

News & Views



With Great Sadness... Dr. James Harlan Steele



Steele set the direction, found the resources, selected and cultivated enough talented people to achieve his dream of One Health, which was manifested as the establishment of vital veterinary public health infrastructure at the state, national, and international levels. He literally built the 1st of many veterinary public health programs in the United States and the world beginning at CDC in 1946.

On 10 November 2013, we all witnessed the exit of a lion.

Over his 100-year-plus lifespan, James Harlan Steele was a true pioneer in Public Health and the re-birth of One Health. He was tenacious in his quest to enlarge the role of veterinary medicine in public health, emboldened by the conviction that any avenue that can benefit the health and well-being of people leads to a more progressive, rational and fair state of affairs for his community, country, and the world.

Dr. Steele was a systems thinker, a strategic analyst, and a magnet for bright, young talented veterinarians, physicians, and other health professionals. He took the idea of One Health and implemented it, building a framework for programs such as rabies control, which could showcase what One Health, 1st named by Steele as Veterinary Public Health, could do.

Dr. Steele received a doctorate of veterinary medicine from Michigan

Continued on next page

Inside this issue:

With Great Sadness...	1
President's Commentary / Accolades!	4
APHIS Standards	5
Updated Compendium / More Accolades!	6
With Great Sadness...	7
Rabies Prevention Poster	11
Scariest Infect. Diseases	12
Epidemiology Specialty Update	14

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Please forward any news or items that you would like for us to consider publishing in the next Newsletter!

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10 February 2014

With Great Sadness...Dr. James H. Steele

Dr. Peter Cowan

Continued from previous page

State University in 1941 and an MPH from Harvard University in 1942.

Until 10 November 2013, he was the oldest living graduate of the Harvard School of Public Health. He founded and named the 1st Veterinary Public Health program at CDC and within the United States Public Health Service where he served for many years.

Early on, Jim worked closely with Alex Langmuir and was so critical to the implementation and growth of CDC's EIS training program through the 1950s and 1960s that he was inducted as an honorary EIS member in 1976. He served as Assistant Surgeon General for Veterinary Affairs and the 1st Chief Veterinary Officer of the USPHS. He played a critical part at the 1st meeting of the Veterinary Public Health Expert Committee on Zoonosis at WHO. He played an inspirational role in the development of several European Veterinary Public Health Services, particularly in West Germany.

Professor Steele was the Editor in Chief of the CRC Handbook of Zoonoses series and a consultant to the Control of Communicable Disease Manual for decades. These accomplishments are only a brief mention of his activities and barely scratch the surface of his impact both nationally and internationally. Jim's honors and awards are almost too numerous to count.

In 1971, he joined the University of Texas School of Public Health's Infectious Disease Center, where he served as Professor until his 80th birthday. He then went into "retirement," which consisted of a whirlwind of writing, editing, consulting, and mentoring that would dwarf



the output of many younger people. He was incredibly sharp and active right up to the end, engaging at over 100 years of age in an update of his work on tuberculosis, a short history of One Health, and planning for a special symposium entitled the James H. Steele Challenge: A better world through One Health. His video speech last July [2013] to the American Veterinary Medical Association's 150th anniversary was an inspiration, not solely because he had lived through 2/3rds of the existence of that professional organization dating back to the U.S. Civil War, but because of the forwardness of the thoughts in his speech. To have a vision to hand over to others at age 100 is truly remarkable.

Jim loved to tell stories related to the history and purpose of Veterinary Public Health. He recalled this experience many times to many of us: In 1945, at the end of WWII, Joseph Mountin, a physician and chief of the USPHS's Bureau of State Services, met with him to discuss the global origin and importance of zoonotic diseases. He challenged Steele by saying: "What are you veterinarians going to do for public health now that the war is over?" Jim Steele's response was vital to the future of veterinary public health and the rest of his career. Eventually, he suggested the creation of a program within USPHS that would work on zoonotic diseases. He looked down the hall and saw Dental Public Health and Public Health Nursing and decided Veterinary Public Health would do just fine. He further recommended the establishment of a corps of veterinary officers within the USPHS so that veterinarians who became Commissioned Corps members would have a

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Dr. Ernest H. Oertli, DVM, PhD, **DACVPM** cited (Contributing author) in 15 October 2013 JAVMA article titled *Epidemiology of rabies in bats in Texas (2001-2010)*.

Conclusions and Clinical Relevance- Information on the epidemiology of rabies in bats and the epidemiology of exposure to rabid bats may be useful in planning and implementing local, state, and national rabies control and prevention campaigns and in encouraging rabies vaccination of domestic animals. (J Am Vet Med Assoc 2013;243:1129-1137).

