

University Health Service
University of Sydney

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2007



Practice Information

- **Locations**
 - Wentworth Building
 - Holme Building
- **Hours**
 - 8.30 am to 5.00 pm
- **For what**
 - Treatment of illness and accidents
 - Routine checkups
 - Contraception
 - Immunisations
 - Travel Medicine
 - Psychological Medicine
 - Diving and sport medicals
- **Cost**

Direct billing if valid

 - Medicare
 - World Assist (overseas students)

Medibank Private – pay and claim

How to use the service

- Make an appointment
- Drop in service
 - for urgent injuries or illness only
- Medical Certificates, Special Consideration

Vaccinations and screening tests required

<u>Basic student vaccinations</u>	All students and staff should be vaccinated against	Tetanus Diphtheria Polio Measles Mumps Rubella Hepatitis B Meningitis
<u>Animal care vaccinations</u>	Students or staff who work with animals should also be vaccinated against:	Q Fever

Tetanus

- Acute often fatal illness caused by the toxin produced by *Clostridium tetani*
- Bacillus grown anaerobically at wound site – wounds with poor blood supply eg burns, crush injuries
- Incubation period 4-21 days
- Muscle rigidity, spasms

Tetanus prevention

- Wound cleaning
- Active immunisation with tetanus toxoid causes you to produce antibodies to toxin:
 - Three injections at 0,2,4 months
 - Slow response
- Passive Immunisation injects human antibodies from the bloodbank
 - Immediate protection

Tetanus immunisation- animal & farm exposure

- Tetanus/diphtheria/pertussis given at 2,4,6 months of age, then 5 years and then at 12 years.
- If doubt about the primary course having ever being given, then repeat.
- Booster if severe or contaminated wound and >5y since last booster.
- Combined diphtheria vaccine age 50.

Q Fever



Definition

- Q fever is an infectious disease caused *Coxiella burnetii*, an organism particularly resistant to heat and drying. Inactivated by pasteurisation.
- Initial glandular fever like illness with uncommon but serious complications
- Up to 50% of meat workers and 28% farm workers have antibodies

Epidemiology: Mechanism

- **C burnetii**
 - Survives in dust, soil and water, resistant to drying >1 year
 - Spread as dried organisms on wool, hides, farm-workers clothing, straw, packing materials Acquired by inhalation of organism from infected animals.
- Highest levels in amniotic fluid.
Aerosol inhalation, soil contamination
- A secondary dust forms from infected fluids, blood, urine, faeces, milk.
- Ticks.
- 400-600 infections/year in Australia
- Highest risk in new entrants to the workforce

Epidemiology: Animals implicated

- **Sheep**
- **Cows**
- **Goats**
- Deer
- Bandicoot
- Dogs
- Cats
- Kangaroo
- Rodents, and their ticks

Personnel infected

- Abattoir workers
- Farm workers
- Shearers
- Wool sorters
- Dairy workers
- Veterinary personnel
- Veterinary students
- Visitors to abattoirs, engineers,
electricians, maintenance workers
- Research workers
- Vet school technicians
- Farm visitors

Clinical Manifestations

Initial Infection

- Glandular fever like illness
- Fever 2 to 4 weeks, 40-41 °C
- Severe headache
- Cough
- Muscle and joint pains
- Severe fatigue can be prolonged
- Primary site of infection is the lungs-pneumonitis
- Liver involvement (30%)
- Weight loss
- Treated with doxycycline

Complications

- Heart involvement 10%
Chronic endocarditis, especially aortic valve involvement
- Prolonged disease
- Thrombocytopenia
- Post Q Fever fatigue syndrome (20%)

Prevention

- Avoid contact
- Vaccination
 - Vaccine is a killed purified extract of the organism grown in eggs
 - Skin test and blood test first to avoid vaccinating those who have immunity, as an abscess can develop at the vaccination site.
 - Day 1: skin and blood test
 - Day 8: Read test, vaccinate if appropriate.

Vaccination

- **Wentworth Building Level 3**
- **Bring your Medicare card or overseas student card**

- **Skin tests, blood tests**
are covered by Medicare/Worldcare

- **Test material: free (\$30)**
- **Vaccine: \$90.00**

Contra-indications

The following should **NOT** be vaccinated:

- Anyone with a history of Q fever
- Persons who have not had a negative skin and blood test
- Persons with an allergic hypersensitivity to egg protein
- Immunodeficient or immunosuppressed individuals- AIDS, cancer therapy
- Pregnancy- no known problems but safety not established

Vaccine side effects

- Local tenderness 48%
- Redness 33%
- Headache 9%
- Mild fever 2%
- Delayed swelling at injection site, up to 8m after injection, resolves gradually, Rare.