onset: Zika PCR and IgM				

		Epidemiologic Risk Group	DSHS Testing Recommendations ³	
Symptomatic (Major symptoms are	One or more of the	 Onset during or within 2 weeks of travel to or residence in an area of active Zika transmission¹ Onset within 2 weeks of sexual exposure to a partner with possible Zika exposure¹ 	As soon as possible (up to 12 weeks) after onset: Zika PCR and IgM → Recommend chikungunya and dengue testing	
fever, rash, conjunctivitis, or arthralgia;	four major symptoms	Pregnant remale residing in Cameron, Hidaigo, Kinney, Maverick, Starr, Val Verde, Webb, Willacy, or Zapata counties regardless of travel or sexual exposure history ³		
Guillain-Barré Syndrome or evidence of fetal abnormalities	Rash and at least one other of the four major symptoms	 No sexual exposure or travel to an area of active Zika transmission¹, but either: Has a known epidemiologic link to a viremic Zika or unspecified flavivirus case (residence in same area, etc.), OR Resides in Cameron, Hidalgo, Kinney, Maverick, Starr, Val Verde, Webb, Willacy, or Zapata counties³ 	As soon as possible (up to 12 weeks) after onset: Zika PCR and IgM → Recommend chikungunya, dengue, West Nile, and St. Louis encephalitis testing	
consistent with Zika may be	Three or more of the four major symptoms	No travel, sexual exposure, or epidemiologic links		
considered on a case-by-case basis)	Pregnant female ² with ultrasound evidence of fetal abnormalities consistent with Zika AND • Travel to or residence in (or sexual exposure to a traveler to) an area of active Zika transmission ¹ , OR • Resides in Cameron, Hidalgo, Kinney, Maverick, Starr, Val Verde, Webb, Willacy, or Zapata counties ³		As soon as possible after ultrasound*: Zika PCR and IgM	
Asymptomatic (or not		h no travel to an area of active transmission who resides in Cameron, Hidalgo, arr, Val Verde, Webb, Willacy, or Zapata counties³	Three times during pregnancy4 (ideally at the initiation of prenatal care and in each trimester): Zika PCR	
clinically compatible with Zika)	Pregnant female ² with travel to an area of active Zika transmission ¹ or sexual exposure to a partner with possible Zika exposure ¹		As soon as possible (up to 12 weeks) after exposure: Zika PCR	
Infant whose mother had	Evidence of abnormalities consistent with Zika (including but not limited to microcephaly, intracranial calcifications, and ventriculomegaly) or adverse birth outcome		At birth (or as soon as possible after birth): Zika PCR and IgM, OR After 18 months of age (if infection not	
Zika exposure during pregnancy	No evidence of abnormalities consistent with Zika, but mother has laboratory evidence of Zika virus infection (OR was unable to be tested within the appropriate timeframe in relation to exposure)		confirmed in testing at birth and mother is not PRNT negative for Zika): Zika PRNT	
CONTRACTOR OF STREET	Commence of the commence of th			

Texas 7ika Testing Fligibility Criteria

DSHS Zika Testing Eligibility Criteria As of April 1, 2018

¹ Refer to https://www.cdc.gov/zika/geo/index.html for a world map of areas with risk of Zika transmission, and updates on US local transmission in Florida and Texas.

² Also includes women who were not pregnant during travel or sexual exposure but became pregnant within 8 weeks of exposure (within 6 weeks of last menstrual period). Only consider exposure in relation to the current pregnancy.

³ Refer to DSHS health alerts at http://texaszika.org/media.htm. All PCR testing should be performed on serum, which may also be paired with urine, CSF, and in some cases whole blood. All IgM testing should be performed on serum.

⁴ Repeat PCR or other Zika testing is not recommended for pregnant women with confirmed Zika virus infection (either Zika PCR positive or Zika IgM positive, Zika PRNT positive, and dengue PRNT negative) any time before or during the current pregnancy.





