2006 Update
Volume 3, Issue 1

Get Smart News

Centers for Disease Control and Prevention

Welcome!

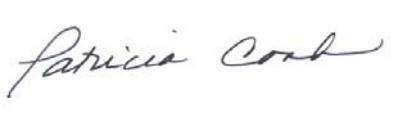
This issue of our newsletter features spring and summer news about all three of CDC's antimicrobial resistance campaigns, including program activity updates, a summary of the 2006 Get Smart Conference, local level program activities, new partnerships, and two new columns. I will also discuss changes in campaign staff and CDC organization.

In January 2006, Cindy Friedman, MD, joined the Get Smart: Know When Antibiotics Work campaign as the new Medical Director. Dr. Friedman specializes in internal medicine and infectious diseases, and has been at CDC since 1995. Dr. Friedman has worked in the Foodborne and Diarrheal Diseases Branch, and for the National Center for Infectious Diseases as a liaison to the Federal Bureau of Investigation in Washington, DC. Many of you had the opportunity to meet Dr. Friedman at the *Get Smart in Action* conference in May at CDC. We look forward to working with Dr. Friedman and her vision for new activities.

Frankie Shipman, MPH, was assigned to the Get Smart campaign from April through September as a Public Health Prevention Specialist. Ms. Shipman was involved in several campaign projects, including the design of an evaluation for the multicultural outreach initiative. Public Health Prevention Service fellows have completed many projects for us over the years and have been valuable assets to the campaign. We bid farewell to Brendan Noggle, Drug-Resistant *Streptococcus pneumoniae* Surveillance Coordinator. He worked on many Get Smart projects, as well as projects within our branch during his time at CDC. We wish him the best in his new ventures. And Tanya Hickson, Health Communications Consultant, is taking a new position elsewhere in Atlanta. Tanya has worked with Get Smart since 2004 and has been involved with our pharmacy education initiative, partnership development, state program support, and so many other things. Her presence and contributions to our campaign, and team, will be missed.

For over a year, CDC has been in the process of a reorganization to facilitate collaboration of CDC centers, divisions, and programs. The Get Smart: Know When Antibiotics Work campaign is still a part of the Respiratory Diseases Branch, which now resides in the Division of Bacterial Diseases* (DBD) in the newly formed National Center for Immunization and Respiratory Diseases* (NCIRD). NCIRD is composed of several divisions in addition to Bacterial Diseases, including Viral Diseases, Influenza, Immunization Services, and Global Immunizations.

I am also announcing my retirement from CDC. Effective January 2007, I will no longer serve as the Program Director for Get Smart. I will be taking more time to spend with my husband, children, and nine grandchildren. I have worked on the Get Smart campaign since 1998, and have enjoyed every minute of the development and implementation of its activities. What I have enjoyed the most is working with all of the wonderful people I have met, including Get Smart team members, state-based program coordinators, our external partners, and so many others. These relationships have been important to me, and if I can be of any assistance to you in the future, please contact me by email at xpcook@bellsouth.net. Thank you for your continued commitment to this issue, and to the success of the Get Smart campaign.



Patricia Cook
Program Director

* These organizational names are proposed, and approval is pending.

Educational Tools and Media

Get Smart's New Website Up and Running!

For the past several years, CDC has been redesigning the look of its Internet homepage. Following in stride, the Get Smart staff felt that it was time to redesign the campaign website (www.cdc.gov/getsmart). The effort began with a comprehensive evaluation of the website, which included a survey of primary users (parents, providers, partners, etc.) to get feedback on the content and its usability. The results confirmed that the website needed to be changed.

Get Smart staff wrote new content and combined it with information from CDC's other antimicrobial resistance websites. In addition to the new content, an entirely new look and organization of the website was created. The biggest challenge was designing a website template that would work for the various target audiences.

There are now sections on our website for each target audience: What Everyone Should Know and Do, Healthcare Providers, Partners, Program Planners, and Media. There are also quick links to specific topics: About Antibiotic Resistance, Get Smart Campaign Info, Campaign Materials, and a few other main headings. This new design is easier to navigate and provides more information for each target audience. Be sure to visit this new website and check out all our campaign resources, including radio and television public service announcements, a media toolkit, a program evaluation manual, a variety of print materials, and many other tools.

