

# Staying Connected for CDC Partners

ISSUE NUMBER 2 • MARCH 2011

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## CDC Updates

### The Monthly Call To Action: CDC Vital Signs

CDC Vital Signs offers recent data on the important health topics of key diseases, conditions, or risk factors. This program is a call to action each month concerning a single, important public health topic. Data is gathered from CDC's national monitoring systems to show progress in important public health areas and ways people can improve their health, and prevent or control disease. The [March 2011 Vital Signs](#) presents information on bloodstream infections in patients with central lines. New data show that 58% fewer bloodstream infections occurred in hospital ICU patients with central lines in 2009 than in 2001.

### Past Issues

- **February: High Blood Pressure and Cholesterol**—Currently, heart disease, stroke, and other cardiovascular (blood vessel) diseases are among the leading causes of death and now kill more than 800,000 adults in the U.S. each year.
- **January: Adult Seat Belt Usage in the U.S.**—The percentage of adults who always wear seat belts increased from 80% to 85% between 2002 and 2008. In 2009, about 12,000 more injuries would have been prevented and about 450 more lives saved if all states had primary enforcement seat belt laws.

**Vital signs™**  
March 2011

**1 in 20**  
About 1 in 20 patients gets an infection each year while receiving medical care.

**41,000**  
About 41,000 bloodstream infections strike hospital patients with central lines each year.

**37,000**  
About 37,000 bloodstream infections happen each year to kidney dialysis patients with central lines.

**Making Health Care Safer**  
Reducing bloodstream infections

A central line is a tube that a doctor usually places in a large vein of a patient's neck or chest to give important medical treatment. When not put in correctly or kept clean, central lines can become a freeway for germs to enter the body and cause serious bloodstream infections. These infections can be deadly. Of patients who get a bloodstream infection from having a central line, up to 1 in 4 die. Bloodstream infections in patients with central lines are largely preventable when healthcare providers use CDC-recommended infection control steps. Medical professionals have reduced these infections in hospital intensive care unit (ICU) patients by 58% since 2001. Even so, many still occur in ICUs, in other parts of hospitals, and in outpatient care locations. In 2008, about 37,000 bloodstream infections occurred in hemodialysis\* outpatients with central lines.

\*Use of a machine to clean or filter the blood when kidneys no longer work.

Learn what you can do to reduce central line bloodstream infections. → See page 4

Want to learn more? Visit  
<http://www.cdc.gov/vitalsigns>

National Center for Emerging and Zoonotic Infectious Diseases  
Division of Healthcare Quality Promotion

CDC

**Of patients who get a blood stream infection from having a central line, 1 in 4 will die.**

## CDC's WINNABLE BATTLES

- 1 | Healthcare Associated Infections (HAI)
- 2 | Human Immunodeficiency Virus (HIV)
- 3 | Motor Vehicle Injuries
- 4 | Obesity, Nutrition, Physical Activity, and Food Safety
- 5 | Teen Pregnancy
- 6 | Tobacco



Centers for Disease Control and Prevention  
Office for the Associate Director for Communication

CS218495

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**CDC Releases First Periodic Health Disparities and Inequalities Report**—The January 2011 release of the first periodic *CDC Health Disparities and Inequalities Report 2011* underscores CDC's commitment to health equity. It is the first in a series of periodic, consolidated assessments that highlight health disparities by sex, race and ethnicity; income; education; disability status; and other social characteristics in the U.S. The report provides analysis and reporting of recent trends and ongoing variations in health disparities and inequalities in selected social and health indicators, both of which are important steps in encouraging actions and facilitating accountability to reduce modifiable disparities by using interventions that are effective and scalable. Released as an [MMWR Supplement](#), the report addresses disparities in healthcare access, environmental hazards, mortality, morbidity, behavioral risk factors, disability status, and social determinants of selected health problems at the national level.

The 22 topics included in the report were chosen because they met one or more of the following criteria:

- Leading cause of premature death among certain segments of the U.S. population
- Social, demographic, and other disparities in health outcomes exist
- Effective and feasible interventions exist to address health outcomes
- High-quality data were readily available from national health monitoring systems

**CDC and Partners Launch First Global Initiative to End Sexual Violence Against Girls**—Millions of girls have experienced sexual violence, a hidden global epidemic that can include abuse, sexual harassment, rape, and coercion. Announced by former President Clinton at the Annual Meeting of the Clinton Global Initiative in 2009, the partnership, called *Together for Girls*, brings together 10 international organizations from the public, private, and non-profit sectors—including CDC, the [CDC Foundation](#), [PEPFAR](#) and [UNICEF](#)—to end sexual violence against girls. CDC and UNICEF are leading *Together for Girls*' efforts in partnering with national governments to collect country-level data. With funding from the Nduna Foundation, in partnership with the CDC Foundation, CDC has worked with UNICEF to conduct a 2009 survey on violence against boys and girls in Tanzania. ([CDC Global Health eBrief](#))

**CDC and Other Organizations Sponsored New Clinical Vaccinology Course**—CDC and seven other national organizations collaborated with the National Foundation for Infectious Diseases, the Emory University School of Medicine, and the Emory Vaccine Center to sponsor a [Clinical Vaccinology Course](#) on March 4-6. Through lectures and interactive case presentations, the course focused on new developments and concerns related to the use of vaccines in pediatric, adolescent, and adult populations.