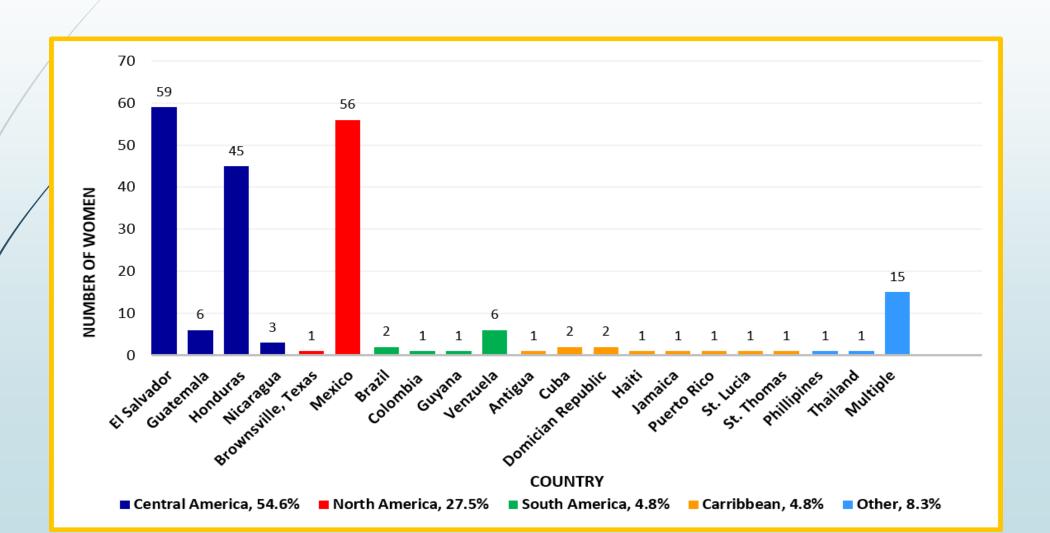
Testing Outcomes and Birth Defect Status of Fetal Losses or Infants Delivered in Texas to Mothers with Evidence of Zika Infection during Pregnancy

	Laboratory Tes	ting Completed	Laboratory	8
	Laboratory Evidence of Zika Infection	No Laboratory Evidence of Zika Infection	Testing Not Completed	TOTAL
Has Birth Defect Consistent w/ Zika	4	11	2	17
Has Other Birth Defects	0	2	9	11
Has No Apparent Birth Defects	11	91	136	238
TOTAL	15	104	147	266

For more information, e-mail: birthdefects@dshs.texas.gov



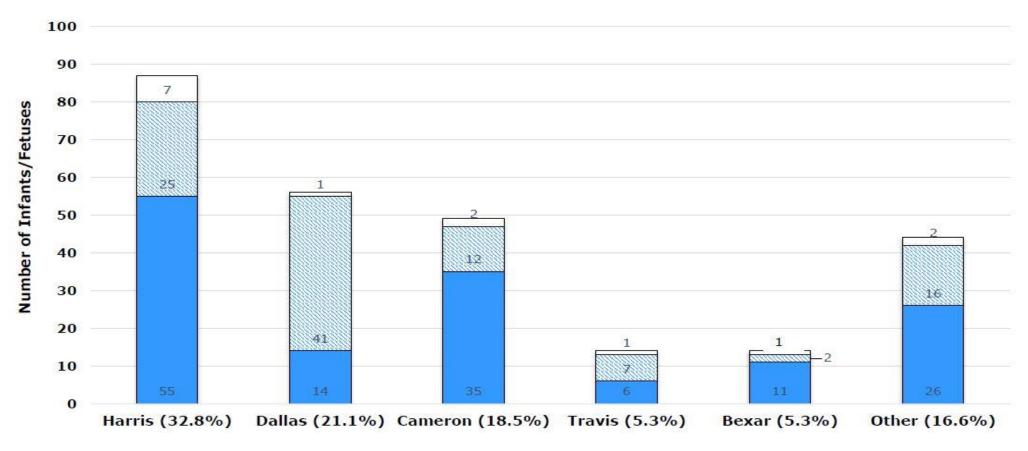
Travel History of Women with Evidence of Zika and Known Pregnancy Outcomes, Texas, as of 11/3/2017







Infants/Fetuses Delivered by Mothers with Evidence of Zika Virus Infection During Pregnancy, by County and Infant's Zika Testing Status, as of 4/27/2018