Additionally, Get Smart has launched a similar website in Spanish. It can be found at www.cdc.gov/antibioticos. This site currently features the campaign's Spanish-language brochure, radio PSA, and poster, in addition to links to other appropriate antibiotic use materials or web pages in Spanish. We are in the process of finalizing Spanish versions of our two fact sheets and viral prescription pad. With the help of the CDC en Español office and members of the Get Smart staff, the Spanish site will be expanded to include these newly developed materials and more pages from the English website. If you have suggestions for either the English or Spanish website, please contact getsmart@cdc.gov.

Get Smart Campaign Project Updates

Michigan Antibiotic Roundup

The Get Smart campaign promotes appropriate antibiotic use through many activities. One effort is to work in the pharmacy arena to promote patient adherence to antibiotic prescriptions. New adherence messages encourage consumers to take their prescriptions as prescribed by their healthcare provider, not to share or save the prescriptions for later.

With the support of campaign partners and the CDC Foundation, the Michigan Antibiotic Resistance Reduction (MARR) Coalition and Get Smart launched a statewide public health initiative in Michigan aimed at educating consumers about the importance of appropriate antibiotic use. The "Antibiotic Roundup" program asked Michigan residents to take old or expired antibiotics to local Meijer pharmacies for disposal from January 25 through April 25, 2006. A total of 1,700 prescriptions were collected at 86 Meijer stores by pharmacists, who were trained to promote appropriate use to their customers. Roundup participants received educational materials regarding behaviors that contribute to the spread and development of antibiotic resistance, as well as a $5 voucher for purchases at Meijer.

Collaborating partners included:
Michigan Antibiotic Resistance Reduction (MARR) Coalition (www.mi-marr.org): a CDC-funded state level program that undertook this initiative as a special project, led team logistics, and served as the voice for media interviews and local contacts.
Meijer Retail and Superstore: served as the host pharmacy.
PharmaLink Inc.: retrieved and disposed of the antibiotics collected.
Chamberlain Public Relations: orchestrated the media campaign.
Becton, Dickinson and Company (BD): donated 250 tamper-proof receptacles to collect prescriptions in 86 participating stores.
Harris Interactive: conducted a pre- and post-event statewide telephone survey of the community.
CDC Foundation: managed support from program partners to pay for expenses.

Collaborating agencies:
Food & Drug Administration (FDA): provided support to place bus advertisements.
U.S. Environmental Protection Agency (EPA), Region 5: provided guidance and regulated safe handling, collection, and disposal of prescriptions.
Michigan State Legislators and Michigan State Dept. of Environmental Quality: involved in endorsement and regulation of Roundup.

(continued on page 5)

State and Local Program Updates and Resources

Kansas City Antibiotic Resistance Task Force kickoff team. From left to right, Hemal Patel, Eric Blake, Diana Toe, Amy Christensen, Deborah Bock.

Kansas City Antibiotic Resistance Task Force Kickoff

On May 18, 2006, the Kansas City Antibiotic Resistance Task Force (KART) hosted a coalition kickoff event in Kansas City, MO. This event served as a platform for KART to move forward with an array of educational activities. The kickoff had 27 attendees including: physicians, infectious disease specialists, pharmacists, nurses, health plans, employer groups, and pharmaceutical manufacturers. Presentations were given at the kickoff event by Mary Eley – Michigan Antibiotic Resistance Reduction (MARR) Coalition, Alison Patti – CDC's Get Smart campaign, and Melinda Lacey – Infectious Disease Specialist from Kansas University Medical Center.

Over the next year KART plans to focus on day care centers by providing education to children and parents about antibiotic resistance and hand hygiene. This initiative will involve University of Missouri, Kansas City students serving as educators. KART would also like to involve school nurses and other interested participants.

KART received a Certificate of Recognition from CDC for its continued dedication, which was especially deserved because Missouri no longer receives CDC funding to support their program.

Wingate University School of Pharmacy (NC) Students Bring Antibiotic Resistance Awareness to the Local Community

Six second-year Doctor of Pharmacy students at Wingate University School of Pharmacy spent their fall semester educating North Carolinians about the dangers of antibiotic resistance. As part of their program, students must develop a healthcare outreach project for the local community. Each team works with a faculty advisor to assess the current healthcare needs of the community, develop a project to meet that need, and then implement that project during the semester. After preliminary research and initial discussions with their advisor (Dr. Glenn White), the danger of antibiotic resistance was the healthcare issue that was chosen.

