Heightened Tick Activity This Season

As warmer weather arrives it is important to protect yourself and your family from tick bites that can spread disease. Since 2016, over 250 cases of tickborne illness have been detected in the Farmington Valley according to the Connecticut Electronic Disease Surveillance System (CTEDSS), and the incidence is probably higher if you include people who were never tested. The most common ticks in our part of Connecticut are the black-legged tick, also known as the deer tick, and the American dog tick. The most common tick-borne illness in our area is Lyme disease, transmitted through the bite of the deer tick. Twenty-five percent of deer ticks are infected with Lyme but depending on location, this can range from a low of 10% to a high of 40%. (CT Agricultural Experiment Station)

The deer tick can also transmit anaplasmosis, babesiosis and Powassan disease although these are less common. Deer ticks are most common in the woods where their hosts, the white-tailed deer, live. However, many people affected by Lyme report exposures in their yards.

There are things that can be done to reduce tick populations in yards:
Remove leaf litter, ticks need humidity and leaf litter is an excellent source of moisture;
- Keep grass mowed;
- Restrict ground covers like Pachysandra especially in areas where the family or children spend time;
- Place wood piles away from the house and play areas;
- Discourage deer from large areas with fencing;
- Reduce and or eliminate Japanese barberry that serve as an excellent host for mice and chipmunks that are a reservoir for Lyme disease.

In addition to reducing tick populations in the yard, everyone should take precautions when spending time outdoors to reduce tick bites. Ticks do not jump, fly or drop from trees—they grasp passing hosts from the leaf litter or tips of grass. Most ticks are picked up on the lower legs and travel on the human body before biting their hosts. Insect repellents containing DEET are most effective at preventing tick bites. Products containing 20-30% DEET used on clothing are 86-92% effective at preventing tick bites. ALWAYS use insect repellents according to the manufacturer label. For those that spend a lot of time in the woods, clothing that is impregnated with repellents have been shown to be highly effective.

Wearing light colored clothing and tucking pants into socks allows for easier identification of ticks and provides a barrier for ticks trying to get onto skin. After returning from being outside, immediately remove clothing and wash and dry them. Ticks can survive a wash cycle but are far less likely to survive the heat of a dryer. This will prevent ticks from being introduced into the home. Shower and do tick checks shortly after returning inside. Tick checks are one of the most important strategies for reducing tick-related disease transmission.

The deer tick is incredibly small, in fact the nymphal stage, most commonly associated with disease transmission is smaller than the head of a pin. This makes it more difficult to spot during tick checks. The risk of disease transmission from a tick to a human increases as the number of hours the tick is attached increases. There is a 20% probability of infection at 48 hours of attachment and increases dramatically after that. Do tick checks more than once following time outdoors. Remember, you can still significantly reduce your risk if a tick is found and removed within 48 hours of attachment.

Early signs of Lyme disease include an expanding red rash and flu-like symptoms including fatigue, fever and muscle aches. Seventy to 80% of individuals infected with Lyme will experience a localized red rash within 2-32 days after a bite. These are generally 5-6 inches in diameter or larger. Because the rash may occur as much as one month following a bite, people may not associate it with the tick bite. This makes it difficult for some to get early treatment. Diagnosis of Lyme disease is based on both signs and symptoms of the disease as well as possible exposure to the deer tick. In addition, for those experiencing symptoms, CDC currently recommends a two-step process to test blood for evidence of antibodies against the Lyme disease bacteria. About 60% of people that are not treated for Lyme after a tick bite may experience arthritis and severe joint pain and swelling. A small percentage
of those untreated may experience chronic neurological issues including problems with short term memory, numbness or tingling of the hands or feet and shooting pains. If you are bitten by a tick and experience any of the symptoms associated with Lyme disease, contact your physician.

Additional information about Lyme Disease can be found at:
https://www.cdc.gov/lyme/index.html
https://portal.ct.gov/DPH/Infectious-Diseases/Tickborne/Lyme-Disease
https://portal.ct.gov/CAES

It's Time! Catch Up On Your Preventative Health Screenings

The COVID-19 pandemic has been a stressful time for all of us. We have been asked to cut back or modify how we engage in most of the activities in our daily lives, from grocery shopping to seeing friends and family. Chances are, you or someone you know has at one point worried about the possibility of needing to seek medical care and being exposed to the virus in the healthcare setting.