With Great Sadness...Dr. James H. Steele

Dr. Peter Cowan

Continued from previous page
place in the structure. Craig Carter, at the University of Kentucky, has written a very nice biography entitled *One Man, One Medicine, One Health: The James H. Steele story*.

Over his career, Jim had big megaphones at CDC, WHO, USDA, PAHO, APHA and AVMA, which he used to advocate for acceptance of the idea of One Health. He developed programs which served as models the world over and that proved that good animal health meant good human health, which, in turn, translates to good economic health. Steele played a seminal role in the rebirth of the idea of One Health. His efforts finally flowered in full bloom in the 1st decade of the 21st century, embodied by the wide acceptance of One Health and activities worldwide in response to HPAI H5N1 and other emerging disease threats.

Notwithstanding his gargantuan accomplishments and his photographic memory, Jim's singular quality was mentoring. He loved people, especially young people, and for the last 2 decades of his life, everyone was young to Jim. He loved to work with people, and so very many of them became friends. He was an optimist with a sense of humor, and the jokes he made on the occasion of his 100th birthday were too rich to repeat here. He had charisma to the maximum extent, but he was also a hard driving realist who knew how to fund and build programs the world over. He was never too busy, and he truly knew how to listen. Whether the problem was epidemiol-

ogical or personal, Jim would provide sound advice, oftentimes guiding his mentees towards their own solutions.

Jim loved to think and do; he loved to listen and comfort. The list of Jim's "students" included not only those for whom he had acted as a professor at the University of Texas School of Public Health but also so many individuals at CDC and the United States Public Health Service as well as veterinary colleges and the United States Department of Agriculture. The width of the swath cut by Jim's mentees was truly impressive. Bill Foege, the former director of CDC, said at Jim's 90th annual birthday lecture that Jim's seminal contribution was that the health of humans and the health of animals are inseparable. This premise was Jim's greatest gift and allowed us to develop a more rational public health future, because you cannot consider the health of people without considering the health of animals.

Dr. Foege finished Jim's 90th birthday address with the following paragraph, which bears repeating now:

"And so our tribute to a long life well lived as a generalist, specialist, globalist, futurist, moralist, optimist, and gift giver is mixed with gratitude, gratefulness, and the anticipation of the next decade being the best ever. On behalf of countless generations, yet unborn, we say: Thank you Jim, for this greatest gift."

Yes, a lion has roared, and we are all the better for it.

ProMED-mail

President's Commentary...

Dr. Mo Salman

Dear Diplomates:

Greetings from Washington DC where I am spending a year as a Jefferson Science Fellow with Department of State. As a senior scientific advisor to the African Bureau under Public Diplomacy and Public Affairs Office, my main job duty is to support Public Affairs Officers in Africa in this Bureau's mission to enhance public diplomacy activities in sci-

ence and technology (S&T). It is done through initiation of programs that engage the public to improve the science environment specifically in education, accelerating technology development, and collaborating among government, universities, non-governmental organizations, and industry in the sub-Saharan region. I have been engaged in activities mainly to assess the value of S&T in enhancing the

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Accolades! - U.S. Public Health Service Awards



Dr. Jeff McCollum, DACVPM, a USPHS lieutenant commander who works for the Department of Defense Armed Forces Health Surveillance Center in Silver Spring, Md., received the 2012 Commissioned Corps Junior Veter-

inarian Officer of the Year Award. As a deputy division director and head of febrile and vector-borne infections surveillance in the surveillance center's Global Emerging Infections Surveillance and Response Division, he oversees, evaluates, and prioritizes surveillance and research initiatives and manages more than 60 projects in 30 countries. Among them is a planned *Plasmodium falciparum* malaria drug resistance clinical trial in Asia, Africa, and South America. Dr. McCollum also is the GEIS liaison to the U.S. Pacific Command in Honolulu.



Dr. Sean F. Altekruise, DACVPM, a captain in the Commissioned Corps and senior epidemiologist for the National Cancer Institute of the National Institutes of Health, received the Rear Admiral James H. Steele One Health

Outstanding PHS Veterinary Career Award for contributions in veterinary public health and one health. He has contributed to cancer surveillance research through published studies on liver, childhood, and cervical cancer; initiated collaborative cancer stud-

ies; and served as an editor of the NCI's Cancer Trends and Progress Report.

Dr. Altekruise helped implement *Salmonella* standards for meat and poultry when he was with the Department of Agriculture and was the Food and Drug Administration's first liaison for foodborne disease to the Centers for Disease Control and Prevention. He helped develop agreements and drafted protocols that became the CDC's FoodNet program.