## In The News

**CDC Director Talks about the Nation's Biggest Winnable Health Battles**—CDC continues to focus on "winnable battles" as an important agency initiative to impact the leading causes of death and disability with known, scalable, and effective strategies and interventions. The current domestic priorities include healthcare-associated infections; HIV; motor vehicle injuries; obesity, nutrition, physical activity and food safety; teen pregnancy; and tobacco. Recently, Dr. Frieden discussed winnable battles on Medscape One-on-One with its host Eli Adashi, professor of Medical Science at Brown University. When asked his prediction of where public health will be in 2015, Dr. Frieden stated: "I'm optimistic that we're going to be in a much better place on prevention. We're going to have a more widespread recognition that prevention saves lives and saves money. We'll have fewer smokers. We'll have examples from communities around the United States of places that have reversed at least childhood obesity. We'll have a big decrease in infections associated with the healthcare setting. We're going to have prevention on a standard footing, so that we understand that prevention is a core component of our health system." ([Medscape video](#); [CDC Winnable Battles Overview](#))

**CDC on the Big Screen**—CDC is starring in a new film with Matt Damon, Jude Law, Kate Winslet, Gwyneth Paltrow and Laurence Fishburne. *Contagion*, due to hit the silver screen in 2011, is an action-thriller based on the global outbreak of a deadly viral disease and an international team of doctors contracted by CDC to deal with the crisis. The movie is billed as a bio-med drama, where a team of doctors must race to find a cure for a deadly epidemic. ([CNN](#))

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## Program Updates

**Share Your Injury Prevention Success Story**—The Injury Center has developed a [Success Stories Portal](#), which is an online tool and growing collection of real stories. The Portal, an innovative resource accessible to CDC grantees as well as the public, is a collection of stories detailing the work supported by CDC's Injury Center that illustrates the real world impact of injury and violence prevention programs and research.

**CDC Workshop Helps Prevent Mother-to-Child Transmission (PMTCT) of HIV in Ethiopia**—Ethiopia has one of the world's lowest coverage rates for PMTCT services. To improve low PMTCT utilization, Ethiopian graduates of CDC's Management for International Public Health course and other stakeholders developed plans for a PMTCT Process Improvement (PI) pilot project in five of the 18 zones in Ethiopia's Oromia region, with the assistance from CDC's Sustainable Management Development Program staff. In 2009, two cadres, totaling 59 participants from 14 facilities and zonal health offices attended a five-day PI workshop. Later, the participants worked in teams to complete 14 projects targeting problems pertaining to PMTCT work processes at their worksites, with mentoring from the course instructors.

Eleven of the 14 facility teams reporting at subsequent review meetings described marked improvements, including increasing the percentage of:

- Hospital deliveries of HIV-positive women who had come for antenatal services from 59% to 85%
- HIV-positive women having their CD4 (T-Cell) counts tested from 42% to 90%
- Pregnant women's partners tested for HIV/AIDS from 13% to 51% in one facility and from 13% to 98% in another
- HIV-exposed infants enrolled in antiretroviral therapy from 13% to 98%
- HIV-positive pregnant women who had come for antenatal care who took prophylaxis from 20% to 81%

The team concluded that well-designed and systematically mentored PI projects could have significant health impacts. ([CDC Global Health eBrief](#))

## Events And Seminars

All events and seminars listed are open to CDC's partners. To see more upcoming events or for more information on the below events, visit the [CDC Calendar of Events](#).

### ***Malaria: Blood, Sweat and Tears***

*January 31–May 20, 2011, Global Health Odyssey Museum, Atlanta, GA*

The exhibit uses a variety of media including photographs, stamps, illustrations, and three-dimensional objects to discuss the history, science, and global impact of malaria. [The exhibition](#), with the support of Vestergaard Frandsen and in cooperation with the Roll Back Malaria Partnership, opened at the United Nations' main gallery in spring 2010.

### **14th Annual Conference on Vaccine Research**

*March 16–18, 2011, Baltimore, MD*

The [Annual Conference on Vaccine Research](#) provides high quality, current reports of scientific progress featured in both invited presentations and submitted abstracts. The conference has become the largest scientific meeting devoted exclusively to research on vaccines and associated technologies for disease prevention through immunization.

### **CDC Public Health Grand Rounds (Online Event)**

*March 24, 11 AM – 12 PM (EDT), Topic: TB/HIV*

The Public Health Grand Rounds is a monthly series created to further strengthen CDC's common scientific culture and foster discussion and debate on major public health issues

[Watch live and archived broadcasts.](#)

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## 45th National Immunization Conference

March 28-31, 2011, Washington, DC

The [45th National Immunization Conference](#) will share information that will help participants provide comprehensive immunization coverage for all age groups and explore innovative strategies for developing programs, policy, and research to promote immunization coverage for all age groups.