The team contacted CDC to work with the Get Smart campaign. Get Smart staff put the student team in contact with NCTars, the North Carolina chapter of Get Smart. The goal of the project, "Fighting Antibiotic Resistance," was to counsel at least 100 people on techniques to help prevent antibiotic resistant infections. The topics included: understanding the difference between viral and bacterial infections, using proper hygiene to prevent infections, and adherence to prescribed antibiotics. The education program was delivered on the Wingate University campus and at two community pharmacies.

Nearly 300 pamphlets (English and Spanish) were distributed to participants. One-hundred four community members were counseled, and surveys showed that 98% found the information beneficial. Student team member, Brandi Fernandez, summarized the team's feelings about their work, "It was great to see how excited the pharmacies were to have us. The patrons were receptive and appreciative of the work we were doing. We really felt like we were making a difference and we will be taking steps to continue to build upon the work we have begun." Dr. White commented, "The inappropriate utilization of antibiotics is accelerating the development of antibiotic resistant bacteria. It is critical that the public be educated as to the appropriate, and inappropriate, uses of antibiotics to ensure that physicians and pharmacists of the future do not find themselves fighting a losing battle against bacterial infection. As part of their training in pharmaceutical care at Wingate, these students undertook this all important public health project."
Guest writer: Christine Williams, Doctor of Pharmacy Student, Wingate University School of Pharmacy

Wingate University School of Pharmacy
Student Group - Left to right: Christine Williams, Edwin Keeter, Chris Han, Dr. Glenn White (faculty advisor), Brandi Fernandez, Julie Zacharias, and Lauren Borgersen

2006 Conference Summary

Get Smart in Action: Old Challenges, New Challenges, Innovative Solutions

The Centers for Disease Control and Prevention's (CDC) *7th Annual Conference to Promote Appropriate Antibiotic Use* was held on May 3rd and 4th, 2006, at CDC's headquarters in Atlanta, Georgia. Attendees participated in this two-day conference with the goal of preventing antibiotic resistance through the promotion of appropriate antibiotic use. The participants in the conference represented state and local health departments, professional groups, academia, the scientific community, and many other organizations.

The theme of the 2006 conference was *Get Smart in Action: Old Challenges, New Challenges, Innovative Solutions*. Cindy Friedman, MD, medical director of the Get Smart campaign, opened the conference with a review of the year's accomplishments. John Powers, MD, a lead medical officer at the Food and Drug Administration (FDA), addressed policy issues. Highlights of his session included discussion of advances in clinical trial design and analysis. Dr. Powers recommended that providers consider harmful side-effects associated with antibiotics when determining whether to prescribe or not to prescribe.

Edith Blondel-Hill, MD, of British Columbia Children's Hospital, highlighted the successes and lessons learned by Canada's *Do Bugs Need Drugs* pilot project. This project has developed key partnerships and print materials in nine languages. An internally conducted evaluation of their pilot project showed that patient and parent expectations to receive an antibiotic for a cold or the flu decreased, while awareness of handwashing as a tool for reducing infectious disease increased. CDC's surveillance program for drug-resistant pathogens, like *Streptococcus pneumoniae*, methicillin-resistant *Staphylococcus aureus* (MRSA), and *Escherichia coli*, were reviewed by Matthew Moore, MD, MPH, Melissa Morrison, MPH, and Tom Chiller, MD, MPH, respectively. Dione Harjo, MPH, of the Indian Health Service (IHS), provided steps for partnering with organizations that serve American Indian populations. She discussed how the Community Health Representative program is currently working with CDC to promote appropriate use of antibiotics at the tribal level.

Mary Eley of the Michigan Antibiotic Resistance Reduction Coalition (MARR), Jeff Bekos of Catalina Health Resource, and Steven Ebert, PharmD, of the Department of Pharmacy at Meriter Hospital, presented highlights of their collaborative national pharmacy initiative coordinated by the Get Smart campaign. Highlights included MARR's pilot *Antibiotic Roundup* program, development and distribution of prescription adherence messages on prescription bags in many of the nation's leading drug stores, and development of a continuing education course for pharmacists.