Dr. Renee L. Shibukawa-Kent, DACVPM, and Drs. Carey B. Quisenberry and Jaspreet K. Gill jointly received the 2012 Commissioned Corps Veterinary Responder of the Year Award for delivering exceptional veterinary

care in one of the world's most challenging operating environments.

All are lieutenant commanders for the corps and members of a team that supported U.S. Coast Guard deployments in the North Slope Borough of Alaska. In those remote villages, they promoted public health by spaying and neutering pets; vaccinating 526 pets against rabies; and educating people about rabies, dog bite prevention, and parasite control.

JAVMA 15 September 2013

Continued from previous page: President's Commentary...

public diplomacy activities among the staff members in the US embassies in the region. I have been working closely with these Embassies and African governments in specific programs to improve science education in the region, assist in the development and implantation of host government national plans on S&T, and promote science and technology research collaboration as a mechanism of diplomacy. Due to the broad aspect of this job with my interest, my focus is on agriculture and health sciences including high education as a model for other scientific disciplines. It is another demonstration for the value of our profession in preventive veterinary medicine in serving society.

I wish you happy Thanksgivings with all the prospective for the Holiday Season.

Yours,
Mo Salman, President

APHIS Finalizes BSE Import Regulations in Line with OIE Standards

WASHINGTON, November 1, 2013 --The U.S. Department of Agriculture's (USDA) Animal and Plant Health Inspection Service (APHIS) announced today a final rule that will complete efforts to modernize the Agency's import regulations for bovine spongiform encephalopathy (BSE), demonstrating to the international community that the United States is committed to basing its BSE regulations on internationally-accepted scientific literature and standards set by the World Organization for Animal Health (OIE). The final regulation will allow for the safe trade of bovines and bovine products, while still protecting the United States from the introduction of BSE.

"This action will bring our BSE import regulations in line with international standards, which call for countries to base their trade policies on the actual risk of animals or products harboring the disease," said Dr. John Clifford, APHIS Deputy Administrator and Chief Veterinary Officer. "Making these changes will further demonstrate to our trading partners our commitment to international standards and sound science, and we are hopeful it will help open new markets and remove remaining restrictions on U.S. products."

It is important to note that control of imports is only one of several interlocking safeguards against BSE. This regulation does not change other measures

that are currently in place in the United States. For animal health, these measures include the U.S. Food and Drug Administration's ruminant-to-ruminant feed ban. A robust BSE surveillance program monitors the health of the U.S. cattle population. Human health is protected by measures that ensure the safety of U.S. beef, the most important of which is the ban on cattle materials that have been shown to carry the BSE agent (known as specified risk materials) from the food supply. In recognition of the strength of these measures in the United States, the OIE upgraded the U.S. risk classification for BSE to negligible risk in May 2013.

When this rule takes effect, APHIS will use the same criteria and categories that the World Organization for Animal Health (OIE) uses to identify a country's BSE risk status. APHIS will base its import policy for a particular country on that country's risk classification as determined by OIE's risk evaluation. The rule also allows APHIS to conduct its own assessment when deemed necessary, such as when a country is not yet classified by the OIE for BSE risk and requests that APHIS conduct a risk evaluation using criteria equivalent to that used by OIE.

This action will be published in the Federal Register soon. The rule becomes effective 90 days after publication.



Dr. Philip H. Kass, DVM, MPVM, PhD, DACVPM cited (Contributing author) in 1 September 2013 JAVMA article titled *Risk factors associated with survival in dogs with nontonsillar oral squamous cell carcinoma: 31 cases (1990-2010)*. **Conclusions and Clinical Relevance**—Results indicated that the prognosis for dogs with OSCC was excellent following surgical excision of the tumor. Risk of death increased with increasing TAI, and combining TAI, PNI, and LVI into a single risk score may be a useful prognostic indicator for dogs with OSCC carcinoma. (J Am Vet Med Assoc 2013;243:696–702).

Updated Compendium of Measures to Prevent Disease Associated with Animals in Public Settings

The Compendium of Measures to Prevent Disease Associated with Animals in Public Settings, 2013, was published in the November 1, 2013, issue of the *Journal of the American Veterinary Medical Association (JAVMA)*. The Compendium is available at no cost on the JAVMA website: <http://avmajournals.avma.org/toc/javma/243/9>.

The Compendium—a collection of guidelines—is the product of a task force with members of National Association of State Public Health Veterinarians (NASPHV) working with external consultants, including experts from APHIS Veterinary Services. The task force met last year at the Centers for Disease Prevention and Control in

Atlanta, Georgia to update many of the guidelines. The Compendium provides standardized recommendations for use by public health officials, veterinarians, animal venue operators, animal exhibitors, and others concerned with disease control and with minimizing risks associated with animals in public settings (e.g., petting zoos or zoos, fairs, circuses).