## National Public Health Week: April 4-10, 2011

[National Public Health Week 2011 \(NPHW\)](#) is addressing the importance of injury and violence prevention through the theme "Safety is No Accident: Live Injury-free". Visit the NPHW website to download fact sheets, media outreach materials, suggested community events, legislative information and resources to use throughout NPHW.

## CDC Personnel

[Leandris Liburd, PhD, MPH, MA](#), now serves as the director of the Office of Minority Health and Health Equity. Dr. Liburd has decades of experience in community health, health disparities, and social determinants of health. She provides agency leadership, direction, and accountability for CDC's policies and programs to ensure they are optimally effective in improving minority health and achieving health equity. Dr. Liburd also serves as the agency lead in coordinating CDC engagement with HHS, other federal agencies, national organizations, and the public on issues of health equity.

**The following members were also named to the leadership team of the [Office of Surveillance, Epidemiology and Laboratory Services](#):**

[James W. Buehler, MD](#), serves as the director of the Public Health Surveillance Program Office. Jim has 29 years of experience in the field of medical epidemiology, serving from 1981–2002 as a commissioned officer in the U.S. Public Health Service at CDC. In 2002, Jim joined the faculty of the Epidemiology Department of the Rollins School of Public Health at Emory, where he holds a research professor position.

[Seth Foldy, MD, MPH](#), serves as the director of the Public Health Informatics and Technology Program Office. Seth has chaired health informatics committees for the national associations of both local and state health officials, and he has served on the boards of the eHealth Initiative, National eHealth Collaborative, and the State Alliance for eHealth. He helped form the Joint Public Health Informatics Taskforce, linking several associations to accelerate and harmonize electronic information system development.

[Denise Koo, MD, MPH](#), serves as the director of the Scientific Education and Professional Development Program Office. Denise entered CDC's Epidemic Intelligence Service and then served as a preventive medicine resident in CDC's Foodborne and Diarrheal Diseases Branch. She then became chief of the CDC branch responsible for the operation of the National Notifiable Diseases Surveillance System in 1994, in the Division of Public Health Surveillance and Informatics, and became director in 1997. In 2001, Denise became the associate director for science for the Epidemiology Program Office. In 2002, she became director of the Division of Applied Public Health Training at CDC, now the Career Development Division.

[Stephanie Zaza, MD, MPH, FACPM](#), serves as the director of the Epidemiology and Analysis Program Office. From 2006–2010, Stephanie led preparedness strategy, planning, policy and communications for CDC's emergency preparedness and response activities. In 2009, she developed and led the Community Mitigation Task Force as part of CDC's response to the novel 2009 H1N1 influenza pandemic. In addition, she is a captain in the U.S. Public Health Service and a recipient of numerous Public Health Service and other academic awards.

## CDC History

**April 17, 1992**—*MMWR* released the "Prevention and Control of Tuberculosis in U.S. Communities among Homeless Persons: Recommendations of the Advisory Council for the Elimination of Tuberculosis."

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[May Chu, PhD](#), serves as the director of the Laboratory Science Policy and Practice Program Office. May began her career with CDC in the Division of Vector-Borne Infectious Diseases in Fort Collins as a research microbiologist and continued there as the chief of the Bacterial Zoonotic Diseases Diagnostic and Reference section. In 2004, May became a CDC assignee to the World Health Organization (WHO) in Geneva, Switzerland. After her WHO assignment, May served as the associate director for laboratory science in the Division of Preparedness and Emerging Infections, National Center for Emerging and Zoonotic Infectious Diseases.

## Resources

**[CDC Health Equity Symposium](#)**. View presentation slides from the Health Equity Symposium hosted by the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP). The event entitled, *“Establishing a Holistic Framework to Reduce Inequities in HIV, Viral Hepatitis, STDs and Tuberculosis in the United States”* also marked the launch of NCHHSTP’s [Social Determinants of Health White Paper](#).

**[Parents are the Key Campaign Resources](#)**. This campaign is designed to help keep teens safe on the road. Download or [order free copies](#) of campaign materials or visit the [customizable materials](#) page for materials you can brand with your own logo.

**[CDC Learning Connection](#)**. This newly established website helps you locate public health learning products created by CDC and partners. It houses a growing collection of free products in various media formats, including podcasts, e-learning, electronic publications, and live events.

**[Knowledge to Action Science Clips](#)**. These clips are designed to enhance awareness of emerging scientific knowledge. The focus is applied public health research and prevention science that has the capacity to improve health now.

## Subscribe

The *Staying Connected* newsletter, a bi-monthly newsletter prepared by the CDC’s Office of the Associate Director for Communication, provides regular updates about agency and program priorities and other public health initiatives important to CDC’s partners and affiliates. Every two months, the *Staying Connected* newsletter will be sent to CDC partners, affiliates, and supporters around the world.

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