California, Indiana, Minnesota, New York, and North Carolina were each nominated for the Get Smart campaign's *Award for Innovation in Appropriate Antibiotic Use Programs in the Community*. Each of the state programs presented their work and provided tips for replicating their program in other states. Conference attendees voted for the most outstanding and innovative activity. **Indiana** received the most votes for its use of *The Little Elephant with the Big Earache*, a book written by Charlotte Cowan, MD, which was distributed to school-aged children in collaboration with Indiana's local library system.

Skill-building workshops were offered. Gloria Halley of California's Butte County Office of Education teamed with Mary Jo Knobloch, MPH, of the Wisconsin Antibiotic Resistance Network to present useful tips for building a coalition in support of state health departments. Chesley Richards, MD, MPH, and Rachel Gorwitz, MD, MPH, of CDC, joined state representatives to offer guidelines for developing an MRSA education campaign (see article in the "Healthcare Settings" section of this issue for additional details about this session). Representatives from the National Cattlemen's Beef Association, Tacoma-Pierce County Health Department, Ontario Ministry of Agriculture, Food and Rural Affairs, Pennsylvania Department of Health, and Washington State Dairy Federation offered insight into how to improve the appropriate use of antibiotics in farm animals.

Evaluation workshops were conducted to improve program evaluation capacity. Attendees at these sessions were introduced to the Get Smart campaign's new manual for evaluating appropriate antibiotic use programs and CDC's *Framework for Program Evaluation in Public Health*.

A detailed conference agenda may be viewed at the Get Smart: Know When Antibiotics Work campaign website under the Conferences section.

NEWS FLASH

New Guidelines on Diagnosis and Treatment of Cough

Irwin RS, Baumann MH, Bolser DC, et al. Diagnosis and management of cough: ACCP evidence-based clinical practice guidelines. *Chest* 1S-292S, 2006.

Focus on Providers

This is the first installment in a series focusing on different types of healthcare providers and the ways in which they can promote appropriate antibiotic use in community settings.

PHYSICIAN ASSISTANTS (PAs)

Physician Assistants are healthcare professionals who are licensed to practice medicine with physician supervision.[1] More than 58,000 PAs nationwide can be found working in a variety of settings, with numerous specialties in family practice, obstetrics and gynecology, surgery, and oncology. PAs are licensed to practice medicine in all states, the District of Columbia, the Commonwealth of the Northern Mariana Islands, Guam, and the United States Virgin Islands. PAs are authorized to prescribe medicine in forty-nine states, the District of Columbia and Guam. Indiana has not yet authorized prescribing rights to PAs.

PAs play a key role in promoting the appropriate use of antibiotics for their patients. PAs stay abreast of antibiotic prescribing guidelines as part of their continuing education. They create a climate of appropriate antibiotic prescribing in their work setting by implementing established guidelines. Behavior change in patients is best achieved through multidimensional efforts, such as face-to-face conversations, take-home educational materials, the promotion of messages in mass media, and changes in social and organizational norms.[2] The Get Smart Campaign has many educational tools for health care providers and patients. These tools can be downloaded from the campaign website at www.cdc.gov/getsmart.

The following organizations can be used as resources to help promote the appropriate antibiotic use in the PA educational and work setting:

- The American Academy of Physician Assistants (AAPA) is the only professional organization for PAs in all specialties. AAPA provides an annual continuing medical education program for all PAs;
- The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) accredits PA education programs;
- The Physician Assistant Education Association (PAEA) is the only organization representing physician assistant (PA) educational programs;
- The National Commission on Certification of Physician Assistants (NCCPA) grants PAs their national certification.

Guest writer: Marie-Michele Leger, MPH, PA-C
Director, Clinical & International Affairs
American Academy of Physician Assistants

Sources:
1. The American Academy of Physician Assistants website: www.aapa.org
2. Weissman, J., & Besser, R. E. (2004). Promoting appropriate antibiotic use for pediatric patients: a social ecological framework. *Seminars in Pediatric Infectious Diseases, 15*(1), 41-51.