The concern is a very real one. In 2020, we saw a decrease in the number of cancer diagnoses. This is not the good news it appears to be. Rather than signifying that fewer people developed cancer, scientists suspect these numbers indicate that fewer people presented to a physician for cancer screenings, and therefore fewer cancers were caught early. It is expected that we will be seeing more cases of more advanced cancers over the next few years.

Have you gone to the doctor less than you otherwise would have during the pandemic? With COVID-19 vaccination rates rising and cases decreasing, the risks associated with going to the doctor's office or emergency department are decreasing. How up to date are your annual preventative screenings?

**Colorectal Cancer Screening**
Screening for colorectal cancers in the form of fecal occult blood testing, sigmoidoscopy, or colonoscopy should begin at age 50 for those with no family history. Routine screening is not recommended for those over 76 years of age unless they are experiencing symptoms.

**Lung Cancer Screenings**
Anyone with 30 pack year smoking history, even if they no longer smoke, is recommended to have a low-dose chest CT scan annually starting at age 55.

**Cervical Cancer Screening**
Women aged 21-65 should have a pap smear every 3 years. Women over 30
can consider decreasing to every 5 years if the screening also includes HPV testing. Your doctor may recommend more frequent screenings if you have a family history of cervical cancer or previous concerning results.

**Breast Cancer Screening**
Recommendations vary. It is agreed that at minimum, women aged 50-74 should get a mammogram every other year. More vigorous recommendations include annual mammograms starting at age 40. Speak with your doctor to determine which is best for you given your risk factors and family history.

**Cholesterol Screening**
High cholesterol is a risk factor for heart disease. The American Academy of Family Physicians recommends checking cholesterol levels in men starting at age 35 and in women starting at age 45. For those at higher risk, screening can start as early as age 20.

**Blood Sugar/Diabetes Screening**
Anyone aged 40 or older who is overweight or obese should have their blood sugar checked annually.

**Hepatitis C**
Persons born between 1945 and 1965 are recommended to get a 1 time Hepatitis C test. High risk patients (injection drug users and those who engage in unprotected sex with multiple partners) may need to be tested more frequently.

**Osteoporosis/Bone Density Screening**
Women aged 65 and older, as well as younger woman at increased risk, should have their bone density tested as recommended by a physician.

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Are you up to date?

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**COVID Home Testing 101**

Testing and early diagnosis is critically important to help reduce the spread of COVID-19.

Home testing is now widely available, but it is now on you to report your results to both your physician and your local health department. Find out more from the [CDC page on self-testing for COVID-19](https://www.cdc.gov/coronavirus/2019-ncov/cases-tests/self-tests-home.html).

If you receive a positive test result, be sure to isolate to prevent the spread of the disease. Anyone you had contact with in the past 2 days should also quarantine and seek a COVID test.
The 2021 Connecticut Fish Consumption Advisory Guide has been released by the CT Department of Health. This pamphlet addresses questions such as:

- How often High Risk and Low Risk groups should consume which types of fish?
- What constitutes a High Risk individual for fish consumption?
- What kinds of risks are there to consuming fish?
- What parts of fish are safe to eat?

Find the full guide here.

FVHD Extending Access to Vaccine

The Farmington Valley Health District is honored to be a recipient of the Vaccine Equity Partnerships Funding Grant to deliver vaccines to populations with limited access to COVID-19 vaccination. Please enjoy the accompanying video on the state of our Health District as we put the worst of the pandemic behind us. There is still a role for all of us to play!

Thank You Volunteers!

The Farmington Valley Health District has administered approximately 20,000 vaccine doses since December 2020. We could not have done so without our wonderful volunteers. Thanks to everyone who lent a hand!

In light of their efforts, our volunteers have been recognized as the Simsbury 2021 Hometown Heroes!
Mental Health Corner

Returning to Normal
Few of us have forgotten the shortage of toilet paper, the empty supermarket shelves, the daily changes in health information and the real and present fear of what comes next.

For some of us, phrases like “You are still on Mute” and “How do I share my screen?” bring powerfully bittersweet memories. Parents who endured home schooling and quarantine after quarantine may never forget the endless days and weeks and months that spread out in front of them as they tried to keep their family safe, their job intact, and their children’s online schooling on track.

