



Kansas City, Missouri, Health Department,
Office of Epidemiology & Community Health Monitoring



Public Health
Prevent. Promote. Protect.
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“Did You Take SyPHILis Home Last Night?”

Kansas City experienced a dramatic increase in the number of early syphilis cases reported in the first half of 2005. Forty-eight cases were reported between January and June, compared to only 12 cases in 2003 and 17 cases in 2004, for the same time frame. Forty of the 48 cases were male, including 29 men-who-have-sex-with men (MSM). More alarming was that 25 of the 48 cases were coinfecting with HIV.

To control the spread and prevent future outbreaks, it was crucial for Kansas City Health Department to educate those most vulnerable to get tested, get treated, and arm themselves with knowledge to prevent the spread of syphilis. Therefore, the Health Department teamed up with Fleishman-Hillard, Inc., a local public relations firm, to educate high-risk populations about syphilis and promote free confidential testing and treatment.

The campaign was entitled “Did You Take SyPHILis Home Last Night?”. It incorporated select core messages into advertising, public relations, and event execution to send a united message to key audiences that syphilis was on the rise in Kansas City, and getting tested and treated was important. A grassroots and media relations program resulted in a 62% increase in testing as compared to the same time period without an outreach campaign.

Case tracking by the Health Department identified 5 zip codes in the Kansas City metropolitan area that were showing an increased incidence of syphilis, therefore the campaign centered on those particular areas. The challenge was getting the message to those driving the rapid disease spread, notably MSM and sex workers. Those groups had the greatest risk of infecting the general population, because they frequently hide

their risky lifestyles from their “regular” sex partners.

The campaign had several objectives

1. Increased awareness of syphilis in the Kansas City metropolitan area, specifically among the most vulnerable populations.
2. Education of high-risk populations about the importance and ease of testing and treatment.
3. Increasing the amount of testing and treatment completed within the campaign time frame as indicated through records at designated health clinics.

The campaign used several strategies to meet these objectives

1. Focusing educational efforts on where target audiences lived, worked, and participated in risky activities.
2. Reaching the target audiences through peer voices, word-of-mouth, local organizations, and urban-based physicians to spread the message that syphilis was prevalent among specific demographics.
3. Publicizing testing and treatment opportunities that fit with the target audience need for confidentiality.
4. Empowering high-risk populations to call testing centers to schedule a test in a confidential environment.

The campaign used several approaches to these strategies

1. **Street Team** - the campaign recruited 30 volunteers to distribute materials. The street team distributed syphilis information materials to over 65



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local venues.

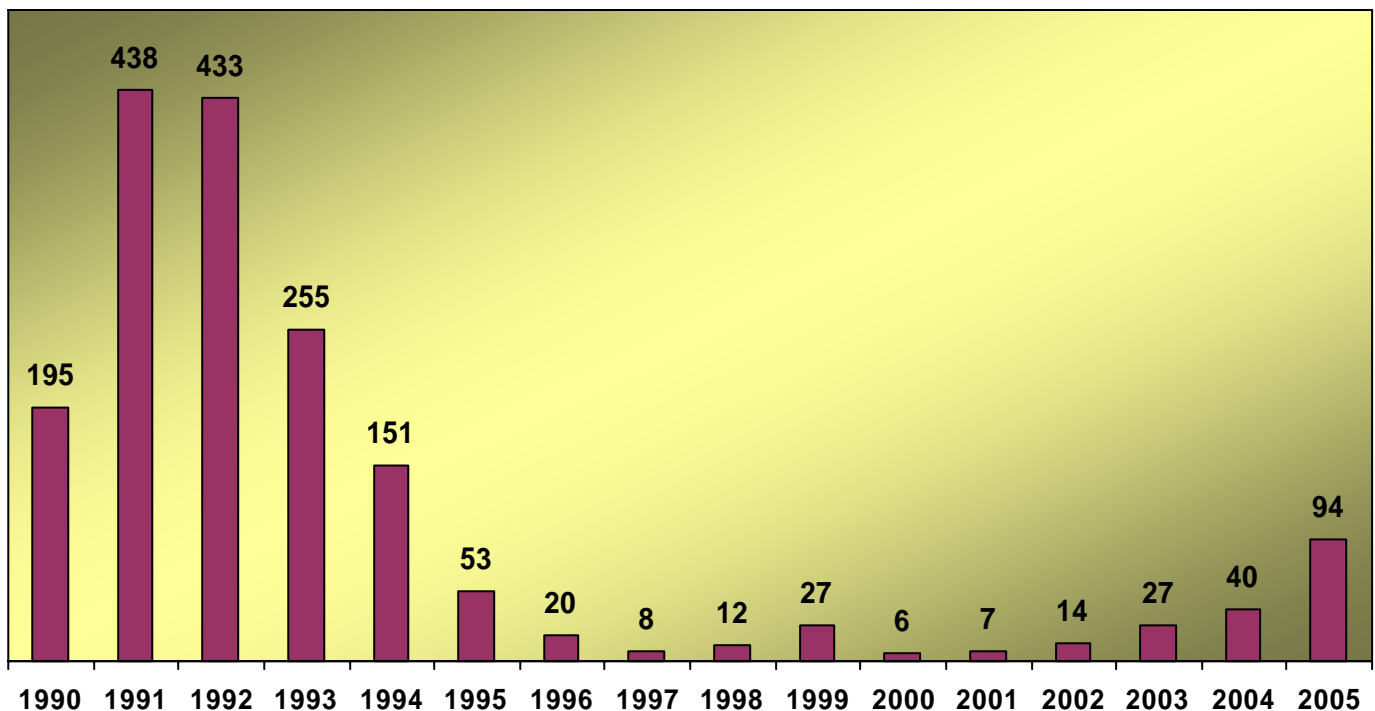
- 2. Web banners** –web banners were proactively pitched to local web sites. The syphilis campaign reached a large internet population, with more than 70,000 web hits.
- 3. Radio public service announcements and radio advertising** - eight local radio stations were contacted to gauge whether they would run the public service announcements. Five radio stations played the public service announcement, including 93.3 and 95.7, which featured paid placements.
- 4. “Flo on the Road”** - Fleishman-Hillard approached Flo, a local celebrity drag queen, as a spokesperson because she was widely accepted in the gay and straight communities. Flo was incorporated into several activities including: PSA taping, media interviews, and on-site representation at night clubs while in costume. Flo also incorporated core syphilis campaign messages into her three standing drag shows per week, making syphilis a household word in key nightclubs,