A link to this collection of guidelines will be available on the NASPHV website at <http://www.nasphv.org/documentsCompendia.html>. This website also provides information on rabies, veterinary infection control, and psittacosis/avian chlamydiosis, and much more!

More Accolades!

AVMA Public Service Award

This award recognizes an AVMA member for outstanding public service or contributions to public health and regulatory medicine.



Dr. Millicent Eidson (COL '83) is a research scientist with the New York State Department of Health, serving as a co-leader for climate change and health studies. After joining the department in 1997, she established a system for reporting dead birds as an early indicator of human risk of West Nile virus. She is associate chair of the Department of Epidemiology and Biostatistics at the University at Albany

School of Public Health. Previously, she was New Mexico's state public health veterinarian. Her proudest accomplishment was an investigation in that position that found an association between certain L-tryptophan supplements and a new disease, eosinophilia-myalgia syndrome. Dr. Eidson has been a leader with the National Association of State Public Health Veterinarians, the epidemiology specialty of the American College of Veterinary Preventive Medicine, and the American Association of Public Health Veterinarians.

JAVMA, 15 September 2013

With Great Sadness...Dr. John C. New, Jr.

I was saddened to learn of Dr. John C. New, Jr.'s passing on October 15 2013. In life, you meet few people that will influence your life and the life of others as Dr. New did.

I first meet Dr. New when I attended the University of Tennessee College Of Veterinary Medicine. He was teaching senior, public and environmental health with an enthusiasm and passion that was infectious for the subject. He was involved in numerous projects in which he invited students to participate. These opportunities would lead many of us into careers of public health, environmental health, and epidemiology; he embodied the concept of one health before the term was widely used.

After graduation, I would have several opportunities to work with him again through the College of Preventive Medicine and my career activities. We worked on many projects including hosting a course for aspiring Area Epidemiologists in Veterinary Services, developing best practices into practical regulations and guidelines, and facilitating the use of therapy animals in hospitals and senior facilities to improve the life of residents at these locations.

Others recognized his efforts, and he won numerous awards and honors from the students at the University of Tennessee where he was a favorite professor and Department Head. He was recognized by the ACVPM in 2002 as a distinguished diplomate. In 2004, he won the Animal Welfare Award at the AVMA Welfare forum after being recently promoted to Department Head of Comparative Medicine at the University Of Tennessee College Of Veterinary Medicine where he had been teaching since 1977.

I will borrow from that award to capture many of the other activities he was involved in. He served as a past board member and scientific advisory committee member of the National Council on Pet Population Study and Policy, and researched many ave-



nues of animal welfare, including pet ownership, overpopulation, and pet relinquishments. His work has been used to develop and enhance programs that have successfully targeted both people and their pets by identifying aspects of pet ownership and responsibility that can lead to abandonment. Because of Dr. New's insight into a prevalent problem, countless pets have remained in their homes.

Dr. New had a great impact on the local level as well. A founding member of HABIT, or Human-Animal Bond in Tennessee, he served on the organization's Executive Committee and oversaw all animal-related matters, including medical and behavioral evaluations. HABIT is one of the country's oldest and largest community based human-animal interaction organizations.

In addition, Dr. New co-founded HERO—Humane Education and Responsible Ownership—of Pets, a consortium of organizations committed to promoting responsible and humane pet ownership through educational projects. HALT (Humans and Animals Learning Together), a third organization dedicated to animal welfare and co-founded by Dr. New, uses dog obedience training to provide therapeutic intervention for at-risk adolescents.

He has dedicated his time and talents to many organizations including the Humane Society of the Tennessee Valley and the American Association of Human-Animal Bond Veterinarians. He served as the co-chair of the AVMA Committee on Human-Animal Bond.

After graduating from Texas A&M College of Veterinary Medicine, Dr. New served as a captain in the US Army Veterinary Corps and was assigned as a clinical veterinary officer. Following his military service, Dr. New returned to the academic arena and earned a masters degree in public health from the University of Minnesota.

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With Great Sadness...Dr. John C. New, Jr.

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Dr. New received numerous awards, including the Michael J. McCulloch MD Memorial Award; the Leo K. Bustad Companion Animal Veterinarian of the Year Award; and the University of Tennessee College of Veterinary Medicine's Reed Outstanding Service Award. In a fitting tribute to the life and work of Dr. New, the Tennessee Veterinary Medical Association created the John New Human-Animal Bond Award in 2002. Dr. New would continue at the University of Tennessee for another 9 years until he passed away. I will count myself lucky for knowing him and having the opportunity to work with him. I would imagine that the hallways of the University of Tennessee will be a little darker today for his loss. John will be fondly remembered and missed by all his students, colleagues, and fellow diplomates that knew him.

