

AAFP News: AFP Edition

Policy and Health Issues in the News

CDC Provides Influenza Vaccination Updates, New Clinician Resources

According to the Centers for Disease Control and Prevention (CDC), 1.4% of the 197,295 respiratory specimens tested from May 20 to October 13 at U.S. laboratories were positive for influenza: 65% for influenza A and 35% for influenza B viruses. About 90% of the seasonal influenza A viral specimens were subtyped, with about 58% of these identified as H1N1 and about 42% as H3N2. About 81% of influenza B specimens were subtyped, with 80% identified as Yamagata and 20% as Victoria strains. Influenza vaccination prevents numerous medical visits, hospitalizations, and deaths each year, even with vaccine effectiveness estimates around 40% to 60%, which is why the CDC continues to recommend that patients receive the vaccine. To support vaccination efforts, the CDC released the Advisory Committee on Immunization Practices (ACIP) recommendations for the 2018–2019 influenza season; a Health Care Professional Fight Flu Toolkit; and a series of videos explaining how to strongly recommend to patients that they get the influenza vaccine. For more information, go to <https://www.aafp.org/news/health-of-the-public/20181107cdcfu.html>.

Study: Obesity Associated with Risk of Early-Onset Colorectal Cancer in Women

A study published in *JAMA Oncology* found a connection between obesity and an increased risk of early-onset colorectal cancer (CRC) among women younger than 50 years. Researchers used data from a study of U.S. female nurses who were 25 to 42 years of age at study enrollment in 1989. More than 85,250 women were included in this analysis, with follow-up through the end of 2011. Researchers found 114 cases of early-onset CRC (median age: 45 years at diagnosis). Higher body mass index (BMI) at the end of follow-up, BMI at 18 years of age, and weight gain since early adulthood were associated with increased risk of early-onset CRC, with BMIs of at least 30 kg per m² associated with the highest risk. The American Cancer Society updated its guidance in May to recommend that screening for CRC begin at 45 years of age for patients at average risk. The U.S. Preventive Services Task Force and American Academy of Family Physicians (AAFP) currently recommend that patients 50 to 75 years of age be screened, with the AAFP offering a preferential recommendation for three screening tests: fecal immunochemical tests, flexible sigmoidoscopy, and colonoscopy. For more information, go to <https://www.aafp.org/news/health-of-the-public/20181023obesitycrc.html>.

AMA Policy Aims to Increase Patient Access to Sexual Assault Forensic Examinations

Hospital emergency departments (EDs) are typically the primary point of care for survivors of sexual assault, accounting for approximately 65,000 to 90,000 visits per year, according to the American Medical Association (AMA). Because of the high volume of medical forensic examinations that are performed in EDs, the AMA recently adopted a policy advocating for more EDs to have access to sexual assault nurse examiners and other clinicians trained to perform these examinations in postpubertal patients. Although it is critical that survivors of sexual assault undergo a forensic examination within 72 hours, it can be difficult for emergency physicians to simultaneously oversee these multiple-hour examinations while caring for other patients, according to E. Scott Ferguson, MD, a member of the AMA Board of Trustees. “Having greater access to sexual assault nurse examiners, along with other trained and qualified clinicians ... will help increase timely access to care for patients,” he said. The AMA’s policy also called for human immunodeficiency virus testing and postexposure prophylaxis to be offered to all survivors of sexual assault who present within 72 hours of a substantial exposure risk.

ACIP Changes Recommendations for Hepatitis A Vaccination, Updates Immunization Schedules

ACIP recently voted to add a new policy recommending that all homeless persons at least one year of age be routinely immunized against hepatitis A, and it updated the design and content of the 2019 adult and childhood immunization schedules. For both schedules, the ACIP updated the influenza vaccine notes to include use of live attenuated influenza vaccine (Flumist). For the childhood schedule, ACIP updated the content within the notes for hepatitis A; hepatitis B; polio; measles, mumps and rubella; meningococcal; and tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis (Tdap) vaccines. For the adult schedule, the group made indications clearer by reducing the number of colors used. The hepatitis B section was updated to include use of the CpG-adjuvanted hepatitis B vaccine, and transgender persons were added to the list of persons at increased risk of human papillomavirus infection. For more information, go to <https://www.aafp.org/news/health-of-the-public/20181031acipmeeting.html>.

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