rather than a topic that is shunned.

The “Did You Take SyPHILis Home Last Night?” campaign earned the 2006 prestigious Silver Anvil Award for excellence in Public Service Associations/Nonprofit Organizations, sponsored by The Public Relations Society of America (PRSA), the world's largest organization for public relations professionals. The award is annually given to organizations that have successfully addressed a contemporary issue with exemplary professional skill, creativity and resourcefulness. Silver Anvil Awards recognize complete programs incorporating sound research, planning, execution and evaluation. Additionally, the campaign was also recognized with a City Council Resolution by the Mayor and City Council of Kansas City, Missouri and with a Silver award from the Kansas City chapter of the Public Relations Society of America.

Ninety-four cases of early syphilis were documented among Kansas City residents in 2005 (Figure 1) and although the “Did You Take SyPHILis Home Last Night?” campaign ended in December, the Health Department continues to have street teams conduct community outreach to offer education and syphilis testing. Despite these efforts, however, there was a 9% increase in re-

Figure 1 Primary, secondary, and early latent syphilis among Kansas City, MO, residents, 1990-2005



ported early syphilis cases during the first three quarters of 2006. MSM are still 81% of the males reported with early syphilis. There was, however a 63% increase in the number of females reported with early syphilis and a 62%

increase in the number of African Americans reported with early syphilis. This evolving case demographic is expected as the outbreak spreads to more main stream members of Kansas City.

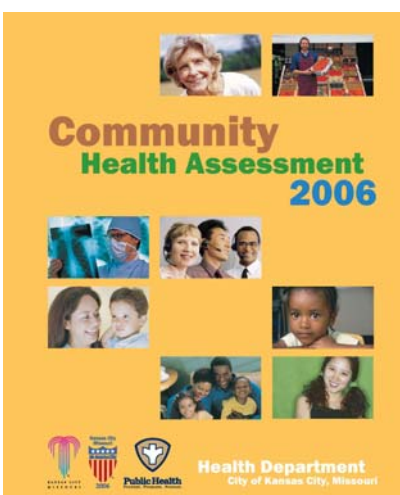
Change in Cardiac Arrest Protocol

Beginning the 1st of April 2006, Kansas City's emergency medical system (EMS) providers, Metropolitan Ambulance System Trust (MAST), Kansas City Fire Department, and the Kansas City International Airport Police have been using a new protocol developed by the EMS section of the Kansas City Health Department for the resuscitation of adult cardiac arrest patients. The new protocol emphasizes continuous chest compressions (CCC), while de-emphasizing the conventional Advanced Cardiac Life Support (ACLS)-style of aggressive ventilations and multiple shocks for shockable rhythms. It utilizes two routes of action for the rescuers depending on witnessed versus non-witnessed events. If the event is witnessed and the patient is found to be in a shockable rhythm and a defibrillator is immediately available, immediate defibrillation is still indicated. If the event is not witnessed, the patient first receives 200 aggressive continuous chest compressions with the compression to ventilation rate of 50:2, followed then by one single defibrillation, not three as had been the standard. A second set of 200 continuous chest compressions follow immediately, followed by a

second defibrillation, if warranted. A third set of 200 continuous chest compressions will then follow if the patient remains without a pulse, which is followed by conventional drug, IV, and airway therapy.