Get Smart Campaign Project Updates, continued

(continued from page 2)

Community Health Representative (CHR) Project

As part of our effort to expand the reach of the appropriate antibiotic use messages to culturally diverse audiences, the Get Smart campaign entered into partnership with the Indian Health Service (IHS) in 2004 to develop and implement strategies to improve outreach to American Indian/Alaska Native audiences. The goal of this partnership is to promote the appropriate use of antibiotics within tribal communities through culturally targeted educational pieces and messages disseminated via the IHS Community Health Representative (CHR) program. Two Oklahoma area CHRs were honored for their exemplary efforts in promoting the message of antibiotic resistance and appropriate antibiotic use: Tammy Blevins-Purser and Rebecca Parker. The winners attended the Get Smart conference May 2-4, 2006 in Atlanta and received public recognition and a plaque for their commendable work in promoting appropriate antibiotic use among the Chickasaw Nation and the Iowa tribe of Kansas and Nebraska, part of the Oklahoma area region of IHS.

Evaluating the Multicultural Outreach Initiative

The Get Smart staff is dedicated to ongoing monitoring and evaluation of campaign activities. Public Health Prevention Specialist (PHPS) Fellow, Frankie Shipman, designed an evaluation plan to assess the multicultural outreach component of the Get Smart campaign. The plan was designed using CDC's Evaluation Framework, which included engaging our stakeholders and designing a comprehensive logic model to describe the program. The plan will allow us to evaluate many of the outreach activities at little or no cost. For information about hosting a PHPS Fellow at your health agency, visit www.cdc.gov/epo/dapht/phps.htm.

News from Other CDC Programs

Staff Updates

The program is currently undergoing some changes! Stacy Holzbauer, DVM, MPH has been the coordinator of the program for the last two years and now serves as an EIS officer at the Minnesota Department of Health. During her time at CDC, Get Smart on the Farm expanded to fund 10 ELC sites (Colorado, Georgia, Michigan, Minnesota, Nebraska, Ohio, Pennsylvania, South Carolina, Tennessee, and Washington), facilitated the creation of the Alliance for Bovine Health, and continued development of a judicious antimicrobial usage veterinary student curriculum. Congratulations to Dr. Holzbauer on a job well done and continued progress towards decreasing antibiotic resistance!

Bernadette Hartman, DVM, a graduate of Iowa State University College of Veterinary Medicine, is taking over as coordinator of the Get Smart on the Farm program. Dr. Hartman is collaborating with Courtney Bronner, DVM, MPH, and Heather Bair-Brake, DVM, MS, leader of the Health Communications team. The team will work toward expanding communication between the veterinary and human health communities by learning more about antibiotic use in agriculture and small animal care settings, and educating clients, farmers and veterinary practitioners about antibiotic resistance.

Advancing Calf Health through Collaboration

Get Smart on the Farm is a proud member of the Alliance for Bovine Health, a collaboration which resulted from the National Dairy Summit in 2005. The Alliance convened again on November 8 and 9, 2006, in Minneapolis, MN, and emerged as the Alliance for Bovine Food System Health. The conference focused on the various aspects of “Advancing Calf Health.” Participants explored topics including nutritional management, biosecurity, and environmental control techniques that may decrease the need for antibiotics throughout the production process. The Alliance is also working toward the innovative development and dissemination of animal husbandry alternatives to antibiotic use in the animal industry. One goal of this collaboration is to increase animal and human health by decreasing inappropriate antimicrobial use and resistance within the animal industry.

Veterinary School Curriculum

The Veterinary Curriculum is being created to enhance veterinary education with regard to antimicrobial resistance, to promote appropriate use of antimicrobial agents in veterinary medicine, and to facilitate effective veterinary-producer communications on these topics. The curriculum is a developing set of web-based courses, which include a background/informational antibiotic resistance module, species specific modules (bovine, porcine, and exotic), various global perspectives modules, and situational case-based modules. Get Smart on the Farm has teamed with Michigan State University College of Veterinary Medicine and the University of Minnesota College of Veterinary Medicine to develop this curriculum.

State-based Interventions

The state-based Interventions were created to foster collaborations between industry leaders, the veterinary community, and the state and local public health departments. The initial activity in each state is to establish local surveillance of antimicrobial knowledge, attitudes, and practices. A state may also determine the resistance among enteric bacteria isolated from humans and animals in its area. These results can then guide the states to develop and disseminate regional-specific programs and educational materials on the appropriate use of antimicrobial agents.

