Public Health
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TANEY COUNTY HEALTH DEPARTMENT

Communicable Disease Report

For Barry, Lawrence, Taney & Stone Counties

Jan-Feb 2009

Volume 5, Issue 1

Inside this issue:

State TB Laboratory To Relocate

The State TB Laboratory will be moving to the Central Laboratory in Jefferson City in the next few months. Please continue to submit specimens and isolates to the Mount Vernon Facility, consulting with their staff about questions concerning specimens and results, until notified that this move is complete and specimens need to be submitted to Jefferson City.

If you have questions about the future of TB diagnosis in Missouri, or specific questions about the upcoming move, please call:573-751-3334.

Investigation Update: Outbreak of *Salmonella* Typhimurium Infections, 2008–2009

CDC is collaborating with public health officials in many states and the United States Food and Drug Administration (FDA) to investigate a multistate outbreak of human infections due to *Salmonella* serotype Typhimurium.

As of Sunday, March 8, 2009, 683 persons infected with the outbreak strains of *Salmonella* Typhimurium have been reported from 46 states. Among the persons with confirmed, reported date available, illnesses began between September 1 and February 13, 2009. Patients range in age from <1 to 98 years; The median age of patients is 16 years which means that half of ill persons are younger than 16 years. 21% are age <5 years, 17% are >59 years. 48% of patients are female. Among persons with available information, 23% reported being hospitalized. Infection may have contributed to nine deaths: Idaho (1), Minnesota (3), North Carolina (1), Ohio (2), and Virginia (2).

Outbreak Investigation

On November 10, 2008, CDC's PulseNet staff noted a small and highly dispersed multistate cluster of 13 *Salmonella* Typhimurium isolates with an unusual DNA fingerprint or pulsed-field gel electrophoresis (PFGE) pattern reported from 12 states. On November 25, CDC's OutbreakNet team, working with state and local partners, began an epidemiologic assessment of that cluster, which had increased to 35 isolates. On December 2, CDC and state and local partners began an assessment of a second cluster of 41 *Salmonella* Typhimurium isolates. The PFGE patterns of the second cluster were very similar to the patterns in the first cluster and were first noted by PulseNet on November 24, as a cluster of 27 isolates that had subsequently increased to 41 isolates. Neither of these patterns were seen previously in the PulseNet *Salmonella* Typhimurium database. The clusters also appeared similar epidemiologically, so the two patterns were grouped together as a single outbreak strain, and the investigations were merged.

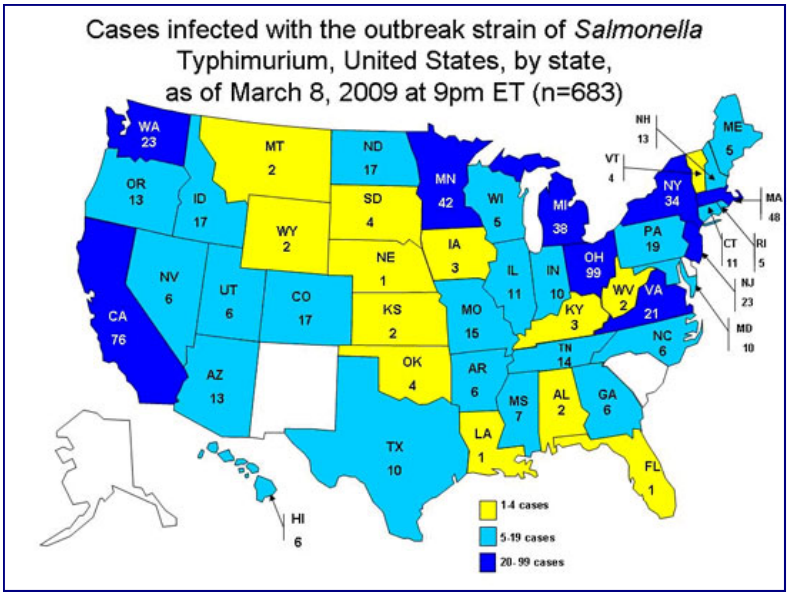
An epidemiologic investigation by the Minnesota Department of Health suggested King Nut creamy peanut butter as a likely source of *Salmonella* infections among many ill persons in Minnesota. The Minnesota Department of Agriculture Laboratory isolated the outbreak strains of *Salmonella* Typhimurium from an open 5-pound container of King Nut brand creamy peanut butter. The product is distributed in Minnesota to establishments such as long-term care facilities, hospitals, schools, universities, restaurants, delis, cafeterias, and bakeries. It is not sold directly to consumers and is not known to be distributed for retail sale in grocery stores.