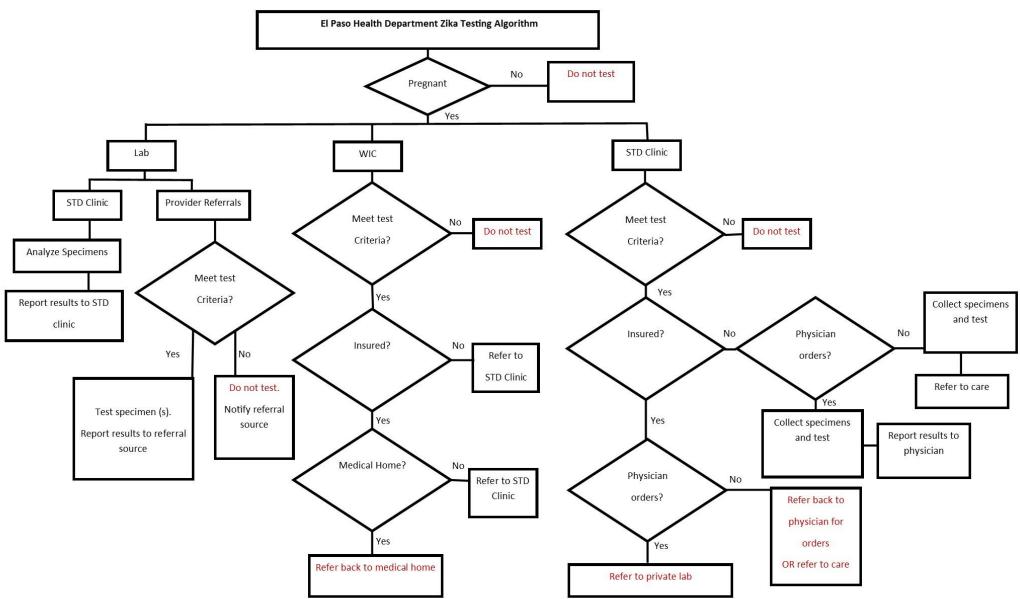
Texas County (% of Total Deliveries)

Case #1 (August 2016)

- Email: My name is XXXX and me and my wife just got back from our honeymoon in Florida and we visited Miami for a day and she was a bit a lot. She later developed a mild rash and a fever. A few days later I developed a rash, fever, and headaches. I know you may have a lot of emails now because of the fear but I feel we qualify for testing also we want to know because want a baby in the very near future. We went to a local hospital and we did not get any answers. With your help maybe you can put our minds at ease so we can safely have a child. Thank you for your time. I hope to hear from you soon.
- FQHC clinic contacted for testing &Tested positive for Zika Virus Infection
- Sex education provided; Environmental assessment of household completed; self-isolation for 15 days







City of El Paso Texas Department of Public Health Activation and Response SUMMARY Chart

1. Zika Case/s Confirmed

s.s - Notification

Lead Epi - Upon confirmation of Locally-Acquired Case (LAC), follows Activation & Notification Protocolfice Internal actification to Health Director (HD), Assistant and Deputy Directors, Health Authority, PAO.

1.3 - Threat Assessment/Response Meeting

ND - Immediately after Epinotification schedules meeting including additional players DSNS, CDC, GEM, PAO, ESNC, Lab, PHEP, Zika Reps, GIS, PAD, other.

3.3 - Emergency Response Activation

HD - Determines response area & scope of response, declare Zika response activation.

HD - Designate Incident Commander (IC)

14-Activation

IC-Schedules follow-up briefing with IC staff.

2. Emergency Response Activation

p.s. Incident Command System (ICS) Established

IC-Activates ICS Sections, develops Ony Chart.

2.2.IC Staff Briefing Meeting

IC- Constacts briefing, establishes reporting structure and process, develops IAP (response goals/objectives), establishes briefing schedule.

2.3 First Responders Notification

PHEP Communications have activation message to DPH first respondent, and others, to stand-by the deployment.

2.4 Planning Section Section Chief- IAP

2.5 Operations Section (OS)

OS Chief-Follows 24 response plan. Submits requests to Logistics Section Chief

2.6 Logistics Section
Section Chief - Procures resources

z.7 Finance Section
Section Chief - Tracks expenditures.

3. Deployment

3.2 OSC- Establishes certical operations certes at affected area

OSC- Orders deployment of response teams and resources, as

per 24 hour response plan

3.2 Home Intervention

QSC - Coordinates home intervention operations.