Get Smart on the Farm is approaching a variety of potential partners including veterinarians, farmers, food producers and packagers, food retailers, consumer groups, regulatory agencies, and the pharmaceutical industry. Each can play an important role in fighting antibiotic resistance.

For more information about Get Smart on the Farm, contact Bernadette Hartman, DVM (BHartman@cdc.gov) or Heather Bair-Brake, DVM (HBair@cdc.gov).

News from Other CDC Programs, continued

Campaign to Prevent Antimicrobial Resistance in Healthcare Settings

The CDC 12-step Campaign to Prevent Antimicrobial Resistance in Healthcare Settings continues to focus on the four main strategies of Prevent Infection, Diagnose and Treat Infection Effectively, Use Antimicrobials Wisely, and Prevent Transmission through partnerships with individual healthcare facilities, state and local health departments, and professional associations. These partnerships promote the Campaign's educational tools and materials as well as implementation of the 12-step programs to prevent antimicrobial resistance among Hospitalized Adults, Dialysis Patients, Surgical Patients, Hospitalized Children, and Long-term Care Residents.

The 12-step Campaign also has expanded to include other emerging pathogens such as Community-Associated Methicillin-Resistant *Staphylococcus aureus* (CA-MRSA). A new CDC MRSA website has been launched to house resources and information for both clinicians and patients and may be accessed at www.cdc.gov/mrsa. Newly developed educational materials for CA-MRSA, including posters and an information sheet for the general public, are available by download on the CDC MRSA website and will soon be available for purchase through the Public Health Foundation. You can also view images of these materials at the end of this issue of *Get Smart News*.

NEW! MRSA Materials Developed by CDC-Funded Programs

During the 2006 ELC funding cycle, seven state health departments received funding to conduct educational activities related to the CDC 12-step Campaign and/or CA-MRSA, including: Georgia, Massachusetts, Michigan, Minnesota, Nebraska, New Jersey, and Washington. Two of these state health departments, Massachusetts and Michigan, used their funds to develop educational materials for CA-MRSA. These materials are available in several formats, including brochures, fact sheets, and posters, and are intended for the general public, patients, athletes, schools, and corrections professionals and inmates. These materials can be found at www.mass.gov/dph/cdc/antibiotic/mrsa_about.htm or www.mi-marr.org/, and images are at the end of this newsletter.

CDC's 2006 Conference:
Applying the 12-Step Campaign to Long-Term Care Facilities and MRSA in the Community

This session of the CDC conference highlighted state-based activities applying the CDC 12-Step Campaign to long-term care facilities (LTCFs) and methicillin-resistant *Staphylococcus aureus* (MRSA) in the community.

Chesley Richards, MD, MPH, from the Centers for Disease Control and Prevention, presented an overview of the issue of antimicrobial resistance in LTCFs, along with challenges pertaining to each of the 12-steps to Prevent Antimicrobial Resistance Among Long-Term Care Residents.

Following Dr. Richards' overview of antimicrobial resistance in LTCFs, Mary Eley, from the Michigan Antibiotic Resistance Reduction (MARR) Coalition, presented an overview of the development process for the MARR LTC toolkit that incorporates the framework of the 12-steps to Prevent Antimicrobial Resistance Among Long-Term Care Residents. The purpose of the toolkit is to improve antimicrobial use in Michigan LTCFs by providing practical, evidence based tools and resources to staff in every facility.

Rachel Gorwitz, MD, MPH, from the Centers for Disease Control and Prevention, presented an overview of community-associated MRSA, covering aspects of microbiology, epidemiology, management, and prevention of these infections. More information on the clinical management of community-associated MRSA can be found in *Strategies for Clinical Management of MRSA in the Community*.

Following Dr. Gorwitz's overview of community-associated MRSA, Stephen Fleming, EdM, from the Massachusetts Department of Public Health, presented an overview of the assessments that have been conducted in Massachusetts to inform the content of educational materials to address community-associated MRSA. Planned materials include posters and websites for each of four target audiences: schools (high school and college), athletic settings, community health centers, and correctional facilities.

Lastly, Suzanne Miro, MPH, CHES, from the New Jersey Department of Health and Senior Services, presented an overview of the assessments that have been conducted in New Jersey in collaboration with the NJ Department of Corrections to inform the content of a video to educate inmates about MRSA infections. An evaluation of the video using the Health Belief Model has been conducted with positive results. To obtain a copy of the video, please contact Suzanne Miro at suzanne.miro@doh.state.nj.us.