Dr. John Sanders

With Great Sadness...Dr. Earl W. Grogan

Dr. Grogan (TEX '46), 87, San Antonio, died Aug. 11, 2013. Following graduation, he practiced in Fort Worth, Texas, for a short time before joining the Army Veterinary Corps as a first lieutenant. During his military career, Dr. Grogan earned his master's in public health at Johns Hopkins University (1951), worked in several Army medical laboratories, served as assistant to the commanding officer at the Army Medical Unit in Fort Detrick, Md., and directed the veterinary unit at the Walter Reed Army Institute of Research. He retired as a colonel in 1975. Dr. Grogan went on to serve as executive secretary of the Institute of Laboratory Animal Resources of the National Academy of Sciences' National Research Council's for 12 years.

A diplomate of the **American College of Veterinary Preventive Medicine**, he was a past president of the District of Columbia VMA and served on the board of directors of the Army Medical Department Museum. Dr. Grogan was a member of the Sons of the American Revolution and received the Legion of Merit for his military service. In 1983, the ACVPM honored him with its Helwig-Jennings Award. Dr. Grogan's wife, Alice; two sons; and five grandchildren survive him.

JAVMA 15 October 2013

Dr. Armando E. Hoet, DVM, PhD, **DACVPM** and **Dr. Juliette Hanson**, DVM, **DACVPM** cited (Contributing authors) in October 2013 AJVR article titled *Effects of dietary vitamin A content on antibody responses of feedlot calves inoculated intramuscularly with an inactivated bovine coronavirus vaccine*.

Conclusions and Clinical Relevance– Dietary vitamin A restriction increases marbling in feedlot cattle; however, its effect on antibody responses to vaccines is unknown. A low vitamin A diet compromised the serum IgG1 responses against inactivated BCoV vaccine, which suggested suppressed T-helper 2-associated antibody (IgG1) responses. Thus, low vitamin A diets may compromise the effectiveness of viral vaccines and render calves more susceptible to infectious disease. (Am J Vet Research 2013;74:1353-1362).

With Great Sadness...Dr. Robert J. Schroeder

Robert J. Schroeder, 91, died June 4, 2013, in Palm Desert, Calif., where he had recently moved. The AVMA's 86th president led a distinguished career in veterinary medicine and public service. He was an AVMA honor roll member.



In 1991, Dr. Schroeder received the AVMA Public Service Award for outstanding contributions to public health and regulatory veterinary medicine. "Some of the greatest moments of my life have been here with the AVMA, and this is certainly one of them," he said in accepting the award.

Born into a farming family in Fort Collins, Colo., Dr. Schroeder received his DVM degree from Colorado State University in 1947 and spent the ensuing year with the Department of Agriculture working in Mexico on the Mexican-American campaign against foot-and-mouth disease. Then, he joined the Los Angeles County Livestock Department. In 1957, he was named director of the department, a title that changed to county veterinarian in 1965, and in 1972, he was promoted to deputy director of comparative medical and veterinary services, the position from which he retired in 1979.

At the University of Southern California School of Medicine, Dr. Schroeder held a dual academic appointment as clinical professor of pathology (comparative medicine) and clinical professor of community medicine and public health. He was instrumental in establishing the school's Section on Comparative Pathology. In 1979, the school named him emeritus professor of pathology.

Dr. Schroeder was instrumental in establishing the Center for Comparative Medicine at the University of California-Davis. He was a charter diplomate of the **American College of Veterinary Preventive Medicine**.

In 1966, Dr. Schroeder won a three-way contest for AVMA president-elect, defeating two veterinary college deans. Earlier, he had served on the Executive Board, from 1961-1966. In 1960, he was secretary of the AVMA Section on Regulatory Veterinary Medicine. When the AVMA established the National Television Advisory Committee in 1966, he was named to direct it. He was a member of the AVMA Council on Education from 1969-1974 and chair of what is now the Committee on Veterinary Technician Education and Activities.

His term as AVMA president was from 1967-1968. In his address as incoming president, he recommended that the House of Delegates instruct the Executive Board to immediately begin an in-depth study of large animal practice, which he thought was struggling. Only 7 percent of AVMA members were large animal practitioners at that time, and many were leaving for other fields. He also recommended that the AVMA redefine and clarify the AVMA administrative structure and responsibilities of officers and governance bodies, have the membership elect the president-elect, establish a continuing education program, and approve representation of special-interest groups in the HOD.

Dr. Schroeder served as president of the Southern California VMA in 1960 and on several committees of the California VMA.

