

Louisiana



Reported Morbidity
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DEPARTMENT OF HEALTH AND HUMAN RESOURCES
OFFICE OF HEALTH SERVICES AND ENVIRONMENTAL QUALITY
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TRICHINOSIS OUTBREAK — LOUISIANA *

In the period February 5- March 19, 1979, 19 cases of trichinosis occurred in Louisiana. All of the patients lived in rural areas in the western part of the state, and all had consumed raw or smoked sausage made by one of the patients, who had bought his hogs at a local livestock auction. The hogs were killed shortly after purchase, were made into sausage, and then sold to neighbors and friends. Upon investigation, it was learned that the hogs had been garbage fed, a violation of existing Louisiana sanitary laws. *Trichinella spiralis* larvae were identified in 2 samples of leftover smoked sausage obtained from different patients.

A total of 31 people ate the sausage, and 19 (61%) became ill. The mean incubation period between consumption of sausage and onset of illness was 17 days, with a range of 5 to 31 days. The illness was characterized by periorbital edema (84%), fever (74%), and myalgia (68%). A case was defined as a person who exhibited at least 2 of these

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BULLETINS

Q FEVER

A case of Q. Fever has recently been confirmed in a female from St. Tammany Parish. To the best of our knowledge, this is the first case of Q. Fever ever diagnosed in Louisiana. The patient presented with generalized myalgia, chills, fever ranging from 102-104°F, nausea, vomiting, diarrhea, severe frontal headaches, and a mild dry cough. On the fourth day of hospitalization her chest x-ray showed an acute interstitial pneumonia. She was placed on medication and the illness resolved within 3 weeks. The source of the illness could not be determined.

The laboratory confirmation of this case was performed in the Louisiana State Division of Laboratories and the Microbiology Department of the University of Maryland School of Medicine. Four-fold rises in antibody titers were detected by use of complement fixation, microagglutination and indirect fluorescent antibody tests.

The diagnosis of Q. Fever might be made more often if Q. Fever was included in the differential diagnosis of atypical pneumonias and severe febrile illness. Q. Fever is a rickettsial disease which typically presents with chills, retrobulbar headache, weakness, malaise, and severe sweats. A pneumonitis occurs in most cases with cough, scanty expectoration, chest pain, and minimal physical findings. The disease

varies greatly in severity and duration and in many instances is subclinical. The infectious agent is *Coxiella burnetii* (*Rickettsia burnetii*) and is spread by airborne transmission in dust contaminated by placental tissues, birth fluids and excreta of infected animals. Ingestion of raw milk and direct contact with infected animals or contaminated materials such as wool and straw may also spread the disease. Tetracycline is the drug of choice. If Q. Fever is suspected, acute and convalescent sera should be sent to the State Laboratory for testing.

LEGIONNAIRE'S DISEASE

Two sporadic cases of Legionnaires' Disease have occurred recently in Louisiana. This brings the total number of confirmed cases in our state to 12 since August, 1977. Of the two recent cases one occurred in a 40 year old black female from Calcasieu Parish. The second was in a 43 year old black male from Tangipahoa Parish. Both patients were hospitalized, received appropriate treatment and have fully recovered from their illnesses. Serologic testing for Legionnaires' Disease is done by the state laboratory. Acute and convalescent sera should be drawn 3-8 weeks apart. Since confirmation of disease takes several weeks, suspect cases should be treated immediately with erythromycin.

Trichinosis — continued from page 1

symptoms within 1 month of consumption of implicated meat or 1 symptom together with a positive bentonite flocculation test ($\geq 1:5$). Six of the 19 patients had symptoms severe enough to require hospitalization. All were treated with steroids and recovered completely. Sixteen of the patients had blood drawn for bentonite flocculation tests; all had positive titers, ranging from 1:5 to 1:320. Twelve of the 19 patients had elevated eosinophilic counts (8% to 52%).

Editorial Note: Although the number of reported cases of trichinosis has declined from a peak of 487 in 1948, an average mean of nearly 150 cases per year has been reported in the United States for the last 10 years (1). Pork products, especially sausage, have been implicated in the majority of cases, although bear meat has also been implicated and accounted for a recent outbreak in Alaska and California (2).

The incidence of trichinosis in garbage-fed hogs is much higher than in farm-raised (presumably grain-fed) hogs (5.1 per 1,000 vs. 1.25 per 1,000) (1). Despite laws, in most states, that prohibit feeding raw garbage to hogs, this practice still occurs sporadically. Some individuals, especially of certain ethnic groups, prefer raw or only partially cooked sausage. A history of improper cooking is found in the investigation of most outbreaks.

References

1. CDC: Trichinosis Surveillance Annual Summary 1977. Issued August 1978
2. MMWR 28:2, 1979

* Reprint from MMWR 28:30, 1979 pp 357-8.

SEVERE UNDERNUTRITION

Severe undernutrition has been an officially reportable disease in Louisiana since 1969. There are approximately ten to twelve cases reported each year. In 1979, as of July 31, there were seven cases, three of which resulted in death.