To date, 19 clusters of infections in five states have been reported in schools and other institutions, such as long-term care facilities and hospitals. King Nut brand peanut butter was present in all facilities.

Seven people from Colorado became ill in Dec. and Jan. and reported eating fresh, in store ground peanut butter purchased from one health food store chain. Preliminary information suggests that the peanuts came from the Peanut Corporation of America facility in Texas. However, the ultimate source of peanuts remains under investigation.

King Nut is produced by Peanut Corporation of America (PCA) in Blakely, Georgia. King Nut peanut butter was not sold directly to consumers but was distributed to institutions, food service providers, food manufacturers and distributors in many states and countries. Peanut butter and peanut paste is commonly used as an ingredient in many products, including cookies, crackers, cereal, candy, ice cream, pet treats, and other foods.CDC and other public health officials are continuing to conduct surveillance for cases of infection with the outbreak strains, and to gather and analyze data or exposures that may be associated with illness.
included in this voluntary recall.

More information about this recall can be found on the FDA website at – http://www.fda.gov/oc/po/firmrecalls/kingnut01_09.html*
Source: Centers for Disease Control



Communicable Disease Reports By County

Communicable Diseases Reported*, January-February 2009				
	Barry	Lawrence	Stone	Taney
Campylobacteriosis	0	0	0	1
Giardia	1	1	0	1
Haemophilus Influenzae, invasive	0	0	0	0
Hepatitis B, Acute	0	3	1	1
Hepatitis B, Chronic	0	0	0	1
Hepatitis C, Chronic	2	5	2	13
Rabies Post Exposure Prophylaxis	1	0	0	0
Salmonellosis	1	0	0	1
Strep Disease, Group A Invasive	0	1	0	0
Varicella	11	0	4	0
Total	16	10	7	18
***Includes all reported conditions (confirmed, probable and suspect)**				

Local Concerns

- *Giardia was identified in three counties. This is unusual for the winter months. No common link identified.*
- *A total of 13 Chronic Hepatitis C cases were identified in Taney County. Many of these cases were identified through testing provided by Missouri Hepatitis C Alliance.*
- *Two Salmonella cases were identified during this time. Additional PFGE testing will be conducted to determine if these were associated with the outbreak.*
- *Tick-borne disease prevention planning efforts should start soon as the Spring and Summer months begin.*
- *Travelers should be encouraged to review prevention information if they are traveling this Spring and Summer. Information regarding travelers health can be found at:*

