

# LOUISIANA MONTHLY MORBIDITY

DISEASES REPORTED DURING MONTH OF APRIL, 1967

BY PARISH OF RESIDENCE

## ENCEPHALITIS DUE TO HERPES SIMPLEX VIRUS

On February 7, 1967, a sixteen month old boy from Evangeline Parish died following a seven day illness marked by progressive signs of encephalitis. Brain tissue obtained at autopsy was submitted for viral studies. Herpes simplex virus was recovered and the pathological sections were consistent with a diagnosis of Herpes simplex encephalitis.

When looked for, Herpes simplex accounts for as many as 7 per cent of cases of meningo-encephalitis. The diagnosis is suggested by a four-fold rise in complement-fixing antibody titer. This can be obtained by submitting acute and convalescent sera to the State Board of Health Laboratory. In view of a recent report of treatment with 5-iodo-2' deoxyuridine, making a diagnosis may be of increasing importance in future years. (Continued on Page 3).

DIVISION OF PUBLIC HEALTH STATISTICS -

- LOUISIANA STATE BOARD OF HEALTH

RELEASED May 5, 1967	ASEPTIC MENINGITIS	DIPHTHERIA	ENCEPHALITIS	ENCEPHALITIS, POST INFECTIONOUS	INFECTIOUS AND SERUM HEPATITIS	MEASLES	MENINGOCOCCAL INFECTIONS	PERTUSSIS	POLIOMYELITIS, PARALYTIC	RABIES IN ANIMALS	RHEUMATIC FEVER	STREPTOCOCCAL INFECTIONS	SHIGELLOSIS	TYPHOID FEVER	OTHER SALMONELLOSIS	TETANUS	TUBERCULOSIS, PULMONARY	GONORRHEA	SYPHILIS
TOTAL TO DATE 1966	6	1	4	6	141	72	103	1	0	17	2	39	19	1	55	3	360	2115	947
TOTAL TO DATE 1967	7	4	7	2	147	87	58	22	0	27	4	41	28	11	47	1	333	2189	721
TOTAL THIS MONTH	1	0	5	1	36	24	10	18	0	5	1	10	8	0	4	1	58	494	183
ACADIA																		8	3
ALLEN																			1
ASCENSION																			
ASSUMPTION																	1		2
AVOUELLES																	1		
BEAUREGARD																		1	
BIENVILLE										1								1	
BOSSIER																		21	1
CADDO					7		1						6				2	80	11
CALCASIEU			1		1	5							1		1			23	1
CALDWELL										3								1	
CAMERON																			
CATAHOULA																			
CLAIBORNE						1												3	
CONCORDIA																			
DESO TO										1							1		
EAST BATON ROUGE					4	7									2		7	28	12
EAST CARROLL																			1
EAST FELICIANA																			1
EVANGELINE																		1	
FRANKLIN																			
GRANT																	1		2
IBERIA																	1	5	1
IBERVILLE						1											1	1	8

DIVISION OF PUBLIC HEALTH STATISTICS -		- LOUISIANA STATE BOARD OF HEALTH																	
RELEASED	ASEPTIC MENINGITIS	DIPHTHERIA	ENCEPHALITIS	ENCEPHALITIS, POST INFECTIOUS	INFECTIOUS AND SERUM HEPATITIS	MEASLES	MENINGOCOCCAL INFECTIONS	PERTUSSIS	POLIOMYELITIS, PARALYTIC	RABIES IN ANIMALS	RHEUMATIC FEVER	STREPTOCOCCAL INFECTIONS	SHIGELLOSIS	TYPHOID FEVER	OTHER SALMONELLOSIS	TETANUS	TUBERCULOSIS, PULMONARY	GONORRHEA	SYPHILIS
May 5, 1967																			
JACKSON																		1	
JEFFERSON			2		8	1		2				7					3	22	4
JEFFERSON DAVIS							1											4	
LAFAYETTE						1	1										3	7	2
LAFORCHE				1													1	3	2
LASALLE																	1		
LINCOLN																		8	3
LIVINGSTON																	1		
MADISON											1						1		4
MOREHOUSE																		1	
NATCHITOCHE																		5	2
ORLEANS	1				5	3	1	10				1			1	1	11	153	77
OUACHITA			1		2										1		8	34	10
PLAQUEMINES					1			1											
POINTE COUPEE																	1		
RAPIDES																	3	11	4
RED RIVER																			2
RICHLAND																			1
SABINE																			
ST. BERNARD					1			1				1							
ST. CHARLES							1	1											1
ST. HELENA																			1
ST. JAMES																	1		
ST. JOHN					1												1	1	3
ST. LANDRY			1				1										3	18	6
ST. MARTIN																	1	5	1
ST. MARY					2		1											1	1
ST. TAMMANY												1						6	2
TANGIPAHOA																	2	5	4
TENSAS																			
TERREBONNE																	1	1	1
UNION																		2	
VERMILION					2														
VERNON					1		3											2	
WASHINGTON						1		3										3	2
WEBSTER																			3
WEST BATON ROUGE																			
WEST CARROLL							2										1		
WEST FELICIANA					1	2						1						24	1
WINN																		4	2
OUT OF STATE																			

From January 1 through April 30 of 1967, the following cases were also reported: 4 Tularemia, 10 Malaria, 5 Leptospirosis and 4 Brucellosis.

The possibility of a gamma globulin deficiency in this patient is raised because of a history of repeated infection, the presence of a gamma globulin deficiency in a male sibling and the fact that two other male siblings have died from overwhelming infections.

It is especially gratifying that brain tissue was obtained for virus isolation and that the diagnosis was subsequently confirmed as Herpes simplex encephalitis because the patient had recently received live measles virus vaccine which had been considered a possible cause of the encephalitis.

#### MASS MEASLES CAMPAIGN - BATON ROUGE

An End Measles Campaign has been scheduled for May 25 and 26, in Baton Rouge. This will be a community wide program sponsored by the local medical society and the parish health unit. Thirty two vaccination sites have been scheduled where jet injector guns will be used. Recent campaigns have been completed in Grant, St. James and St. John Parishes, and plans are being made for a New Orleans End Measles Sunday in July. Other parishes are now making plans for fall campaigns.

#### FAMILY OUTBREAK OF TYPHOID FEVER - CADDO, RED RIVER

The increase in typhoid fever in 1967, compared to the same period in 1966, is the result of a phage type B2 outbreak in northwestern Louisiana, involving at least fourteen people. The first case, who lived in Red River Parish, had his clinical onset in December, 1966. From this index case thirteen additional infections were traced through a large family, part of which lived in Red River and part in Shreveport. The epidemic continued through January, 1967, and its cessation can be attributed to nursing supervision and vaccination of family contacts.

Intensive investigation has failed to reveal the source of infection of the index case. Several possibilities exist, including the maternal grandparents who both had typhoid fever in 1937, and contact with potentially contaminated water. The intermittent excreter is a well known part of the epidemiology of typhoid fever and repeated stool cultures in high risk individuals, such as the grandparents in this case, often reveals a hidden carrier.

This outbreak is typical of those seen in Louisiana in recent times. It was probably due to contact transmission among a low socioeconomic group with inadequate sanitary facilities. If a chronic carrier had been discovered, then the question of treatment would have been raised. Recent reports suggest that a trial with ampicillin is of value.