4. Crisis Communication

4.1 Media Communications

PAD - Fields media inquires from omet, activates CERC plan, develops & coordinates all media activity.

4.3 Clinician/Service Provider Communication

Epi - Issues alerts, advisories, etc., to selected groups

4.3 Webpage

PAO Team-Updates Webpage messages, social media, Docs, Dic.

64 - Community Outreach & Education

Zika Coordinator - Deploys Ed Tank Force to designated areas, as per pre-developed schedule

4.5 Call Center/Triage Line

PHEP Communications-Coordinates between 2-2-2 and PCC

5. Recovery

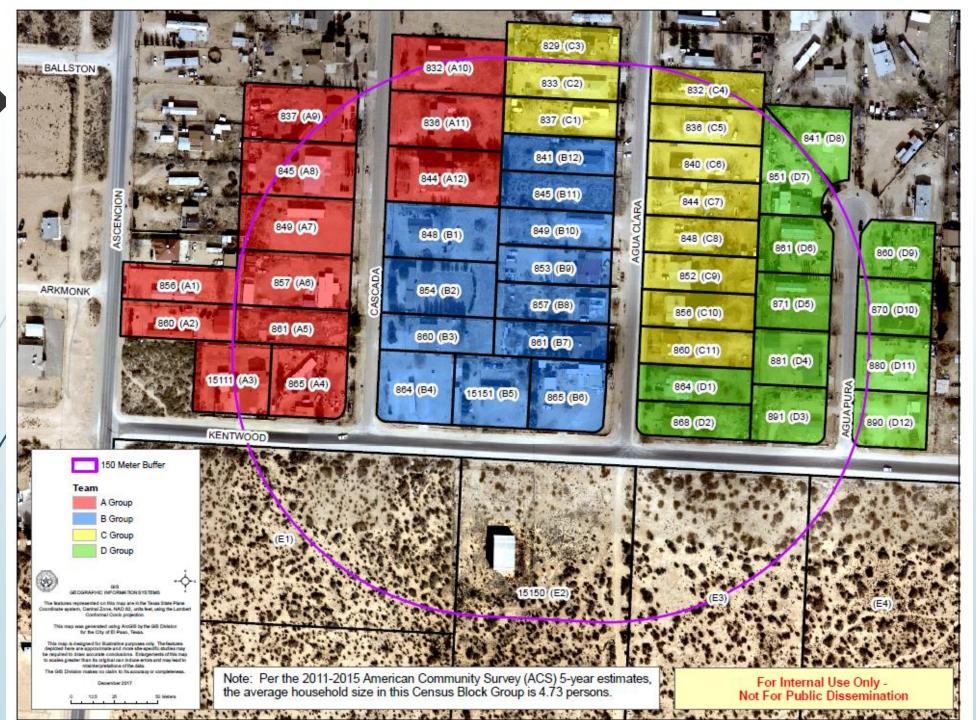
5.1 Recovery Phases.

IC- Determines recovery phases & timeline IC- Begins de-escalation as per phases

5.2 Hotwark

IC- Schedules Hotwarb, designates staff resources Designates staff - Conducts Hotwarb, develops ARR







Best Practice

- Ready to respond to new emerging threats; start early
- Community Outreach and media campaign launched
- Build trust & communication with providers
- Good working relationship and communication with DSHS Region 9/10 Zoonosis Program
- Establish good communication & relationship with Mexico Health Dept and New Mexico Health Dept. for data sharing (attend Binational Meetings)

Future Plans

- Continue with Provider and Community outreach
- Increase number of Zika tests by providers (Notifiable Condition)
- Continue to establish trust and good communication with providers
- Improve lab capacity at department of public health
- WIC intervention
- CMS staff (2)
- Conduct Tabletop Exercises for improvement measures