His other organizational affiliations included chairing the Public Health Committee of the U.S. Livestock Sanitary Association and the Food and Agriculture Committee of the Los Angeles Chapter of the United Nations Association. Dr. Schroeder was an adviser to the board of directors of the Los Angeles County Farm Bureau, a member of the Agriculture Committee of the Los Angeles Chamber of

Continued on next page

With Great Sadness...Dr. Robert J. Schroeder

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Commerce, an executive committee member of the U.S. Animal Health Association, and a trustee of the Los Angeles Zoo Association. He was active in the Medical Research Association of California.

Colorado State University's College of Veterinary Medicine & Biomedical Sciences bestowed its Honor Alumnus Achievement Award on him in 1969. He also received the Extraordinary Service Award from California Regional Medical Programs, a Distinguished Service citation from the Los Angeles County Board of Supervisors, the Distinguished Award for Veterinary Leadership from the Southern California VMA, and the Distinguished Service Award from the Southern California Alumni chapter of CSU.

Dr. Schroeder served his country as a 1st lieutenant in the Paratrooper Field Artillery in World War II and as a 1st lieutenant in the Army Veterinary Corps during the Korean War.

Dr. Schroeder and his wife of 65 years, Jan, lived in Downey, Calif., for more than 60 years. After his retirement, they spent more than 25 years indulging their passion for fishing, clamming, crabbing, and camping. They fished their way from the tip of the Baja California peninsula to the coastal shores of Alaska.

He is survived by his wife; his daughter, Jeri Barry; his sons, Craig Schroeder and Curt Schroeder; five grandchildren; and three great-grandchildren.

JAVMA 1 September 2013

With Great Sadness...John C. Smith



Dr. Smith (KSU '88), 57, Honolulu, died April 30, 2013. A colonel in the Army Veterinary Corps, he was deputy commander for veterinary services of the Public Health Command Region-Pacific at Tripler Army Medical Center in Hawaii. During his military service, which began following graduation, Dr. Smith served in various capacities worldwide, including assignments in Honduras, Germany, Afghanistan, Iraq, and Kuwait. He received the Bronze Star, Defense Meritorious Service Medal, Army Meritorious Service Medal with three Oak Leaf Clusters, Joint Service Commendation Medal, Army Commendation Medal with two Oak Leaf Clusters, Joint Service Achievement Medal, Army Achievement Medal with two Oak Leaf Clusters, and U.S. Marine Corps Good Conduct Medal. Dr. Smith was also honored with the National Defense Service Medal with two Bronze Service Stars, Afghanistan Campaign Medal, Global War on Terrorism Expeditionary Medal,

Global War on Terrorism Service Medal, Army Service Ribbon, Overseas Service Ribbon with Numeral 3, Joint Meritorious Unit Citation with three Oak Leaf Clusters, Expert Field Medical Badge, The Order of Military Medical Merit.

A diplomate of the **American College of Veterinary Preventive Medicine**, he was a member of the American Association of Food Hygiene Veterinarians, American Association of Public Health Veterinarians, and Kansas VMA. Dr. Smith was also a member of Veterans of Foreign Wars. His wife, Tatianna Levasheva; a son; two stepsons and a stepdaughter; and three step-grandchildren survive him.

JAVMA 15 September 2013

Rabies Prevention Poster Available

Electronic copy available on One Health Commission website: <https://www.onehealthcommission.org/en/resources/>

NEVER TOUCH A BAT BATS CAN HAVE RABIES



Photo credit: Lee Mackenzie



You can't tell by looking!

- Bats are shy animals that avoid human contact
- Any bat can have rabies, a deadly disease
- You could get rabies from a bat bite
- If you get bitten by a bat, wash the wound with soap and see a doctor

Keep bats out of your home:

- Ask your parents to bat proof your home
- If you find a bat in your home, call the health department