How many of you have dreamed of what it would feel like to hug a friend, to almost be able to feel the arms of another person around you if you just concentrated hard enough. We have lost social connection, the ability to have meaningful conversations with others, to enjoy the simple pleasure of a meal in a restaurant or a night at the movies. Many of us have developed a fear of crowds or a loss of confidence in our leaders. Some have lost jobs and relationships others have suffered the devastation of losing a loved one and not been able to properly grieve. Some feel they have lost freedom, health, time, and confidence.

But even the darkest raincloud has a silver lining. We have learned to smile with our eyes, to make meaningful connection with a stranger just by how we looked at them over our mask. Birthday drive-bys and front lawns with red hearts have been a rainbow in a storm for public health and medical workers. Our communities have stepped up and stayed home to protect our elderly. Technology has advanced and filled in the gaps – most humans can now Zoom, and we have proven that so many jobs in our society can be done successfully from home.

Many of us have rediscovered the joys of jigsaw puzzles, learned to bake sourdough in cast iron pots, planted gardens, started hiking or taken up a new craft. The general whir of society has slowed down enough that many of us have spent precious months with college aged kids stranded at home, become closer to our teenagers, and developed more patience with ourselves.

The ‘return to normal’ is a double-edged sword. The thrust back into pre-COVID routines is unsettling for us all as we start to navigate our new normal. Each of us has experienced the pandemic differently. Some are eager to return to their life pre-COVID and cannot wait to party, socialize, work and play. Disposing of masks and social distancing is everything they have dreamed of, and they are ready to get their ‘normal back on.’ Others are gently dipping their toe back into society, cautiously optimistic about venturing out to stores for the first time, perhaps eating a meal outside with an equally trepidations.
friend, still wearing masks and never leaving home without hand sanitizer. While others are terrified of what is happening. Loss of social connection has increased their anxiety and fear. Distrust in leaders has left them confused and scared of what they do not know, and everyone else’s relaxation of precautions is only further fulling their anxiety and fear of what might happen. They do not know how they fit back into society.

All these feelings are normal. Everyone’s reaction is unique to them, and we all have a role to play in gently supporting each other to begin to feel comfortable in the world again. Just as we stepped up when COVID hit and cared for our communities by keeping them safe, we have a role to play in supporting them to safely re open and to make allowances for other’s needs.

Please be kind. Be thoughtful and be safe. If you or a loved one are struggling to readjust to life outside the ‘COVID bubble’ reach out for help – you are not alone, and resources are out there.


https://portal.ct.gov/Coronavirus/Pages/Public-Health-Resources/Mental-Health-Resources


Stay Safe Around Water!
As the weather heats up many of us seek relief in pools and waterways to swim, paddle board, kayak, fish, canoe, and sail.

According to the American Red Cross, 10 people die everyday from drowning across the USA and it is the leading cause of death in children 1-4.

Children under the age of 5 are most likely to drown at home in pools and hot tubs and children from 5-14 are more likely to drown in a lake or natural waterbody.

These sobering statistics mean we all have a role to play in keeping our communities safe while still enjoying the water. Follow these simple tips to increase your family’s safety around water:
Swim in designated areas that are supervised by lifeguards at the beach and in lakes
Never swim alone
NEVER leave a child unattended near water, even a paddling pool is a drowning risk.
Remove all pool toys after use as they can act as a temptation for a small child to explore
Ensure all pools and hot tubs have approved barriers and fencing installed
Always wear a life jacket when boating, kayaking, or sailing
Never mix alcohol and swimming/boating
Learn how to administer CPR

Did You Know Your Local Health Department Does...?

...Pool testing!

FVHD inspects all public indoor and outdoor swimming pools. We ensure that water quality, proper signage, safety equipment, restrooms, and chemical storage are all up to current health code.

FVHD inspectors check all outdoor public pools at least once a month during the months of May through September, and all indoor public pools every three months throughout the year.

FVHD staff also work with pool operators to ensure they are trained and do regular water testing.

What can close a pool?

When water clarity is insufficient, pool disinfectant levels are not maintained, or structural issues present a safety hazard, a pool will be closed and signs will alert the public of the closure.

When the pool has conformed to the health code, it will be re-inspected before being reopened for the public.

For more information about pool safety, watch our Health Matters Episode

HEALTH PROGRAMMING IN YOUR DISTRICT

The health department strives to prevent disease outbreaks and conditions that give rise to poor health, promote health programs and policies that support good health, and protect members of our
community from health threats.