Zika Action Day June 27, 2018









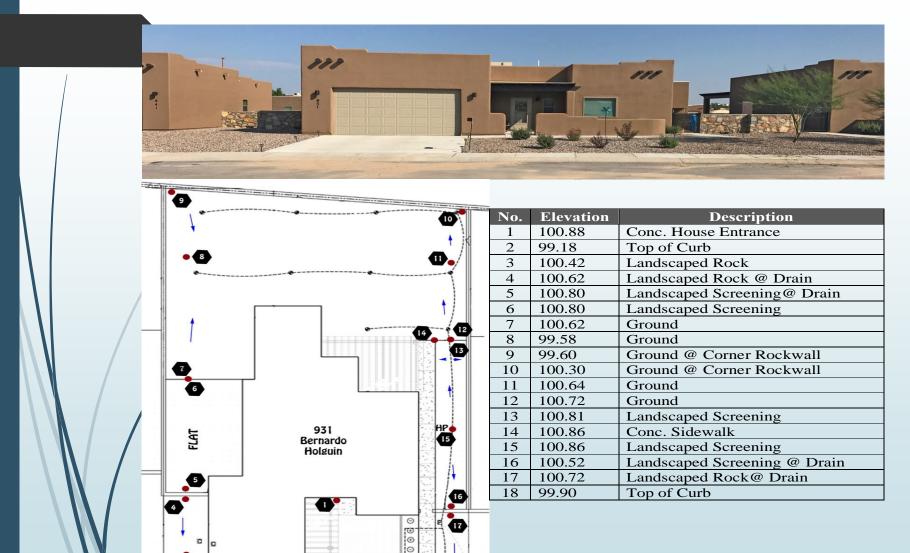
Ysleta Del Sur Pueblo Demographics

- At end of 2016 population was: 3,981
- On Reservation: 22% (Checkered Board Reservation)
- Off Reservation (El Paso/Hudspeth Counties) 28%
- Out of Town: 50%
- ► 53 % Female
- 47% Male
- Median age is 24 years old
- Members 19 years old accounted for 40% of population
- * Ysleta del Sur 2016 Socioeconomic Profile

YDSP Update on Zika Virus related mitigation strategies

- Reducing used tire piles by providing used tire amnesty days and Pueblo sponsored clean up activities.
- Additionally, Community awareness has included information on used tires and how it can act as a mosquito incubation mechanism.
- Contracted with a pesticide firm that works within the community with 'fogging' services and also treating standing water with briquettes of mosquito specific pesticides.
- > Standing water is a continuing concern and efforts are implemented by the Grounds crew to address areas where excessive ponding can occur.
- Engineering remedies in the second living district have included connection to Lower Valley Water District sewer infrastructure and storm water relive areas have been constructed to divert storm water from residential areas

A Lot Elevation Verification Report was conducted



A Lot Elevation
Verification Report
was conducted to
find out why storm
water ponded in
the backyards.



• Existing grade did not direct run-off to the front of the lots.

• Existing 2 to 6 inches of screening to the sides of the lots caused a high point preventing run-off to drain to the front of the lot.

High compacted screenings prevented water to flow through.



YDSP Update on Zika Virus related mitigation strategies

• Side rock wall's outlet inverts were higher in elevation.

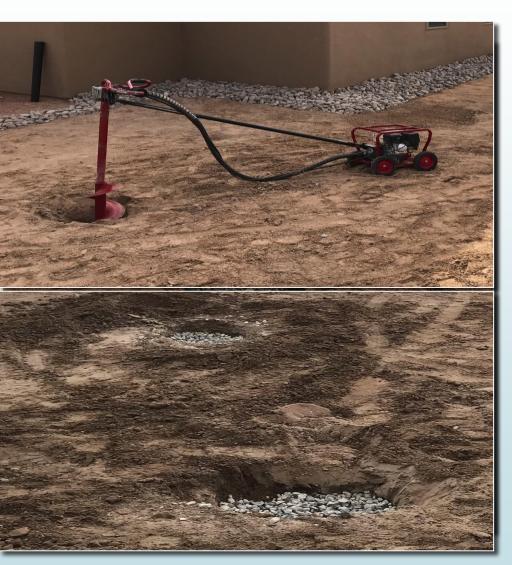
 Backyard soils have a high compaction rate preventing or minimizing water to percolate into subsoils.



Drainage Improvements

French Drain

Drywells





Drainage Improvements

French Drain

Drywells

Gravel Filled Drain Trench

Import Topsoil





Evidence drywells worked successfully.





Side by Side Comparison After a Heavy Rain Event



Before Improvements



After Improvements



Side by Side Comparison After a Heavy Rain Event



Before Improvements



After Improvements



Side by Side Comparison After a Heavy Rain Event





Before Improvements

After Improvements