In comparing the first three months of the year, January, February and March, with the first three months of system-wide implementation of the new protocol, April, May, and June, the return of spontaneous circulation, (ROSC) for adult cardiac arrest patients who presented in a shockable rhythm increased from 17% to 66% (ROSC is the return of measurable vital signs during the resuscitation on-scene that remain present upon arrival in the emergency department). July and August numbers were equally impressive compared to the previous year's data which used conventional ACLS therapy. While the increase in ROSC is extremely exciting and is a positive predictor for survival, the EMS section of the Kansas City Health Department is tracking these patients to determine if an equally larger percentage of them survive to hospital discharge.

Community Health Assessment 2006 Released



On 9/11/06, the Kansas City Health Department released its *Community Health Assessment 2006* report. The full 300 page report and all of its individual sections are available in .pdf format at www.kcmo.org/health.nsf/web/pubhome. This is the latest edition to the

Health Department's annual series of community data that provides a baseline against which improvements in the community's health can be measured. Each edition of this report has built upon prior data and has expanded both the topics covered and the level of data analysis for many areas. Undoubtedly, there are other data in the community that could be used to enhance the information presented in these reports. If your organization has data that it would be willing to share for the *Community Health Assessment 2007* report, please contact Gerald L Hoff, PhD, FACE, at 816.513.6149 or Gerald_hoff@kcmo.org.

Potpourri

GLOBAL WARMING may be raising the risk for plague outbreaks with warm springs and wet summers contributing to a rise in *Yersinia pestis* prevalence among rodents. A long term study (1949-1995) of plague in gerbils in Kazakhstan found that a 1 °C (1.8 °F) rise in spring temperature increased the prevalence of plague in rodents by 60% (*Proc Nat Acad Sci* 2006; 103:13110-13115). Increased prevalence of infection among rodents translates into increased risk for human through contact with infected rodents, fleas, and infected cats.

During 1990-2005, a total of 107 cases of plague were reported in the United States. There has been increased plague activity in 2006 that is consistent with the predicted relationship between climate and the frequency of human plague in the southwestern US (*MMWR* 2006; 55:940-943). Two consecutive February-March periods with high precipitation and an intervening cool summer predicts increased cases of plague the next summer; this effect is thought to lead to increased reproduction and survival rates among rodents and fleas.

HEPATITIS DELTA VIRUS (HDV) is found only in association with hepatitis B (HBV) infections. Persons who are coinfecting with HBV and HDV may have more severe acute disease and higher risk (2-20%) of developing acute liver failure than persons infected with HBV alone. Persons with chronic HBV infection who are superinfected with HDV usually also develop chronic HDV infection—a combination more likely to progress to cirrhosis of the liver. There are 8 genetic strains or clades of HDV, the clinical consequences of which have yet to be evaluated (*Emerg Infect Dis* 2006; 12:1447-1450). Prevention of HDV infection is through HBV vaccination.

CURRENTLY, SPINACH and *Escherichia coli* O157:H7 contamination is a major topic in the media as nearly 200 persons are known to have become ill from eating raw spinach and several deaths have been re-

ported. The source of contamination most likely was irrigation or flood waters containing the bacteria.

Some persons have asked if manure could contaminate plants like spinach. The answer would appear to be no if human sewage sludge is applied to fields where crops are grown, according to researchers at the Imperial College of London. They found that *E coli* O157:H7 levels plummet when applied to fields and that within 70 days as little as 10 bacteria per gram of soil remain.

COMMON HOUSEPLANTS such as ficus, yucca, ivy and palm tree, could be the source of many an allergy sufferer's misery (*Allergy* 2006; 61:1138-1140). Nearly 80% of allergic rhinitis sufferers tested had sensitivity to at least one of these houseplants, compared to none of the persons without allergic rhinitis. Sensitivity, however, does not mean that the allergen was the cause of the rhinitis in that person, further clinical evaluation would be required.

ENDOGENOUS RETROVIRUSES (ERVs) typically account for 10% of a person's DNA. Thought to be relics of ancient infections "dumped" into the genetic equivalent of the attic, new studies are now suggesting that ERVs actually may be evolutionarily conserved because we need them. Studies in sheep have shown the endogenous Jaagsiekte retrovirus helps the early embryo implant in the uterus and transform it from a clump of cells into a shape from which the placenta can develop (*Proc Natl Acad Sci* 2006 Sept 15; epub ahead of print). It was suggested that the human counterpart ERV called HERV-W plays a similar role in embryonic development.

TALLER WOMEN are more likely to have twins according to a recently published study (*J Reprod Med* 2006; 51:694-698) and is linked to an insulin-like growth factor which has been linked to height.

Healthy People, Healthy Communities

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