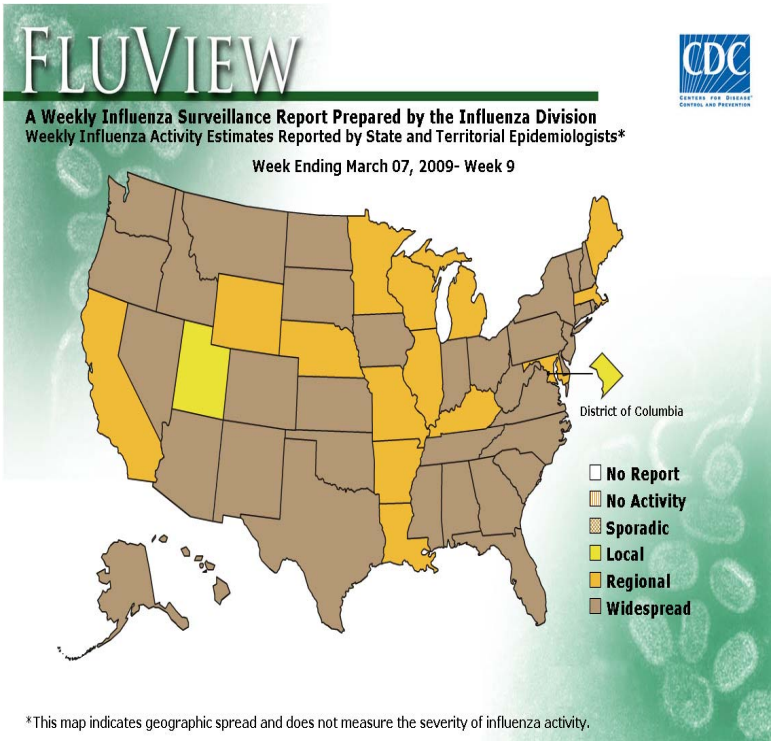
http://wwwn.cdc.gov/travel default.aspx

INFLUENZA UPDATES & INFO

During week 9 (March 1-7, 2009), influenza activity in the United States remained high, but is at approximately the same level as in the previous week.

- One thousand two hundred fifty-two (23.0%) specimens tested by U.S. World Health Organization (WHO) and National Respiratory and Enteric Virus Surveillance System (NREVSS) collaborating laboratories and reported to CDC/Influenza Division were positive for influenza.
- The proportion of deaths attributed to pneumonia and influenza (P&I) was below the epidemic threshold.
- Five influenza-associated pediatric deaths were reported.
- The proportion of outpatient visits for influenza-like illness (ILI) was above the national baseline. ILI increased nationally and in four of the nine regions compared to the previous week. All nine surveillance regions reported ILI above their region-specific baselines.

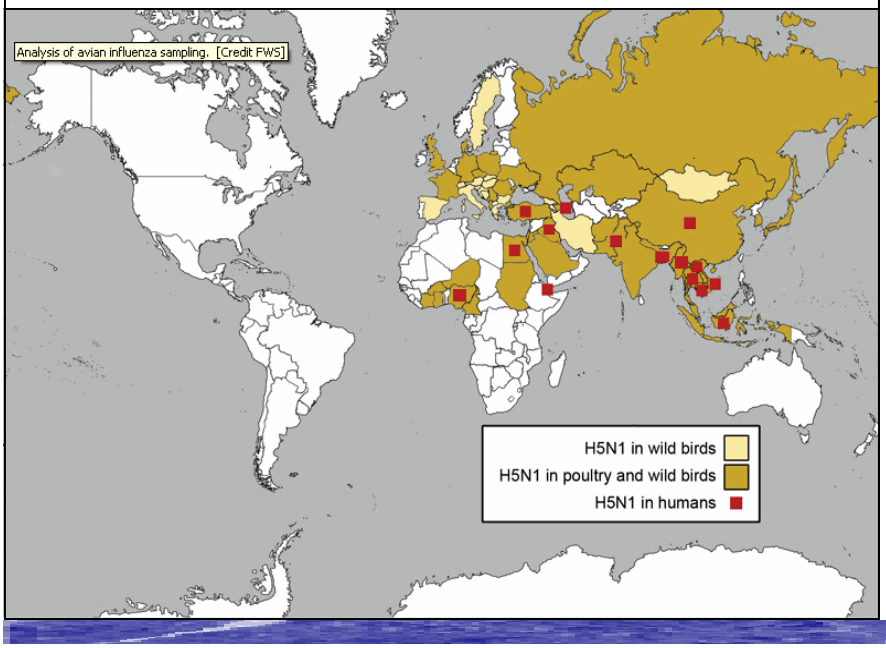
Thirty-five states reported widespread influenza activity, 14 states reported regional activity; the District of Columbia and one state reported local influenza activity; and Puerto Rico reported sporadic influenza activity.