To obtain presentation slides from any of these speakers, or if you have questions about the Campaign to Prevent Antimicrobial Resistance in Healthcare Settings or CA-MRSA educational materials, please contact Kristin Brinsley-Rainisch at KBrinsley1@cdc.gov.

For more information about the 12-Step Programs or community-associated MRSA, please visit www.cdc.gov/drugresistance/healthcare/ or www.cdc.gov/mrsa.

New Center for CDC

As part of the reorganization at CDC, the Get Smart campaign has the opportunity to work more closely with other education and communications programs. In all future issues of *Get Smart News*, updates from other programs in the National Center for Immunization and Respiratory Diseases* will be featured here.

Immunization Services Division

This division of CDC produces and distributes a monthly electronic newsletter titled *Immunization Works*. Here are some excerpts from recent issues that may be relevant to *Get Smart News* readers.

HPV Vaccine (July 2006): At a June 2006 meeting, the Advisory Committee on Immunization Practices (ACIP) voted to recommend that a newly licensed vaccine designed to protect against human papillomavirus (HPV) be routinely given to girls at the age of 11-12 years. The ACIP recommendation also allows for vaccination of girls beginning at 9 years, and supports vaccination of females from 13-26 years of age who have not been previously vaccinated. According to the ACIP's recommendation, 3 doses of the new vaccine should be routinely given to girls when they are 11 or 12 years old. The advisory committee, however, noted that the vaccination series can be started as early as 9 years of age at the discretion of the physician or health care provider. The vaccine should be administered before onset of sexual activity (i.e., before women are exposed to the viruses), but females who are sexually active should still be vaccinated.

The ACIP passed a resolution that included HPV vaccine in the Vaccines for Children (VFC) program. VFC-eligible children 9-18 years of age are entitled to receive VFC vaccine.

HPV is the leading cause of cervical cancer in women. The vaccine is the first developed to prevent cervical cancer, precancerous genital lesions and genital warts due to HPV. The vaccine is highly effective against four types of HPV virus, including two that cause about 70% of cervical cancer. Those who have not acquired HPV would get the full benefits of the vaccine. On average, there are 9,710 new cases and 3,700 deaths from cervical cancer in the United States each year. For more information about HPV and the HPV vaccine, please visit www.cdc.gov/nip/vaccine/hpv/default.htm.

New VIS for Influenza, Tdap (Aug 2006): CDC recently posted new Vaccine Information Statements (VIS) for influenza and Tetanus and Diphtheria Toxoids and Acellular Pertussis (Tdap). VIS for TIV and LAIV for the 2006-2007 influenza season are now posted. Also, a revised interim Tdap VIS contains recommendations regarding Tdap and pregnancy. Pregnancy is not considered a contraindication for Tdap (as was implied in the previous edition), but Td is usually preferred for pregnant women who need diphtheria and tetanus protection. Both VIS statements can be found at www.cdc.gov/nip/publications/VIS/default.htm.

Promote HCW Vaccination (Sep 2006): CDC has recently updated posters and flyers for healthcare worker (HCW) vaccinations, "Healthcare Workers! Are your vaccinations up-to-date?" The updated materials reflect the Advisory Committee on Immunization Practices' new pertussis vaccine recommendations. They can be downloaded and printed in black and white or commercial quality color from www.cdc.gov/nip/publications/#healthcare (scroll down to *Healthcare Worker Immunizations*).

Join IZTA (Oct 2006): Local or state immunization coalition members are encouraged to join the Immunization Coalitions National Technical Assistance Network (IZTA). This CDC-funded project provides free technical assistance and resources to immunization coalitions across the country including monthly presentations on hot immunization topics (via conference call); free individual technical assistance; access to information about coalition building, social marketing, evaluation and other topics; opportunities to share ideas and experiences with other coalitions across the country; and bi-weekly updates on IZTA events and immunization news. IZTA is managed by The Academy for Educational Development (AED). To sign up, please visit www.izcoalitionsta.org.