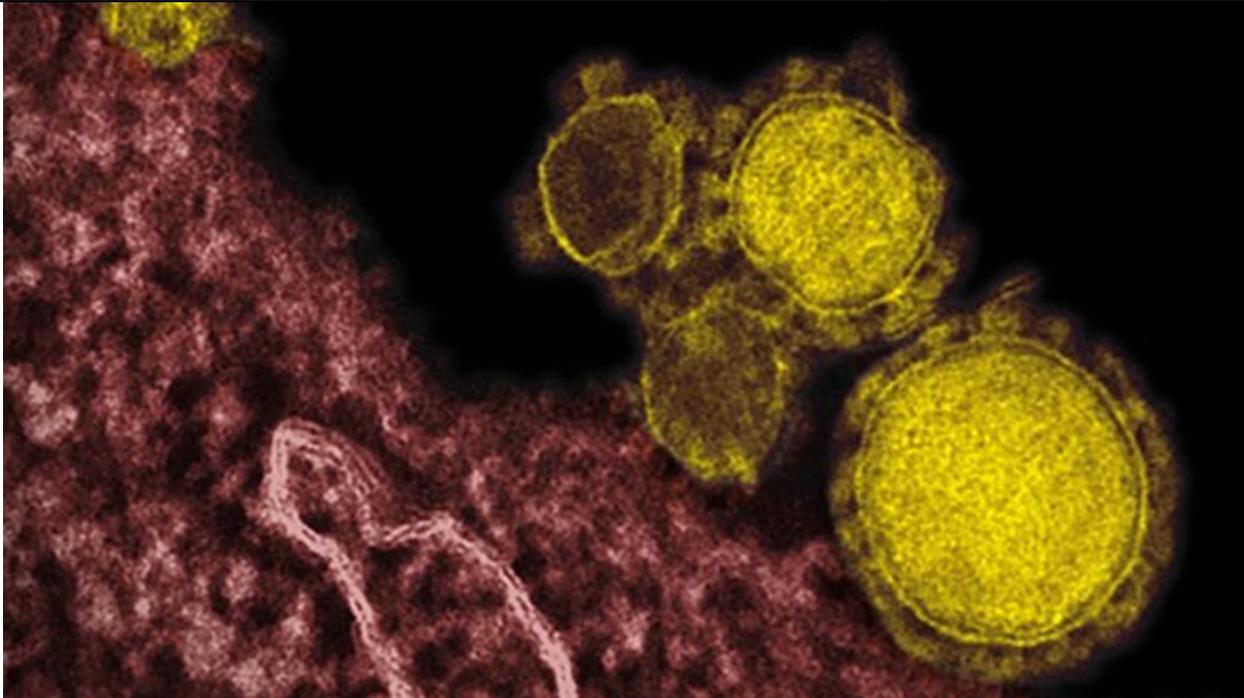
If you can touch a bat, don't!

- We need bats so don't hurt them
- A bat that lets you touch it may be sick
- If you see a bat, *do not touch it*
- Call an adult for help



www.rabiesalliance.org

The Scariest Infectious Diseases Right Now



This electron microscope image shows the MERS virus, colored in yellow. The mysterious new respiratory virus that originated in the Middle East spreads easily between people and appears more deadly than SARS, doctors reported. (AP2013)

Between the emergence of the deadly MERS and H7N9 viruses – and the success of Brad Pitt’s new movie “World War Z” in which a viral outbreak turns half the world into zombies – it’s easy to be nervous about potentially dangerous germs and bacteria lurking around on surfaces and in the air. Dr. Daniel Caplivski, director of the Travel Medicine Program and associate professor in the division of infectious diseases at Mount Sinai Medical Center in New York City, detailed some of the most worrisome infectious diseases out there right now – and what’s being done about them.

Influenza

The flu pops up throughout the world every year, but the virus is at its most dangerous when a new strain emerges – such as the H7N9 bird flu currently circulating in Asia. So far, H7N9 has sickened more than 130 people and has proven fatal to over a third of patients hospitalized with the disease, according to researchers.

“(New strains) make it difficult for (our) bodies to

respond adequately,” Caplivski said. “Anytime we see something new like that we get concerned it could become a pandemic. If it does have the ability to spread from person to person, (then) because of international travel, that would be a big problem.” Though cases of H7N9 appear to be leveling off, Caplivski noted that experts will continue to monitor the virus. In the meantime, the best protection against the flu is to get the yearly vaccine.

“The flu vaccine from year to year is based on best predictions for what strains will be circulating,” Caplivski said. “(But) there will always be some hits and misses where they don’t get the vaccine right based on what they were predicting.”

Antibiotic-resistant superbugs

Health experts in the United States have become increasingly concerned about the rise of antibiotic-resistant superbugs, bacteria that no longer respond to antibiotic treatment.

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The Scariest Infectious Diseases Right Now

Continued from previous page “If you do complete the treatment, most of the time you’ll have good success,” Caplivski said. “But some of the more resistant strains we’re seeing, especially in places like South Africa, have made it more difficult to treat.”

“Bacteria have found more and more ways around typical antibiotics,” Caplivski said. “There aren’t a lot of new antibiotics approved or in the pipeline, because it’s not a very profitable move. It’s more profitable to make cholesterol or weight loss drugs people will be on for the rest of their life.” Some of the most concerning strains include CRE (carbapenem-resistant *enterobacteriaceae*), MRSA (Methicillin-resistant *Staphylococcus aureus*) and *C. diff* (*Clostridium difficile*).

