

SYPHILIS SEROLOGY - WHY REPORT IT?

This question has been raised more than once since the State Board of Health amended the Sanitary Code to require that private laboratories report reactive serologic tests for syphilis to the Department of Health.

The answer lies in the fact that reporting of cases is an essential step in accomplishing the continued reduction of syphilis in the United States. The Department of Health is not merely counting cases or trying to get someone's name on file. It is offering important services to the physicians and to the public. Over 33% of the infectious syphilis patients reported in Louisiana in 1969 were brought to treatment through the process of Health Department representatives interviewing diagnosed syphilis patients and locating the suspects named. Many diagnosed

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DIVISION OF PUBLIC HEALTH STATISTICS -

- LOUISIANA STATE DEPARTMENT OF HEALTH

RELEASED March 5, 1970	ASEPTIC MENINGITIS	DIPHTHERIA	ENCEPHALITIS	ENCEPHALITIS, POST INFECTIONOUS	INFECTIOUS AND SERUM HEPATITIS	MEASLES	MENINGOCOCCAL INFECTIONS	PERTUSSIS	POLIOMYELITIS, PARALYTIC	RABIES IN ANIMALS	RHEUMATIC FEVER	RUBELLA *	SHIGELLOSIS	TYPHOID FEVER	OTHER SALMONELLOSIS	TETANUS	TUBERCULOSIS, PULMONARY	GONORRHEA	SYPHILIS, PRIMARY AND SECONDARY
TOTAL TO DATE 1969	2	0	4	1	153	2	29	0	0	4	4	7	10	0	15	2	147	1286	96
TOTAL TO DATE 1970	4	4	3	2	109	7	24	1	0	25	4	7	10	0	7	1	98	1627	90
TOTAL THIS MONTH	3	2	2	1	74	1	17	1	0	15	3	5	8	0	6	0	71	893	54
ACADIA																	2	3	1
ALLEN																	1	1	
ASCENSION																			
ASSUMPTION	1				1														
AVOUELLES					1												2	1	
BEAUREGARD																	1		
BIENVILLE									2									1	1
BOSSIER					2													25	
CADDO					1							2					11	64	7
CALCASIEU					7			1				1	1				6	25	
CALDWELL																	1		
CAMERON																	1		
CATAHOULA																			
CLAIBORNE									4									2	1
CONCORDIA																	1	4	2
DESOTO																	1	4	2
EAST BATON ROUGE		1									1		2				9	48	8
EAST CARROLL																		1	
EAST FELICIANA																	1	1	
EVANGELINE																			
FRANKLIN																	1		
GRANT																			
IBERIA			1		1												3	3	
IBERVILLE					1												2		1

*Includes Rubella Congenital Syndrome

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JACKSON										3									
JEFFERSON	1			1	3		1					1	1					69	3
JEFFERSON DAVIS					6										2		1	6	
LAFAYETTE					2								1				4	21	
LAFOURCHE					1		2										1	2	1
LASALLE																			
LINCOLN										1								1	
LIVINGSTON															1		2	3	
MADISON																		1	
MOREHOUSE					1													2	2
NATCHITOCHES					2												1	7	
ORLEANS	1		2		35		8				2	2					5	324	14
OUACHITA					1												1	56	4
PLAQUEMINES					1												1	1	
POINTE COUPEE																			
RAPIDES					2												1	28	2
RED RIVER										3									1
RICHLAND						1											5	3	
SABINE																		6	1
ST. BERNARD					1										2				
ST. CHARLES																			
ST. HELENA																		1	
ST. JAMES																			
ST. JOHN																			2
ST. LANDRY															1		2	17	
ST. MARTIN							1											6	
ST. MARY							1											4	
ST. TAMMANY					1		1											5	
TANGIPAHOA					1		1					1					1	17	
TENSAS							1												
TERREBONNE																			
UNION					1												1	2	
VERMILION																	1		
VERNON																		76	1
WASHINGTON													1					34	
WEBSTER					1		1			2							1	4	3
WEST BATON ROUGE																		2	
WEST CARROLL					1												1	1	
WEST FELICIANA																		12	
WINN																		2	
OUT OF STATE																			

From January 1 Through February 28 of 1970, the following cases were also reported:
 1 Brucellosis, 1 Leprosy, 2 Malaria (contracted outside U.S.A.), and 1 Trichinosis

patients with early syphilis remain unreported and therefore are not interviewed by persons trained in venereal disease epidemiology. In 1968, a survey conducted in cooperation with the AMA estimated that nine out of ten patients treated by private physicians for infectious syphilis in Louisiana were not reported. Louisiana ranked 50th in percentage of physicians responding to the AMA survey questionnaire.

Over 50% of the infectious syphilis cases reported by private physicians in Louisiana are brought to the attention of the Department through the follow up of serologic tests for syphilis performed by the Department's own laboratories. A case report is already on file for about half of these reactors. If no case report is found, a request for inquiry is sent to the Health Department venereal disease investigator closest to the physician who submitted the specimen. The investigator then contacts the physician, asks for diagnosis and offers to perform the epidemiology when indicated. Quite often, the physician requests the investigator to help return the patient for further observation and treatment. Personnel engaged in this work have gained valuable experience with the private physician-patient relationship during the past 12 years; over 2,800 requests to contact physicians about serologic reactors were made in one year alone.

The responsibility for reporting diagnosed cases of syphilis still remains with the patient's personal physician; the laboratory reports merely act as signals for the Health Department to contact the physician. The Sanitary Code requires the Department to contact the physician submitting the specimen concerning syphilis serology of his private patients. Follow up of patients with reactive serology is with the cooperation of the physician.

The reporting of reactive syphilis tests is now required in 41 states. In an inquiry of state health officers, the Department received replies from 11 stating that no legal complications resulted from the requirement of reporting positive serology and that the reporting was useful in the syphilis control program.

RUBELLA PROGRESS REPORT

A concerted effort to prevent an expected rubella epidemic is under way in Louisiana. Rubella vaccine is being given to children in nursery schools through the fourth grade. Programs are being conducted by health department immunization teams in cooperation with school officials and local medical societies. Over 109,000 immunizations have been administered in the period 13 October 1969 - 1 March 1970 in 16 parish-wide programs with approximately 70% of the target population receiving the vaccine. An additional 32 parishes have requested and are awaiting programs. Almost no reported adverse reactions to the vaccine have occurred.

While Louisiana is among the leading states in the total number of immunizations administered through organized programs, inadequate supply and slow delivery of vaccine by the manufacturers have hampered efforts considerably. Those parishes that have not formally requested programs are urged to do so promptly so that they may be included in the state-wide planning schedule. Limited availability of vaccine has been a factor in schedule planning.