Communicable Diseases Reported In SW Missouri*	Jan 1 to Feb 28, 2009
Animal Bites	202
Campylobacteriosis	16
Cryptosporidiosis	6
E. Coli (Shiga Toxin)	4
Giardiasis	12
Haemophilus Influenza, Invasive	1
Hepatitis A, Acute	2
Hepatitis B, Prenatal	5
Hepatitis B, Acute	5
Hepatitis B, chronic	8
Hepatitis C, Acute	2
Hepatitis C, Chronic	151
Meningococcal Disease	1
Pertussis	5
Rabies, Post Exposure Prophylaxis	8
Salmonellosis	14
Strep. Disease-Group A Invasive	4
Strep pneumonia, <5 Years	1
Strep Pneumoniae, Drug-Resistant	1
Varicella (Chickenpox)	17
Varicella	1

*Includes only confirmed or probable cases entered into the MOHSIS database, Preliminary Data.

Current Avian Influenza Situation, March 2009: Nations with Confirmed Cases of H5N1 Influenza



Communicable Disease Spotlight

Rocky Mountain Spotted Fever

Overview:

Rocky Mountain spotted fever (RMSF) is a zoonotic disease caused by a genus of bacteria called *Rickettsia*. This tick-borne illness typically begins with a sudden onset of influenzalike symptoms, which may include fever, chills, severe headache, muscle pain, and fatigue. Some patients report nausea, vomiting, and a lack of appetite. The classic spotted rash is usually not apparent until the fifth or sixth day and may be an indicator of potentially serious illness.

RMSF is the most frequently reported rickettsial illness in both Missouri and the United States. Because early symptoms resemble other infectious and non-infectious diseases, RMSF can be difficult to diagnose. Without prompt treatment, it can be fatal. Treatment decisions should be based on epidemiologic and clinical clues, and never be delayed while waiting for laboratory results. Doxycycline is the accepted treatment of presumptive RMSF in adults and children. In spite of its name, the highest incidences of RMSF in the United States are reported in the mid-southern states of Oklahoma, North Carolina, South Carolina, Arkansas, and Missouri.

Ticks are the transmitter of *Rickettsia rickettsii*, the agent that causes the disease, primarily by their bite. Less commonly, infections may occur following exposure to fluids from crushed ticks or tick feces. The principle vector of RMSF in Missouri is the American dog tick. The risk of exposure to a tick carrying *R. rickettsii* is low. In general, about 1%-3% of tick populations are infected with *R. rickettsii*, even in areas where the majority of human cases are reported.

Prevention:

- Avoid tick habitats during the peak time of year (generally April through September).
- Tick repellents with 20 to 50% DEET offer the best protection. The American Academy of Pediatrics has recommended that repellents containing up to 30% DEET can be used on children over 2 months of age.
- Wear clothes that will help shield you from ticks.
- Check frequently for ticks and remove them promptly.

For a more information, refer to:

- *Control of Communicable Diseases Manual* (CCDM), American Public Health Association, 2004
- American Academy of Pediatrics. *Red Book: 2006 Report of the Committee on Infectious Diseases.* 27th ed. 2006.
- U.S. Centers for Disease Control and Prevention. Morbidity and Mortality Weekly Report, Recommendations and Reports #4, Diagnosis and Management of Tick-borne Rickettsial Diseases, 2006.

Source:
Missouri DHSS, Communicable Disease Reference Manual; http://www.dhss.mo.gov/CDManual/CDManual.htm

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VISIT OUR WEBSITE!
WWW.TANEYCOHEALTH.ORG

DISEASE SURVEILLANCE!

If your agency would like to participate in our communicable disease surveillance program, please contact us. By providing daily or weekly reports to the Taney County Health Department, your agency can provide valuable information that will help protect our community.