Each of these superbugs can be potentially fatal in people, due to the lack of drugs available to treat them. Most of these strains are acquired in hospital settings, and Caplivski noted that it’s important to remind doctors and nurses to practice proper hand hygiene. The Centers for Disease Control and Prevention (CDC) has more information on these different antibiotic-resistant superbugs.

Tuberculosis

Tuberculosis (TB), caused by the bacterium *Mycobacterium tuberculosis*, typically attacks the lungs and can be fatal if left untreated, according to the CDC. In 2011, there were 10,528 reported cases of tuberculosis in the United States, and although TB cases in the U.S. have declined since 1992, doctors remain concerned. “It remains one of these things which is difficult to get a lot of funding (for) – another one for which we need new drugs because there are more resistant strains,” Caplivski said.

Outbreaks of TB occur periodically throughout the U.S. Recently, three high school students at Robert E. Lee High School in Springfield, Va., were diagnosed with TB and health officials are investigating whether the disease spread to any others. Additionally, TB remains a major problem in the developing world; the World Health Organization stated that 8.7 million new cases of TB were reported in 2011, and 1.4 million people died of the disease.

MERS virus

Within the past year, 60 cases of the MERS virus, a respiratory infection reported to be more deadly than SARS, have been detected throughout the world. Though most cases have appeared in Saudi Arabia, the virus has also been reported in Jordan, Qatar, the United Arab Emirates, Britain, France, Germany, Italy and Tunisia.

Though there have been no confirmed cases of the MERS virus in the U.S., the CDC is currently preparing to combat the contagion should it make its way to American soil. Based on recent reports, more than 38 deaths from MERS have been reported around the world.

“We saw how quickly things could spread via airlines in 2003 (during the SARS outbreak),” Caplivski said. “I think that those lessons have been important in global surveillance of these infectious diseases. They’re tracking at a global level whether these things are becoming more widespread and moving from person to person.” Caplivski added that while MERS is a concern, the number of cases remains low.

HIV

About 50,000 people still become infected with the human immunodeficiency virus (HIV) in the United States each year. And the disease continues to be a huge problem throughout the world as well, with 2.5 million new cases of HIV being diagnosed in 2011, according to the CDC. Since the start of the HIV epidemic, the CDC reported that nearly 30 million

Continued on next page

The Scariest Infectious Diseases Right Now

Continued from previous page Yet, lack of HIV testing continues to be a problem.

people have died of AIDS, which is caused by HIV infection. However, tremendous progress has been made regarding the treatment of people currently living with HIV. “We’ve had a lot of great success with HIV, because we’re now using pills that are one pill taken one time a day,” Caplivski said. “They are strong medications with pretty minimal side effects.”

Based on the most recent data, about 1.1 million people in the United States were living with HIV at the end of 2009, and of those people, about 18 percent do not know they are infected. “There are still gaps in people who don’t know they have the disease, (we’re working on) moves to get them tested and get them treated,” Caplivski said.

By *Amanda Woerner*, FoxNews.com, 26 June 2013
Submitted by *Dr. Ron Warner*

Epidemiology Specialty Update

Dr. Mark Starr

Hello all! I have just a few brief updates to items discussed in the August News and Views (<http://www.acvpm.org/files/newsletters/ACVPM-August-2013-Newsletter.pdf>), and some opportunities coming your way to do that “little something” that you’ve been waiting for a chance to do for the Specialty.

You may recall that the Specialty approached ACVPM to take a look at other **specialty models**, including one similar to other boards (such as ACVIM) where all diplomates specialize in some area. At its September meeting, the ACVPM Executive Board expressed support for further evaluation of options and impacts by the workgroup.

We need your ideas and suggestions in two areas! 1) The deadline for proposed **continuing education** sessions for the Boston (2015) AVMA Convention is in January 2014, so please send in any ideas you have for our Continuing Education Committee to consider as soon as possible. 2) The ACVPM **website** is still undergoing revision, so please send us any ideas you have for improvements to the Epidemiology Specialty web presence. I haven’t received any ideas on these since August, so the time is NOW – we are definitely interested. Send me an email about this, or anything else on your mind, at Mark.Starr@cdph.ca.gov.

Lastly, your officers and committee chairs have an upcoming meeting. I’ll tell you about that in the next newsletter, but we know that there will be opportunities for members to join the fun by participating on one of our important committees. So please give this some thought and consider volunteering for one. The four committees are: Examination, Credentials, Nominations, and Continuing Education – pick the best fit for you and send me a note!

I’m looking forward to hearing from you, and I wish you all the best during the coming holiday season.

Mark Starr