Training & Conferences (Nov 2006): *Immunization Update 2006*, which was broadcast August 10, 2006, is now available as a self-study program on the internet and as a DVD. DVDs can be ordered from NIP's online order form at www2.cdc.gov/nchstp_od/PIWeb/niporderform.asp and the web-on-demand can be accessed from the PHTN website at www2d.cdc.gov/PHTN/webcast/immup-2006/default.asp. Also, slides and other resources related to this program can be found at www.cdc.gov/nip/ed/UpdatesandResources.htm.

Updated - General Recommendations on Immunization (Dec 2006): The Advisory Committee on Immunization Practices -- a national panel of immunization experts -- updated its general recommendations on immunizations in the United States. The new recommendations were published in CDC's Morbidity and Mortality Weekly (MMWR) on December 1st as the "General Recommendations on Immunization." These recommendations provide technical guidance about common vaccination concerns for clinicians and other health care providers who administer vaccines. To view the complete article in CDC's MMWR, please visit www.cdc.gov/mmwr/preview/mmwrhtml/rr5515a1.htm.

-Reprinted from *Immunization Works*, with permission from CDC's Immunization Services Division.

To subscribe to an electronic version of the monthly *Immunization Works* newsletter, contact the Get Smart campaign. You may also view the publication in html format every month on the newsletter's webpage.

Partnership News

CDC Foundation Update

Recent Investments in Antimicrobial Resistance
Pfizer, Inc. provided an educational grant in the amount of $295,000 to support the Michigan Antibiotic Roundup program.

The CDC Foundation is an independent non-profit enterprise that forges effective partnerships between CDC and others to fight threats to health and safety. Additional information on this and other projects managed by the Foundation can be obtained at www.cdcfoundation.org. For information on how you can help, please contact Julie Rodgers, Manager of Public-Private Partnerships, at 404-653-0790 or ayo2@cdc.gov.

A sincere thank you to all the donors who make the Get Smart campaign a reality.

More on Partnerships

We have recently initiated partnerships with:

- Becton, Dickinson and Company, Chamberlain Healthcare Public Relations, Harris Interactive, Meijer Retail and Superstore, PharmaLink Inc., and the U.S. EPA, all involved in the Michigan Antibiotic Roundup (see article in the "Get Smart Campaign Project Updates" section of this issue for more details)
- National Association of Chain Drug Stores, an organization whose chief purpose is to represent the views and policy positions of member chain drug companies
- National Boricua Latino Health Organization, a Latino student group representing health professions students, especially medical students, in the northeast region of the United States
- National Indian Health Board, a non-profit organization that represents tribal governments operating their own health care delivery systems, as well as those receiving health care directly from the Indian Health Service (IHS)
- Roche Laboratories, one of the first partners to work with CDC to promote appropriate antibiotic use in the community. Now Roche and the Get Smart campaign are working together again. Roche Laboratories is the pharmaceutical sales and marketing subsidiary of Hoffmann-La Roche, Inc.

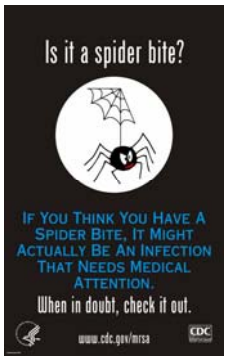
For more information on partnering with Get Smart, please contact the program at getsmart@cdc.gov.

Noteworthy

NEW CDC TIME CAPSULE CONTAINS ANTIBIOTIC RESISTANCE INFORMATION
CDC celebrated its 60th Anniversary in July, 2006. To commemorate the anniversary, CDC deposited a time capsule on CDC grounds, which included a submission from the Get Smart program. The October 2005 issue of CDC's *Emerging Infectious Diseases Journal*, dedicated entirely to antimicrobial resistance, and two Get Smart campaign brochures are among many items encased to be reopened in 2046 to mark CDC's 100th Anniversary.

GET SMART ON THE FARM 1st ANNUAL CONFERENCE
On May 31, 2007, Get Smart on the Farm will host its first annual conference on antibiotic use in animals at CDC's Global Communications Center. Contact Bernadette Hartman for more details or to RSVP – BHartman@cdc.gov.

New CDC MRSA Posters



Materials available at www.cdc.gov/mrsa and through the Public Health Foundation.

New MRSA Educational Materials Developed by Epidemiology and Laboratory Capacity (ELC) Funded Programs

Materials available at www.mass.gov/dph/cdc/antibiotic/mrsa_about.htm or www.mi-marr.org/.