Questions or Comments? Please contact Robert Niezgoda at 417-334-4544 or NIEZGR@lpha.mopublic.org

Missouri 2008 Communicable Disease Reporting Rule! For more information go to: http://www.dhss.mo.gov/CommunicableDisease/reportablediseaselist2.pdf

Upcoming Educational Opportunities

- **Public Health Podcasts Available**. The CDC has created several audio and video programs for viewing on your computer or MP3 player. For more information visit: http://www.cdc.gov/Features/Podcasts/ or http://www2a.cdc.gov/podcasts/browse.asp
- **"WHACK THE FLU" EDUCATIONAL PROGRAM IS NOW AVAILABLE** Missouri students can learn how to keep from getting—and spreading—the flu by using effective hygiene habits. The *WHACK the Flu* school health flu education program is now available with downloadable educational materials such as a skit, song, and posters for pre-K through third-grade classrooms. WHACK is an acronym for important health messages such as W-Wash your hands and H-Home is where you stay when you are sick. Free print materials will be available in late spring. For more information contact the Bureau of Communicable Disease Control and Prevention at 573-751-6113, or e-mail Alyce Turner at Alyce.Turner@dhss.mo.gov.
- **FREE EDUCATIONAL WORKSHOPS ON CHRONIC KIDNEY DISEASE** Primaris and the MO Rural Heath Association is sponsoring free informational sessions about Chronic Kidney Disease in various locations throughout the state. Information about these educational sessions is available at: http://www.morha.org/CKD_Flyer.pdf. For more info contact Paulette Strader at pstrader@primaris.org
- **Upcoming Satellite Broadcasts-** Visit *Friday Facts* for a link to upcoming educational opportunities provided by satellite or webcast: http://www.dhss.mo.gov/fridayfacts/

In The News:

Outbreak of *Salmonella* Typhimurium Infections, 2008–2009 (Continued from page 1)

To clarify whether other peanut-containing foods are associated with the outbreak, CDC along with state partners conducted a second national case-control study. Between January 17 and 19, 2009, telephone interviews were conducted with 95 persons who became ill with the outbreak strain and 405 well persons. Preliminary analysis of data received as of 9PM, Sunday, January 28, reveals an association between illness and consumption of pre-packaged peanut butter crackers, specifically with Austin and Keebler brands.

Austin and Keebler brand peanut butter crackers are produced by the Kellogg Company in North Carolina, using peanut paste from the Peanut Corporation of America. On January 14, 2009, the Kellogg Company put a precautionary hold on these peanut butter crackers, and on January 16 recalled these products. Other peanut containing products produced by a variety of companies may have been made with the ingredients recalled by PCA. CDC and state health departments continue to investigate the association of other brands and foods that contain peanut butter with illness.

Salmonella Typhimurium was isolated in Canada from Austin brand peanut butter crackers purchased in the United States. Officials in Canada have identified the *Salmonella* found in these peanut butter crackers as the outbreak strain. *Salmonella* resembling the outbreak strain was isolated by a private laboratory from three intact packages of Austin brand Toasty peanut butter crackers obtained from a patient's home in Oregon.

On February 6, Oregon public health officials confirmed that this *Salmonella* outbreak can also affect pets. One laboratory-confirmed case of *Salmonella* in a dog from an Oregon household was reported, and further characterization of this *Salmonella* isolate is pending. *Salmonella* resembling the outbreak strain was isolated by a private laboratory from recalled dog biscuits from this dog's household.

On January 28, 2009, PCA announced a voluntary recall of all peanuts and peanut products processed in its Blakely, Georgia facility since January 1, 2007. In addition to peanut butter and peanut paste, the expanded recall includes roasted peanuts and other peanut products and was based in part on laboratory testing information from the company. On January 28, 2009, the facility reported that production of all peanut products had stopped. For the latest information on the PCA recall, please visit the FDA website (www.FDA.gov).

More than 2833 peanut-containing products produced by a variety of companies may have been made with the ingredients recalled by PCA. The list of currently recalled products can be found on the FDA website. FDA and the product manufacturers are working to determine the list of affected products, which may be extensive. Many companies have already announced whether their products include ingredients being recalled by Peanut Corporation of America, Georgia, and more companies are expected to make similar announcements. The current list of recall announcements from companies and more information about FDA's investigation can be found at the FDA website.

Source: Centers for Disease Control and Prevention