Severe undernutrition is defined by the classic vitamin deficiency states such as scurvy and rickets plus failure to thrive and severe anemia (hemoglobin ≤ 6 gms %). The number of cases of severe undernutrition are not just another set of statistics buried in a report sent to Washington, D.C. Epidemiologic investigation of each case occurs promptly. One case in a family usually indicates undernutrition is a problem in other family members. Home visits are made by local public health personnel including nutritionists. The nutritional status of other children and adults in the family are evaluated by blood counts and by charting height and weight on normal growth charts. If the undernutrition is due to criminal neglect, legal action can be taken to remove other

children from the home. If finances are a problem, enrollment in federally funded food stamp programs can be arranged and if ignorance of proper nutrition is implicated, education and follow-up can be done.

The majority of the undernutrition cases each year are picked up at the parish health units by screening of patients who are enrolled in the EPSDT (Early Periodic Screening, Diagnosis, and Treatment) and Child Health Programs. Very few, if any, cases are ever reported by physicians. The seven cases that have been reported this year probably represent the proverbial tip of the iceberg and many more cases including those with mild symptoms probably occur each year. Twenty-five regional nutritionists and the local parish health units are available for consultation and investigation of suspect or proven cases of undernutrition. If you have further questions contact Dr. Rose Ann Langham, Administrator, Nutritionist Services, Office of Health Services and Environmental Quality (504-568-5065).

IMMUNIZATIONS FOR FOREIGN TRAVEL

(No. 5 in Series)

Hepatitis A Prophylaxis

The risk of Hepatitis A for United States residents travelling abroad appears to be small. It varies with living conditions, the prevalence of hepatitis in the areas visited, and the length of stay. United States residents travelling ordinary tourist routes for less than three months are not at great risk of contracting hepatitis and gamma globulin shots are not routinely recommended for this group.

Travelers staying for extended periods of time (over three months), especially in developing countries, are at higher risk of developing hepatitis and should be immunized. Well-documented studies have been done among soldiers, missionaries, and Peace Corps volunteers showing the efficacy of gamma globulin administration in groups under less than ideal sanitary conditions for prolonged periods of time. For example, a study was done in the 1960's comparing the yearly incidence of viral hepatitis among Peace Corps volunteers given gamma globulin shots every six months to volunteers given less frequent injections and missionaries given no protection at all. The rate of hepatitis among the immunized Peace Corps volunteers was 0.97 cases per 100 persons-years of residence abroad compared to 3.0 cases per 100 persons-years among unprotected missionaries.¹ The difference between immunized

and non-immunized groups was even greater in a study of 20,000 Scandinavian troops residing in the Middle East for periods of approximately six months. Hepatitis incidence was ten times greater in unimmunized than in immunized controls (0.1% vs. 1.14%).²

Gamma globulin is given intramuscularly and has few associated side effects. The dose volume depends on body weight and length of stay. For stays less than three months, the dose schedule is 0.5 to 1.0 ml for children (depending on size) and 2.0 ml for adults. For travel over three months, 1 to 2.5 ml should be given to children and 5 ml to adults. The shots should be repeated every four to six months for as long as the high risk exposure continues.

REFERENCES:

- ¹ Woodson, R.D. and Clinton J.J.: Hepatitis Prophylaxis Abroad, *JAMA*, 209 (7): 1053 - 1058, Aug.18, 1969.
- ² Kluge, T.: Gamma Globulin in the Prevention of Viral Hepatitis: A Study on the Effect of Medium Size Doses, *Acta Med Scand*, 174:469-477, 1963.
- ³ Center for Disease Control, *Health Information for International Travel - 1978*, pp. 81-82.

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SELECTED REPORTABLE DISEASES (By Place of Residence)

| STATE AND PARISH TOTALS | VACCINE PREVENTABLE DISEASES | | | | | ASEPTIC MENINGITIS | HEPATITIS A AND UNSPECIFIED | HEPATITIS B | LEGIONNAIRES DISEASE | MALARIA** | MENINGOCOCCAL INFECTIONS | SHIGELLOSIS | TUBERCULOSIS, PULMONARY | TYPHOID FEVER | OTHER SALMONELLOSIS | UNDERNUTRITION SEVERE | GONORRHEA | SYPHILIS, PRIMARY AND SECONDARY | RABIES IN ANIMALS (PARISH TOTALS CUMULATIVE, 1979) |
|----------------------------|---------------------------------|----------|-------|-----------|---------|-----------------------|--------------------------------|-------------|-------------------------|-----------|-----------------------------|-------------|----------------------------|------------------|---------------------|--------------------------|-----------|------------------------------------|--|
| | MEASLES | RUBELLA* | MUMPS | PERTUSSIS | TETANUS | | | | | | | | | | | | | | |
| TOTAL TO DATE 19 78 | 320 | 478 | 60 | 4 | 1 | 44 | 387 | 107 | N.A. | 3 | 86 | 66 | 301 | 3 | 63 | 7 | 12599 | 389 | 11 |
| TOTAL TO DATE 19 79 | 246 | 27 | 32 | 14 | 2 | 57 | 364 | 148 | 0 | 3 | 109 | 56 | 348 | 3 | 76 | 7 | 13206 | 549 | 17 |
| TOTAL THIS MONTH | 2 | 2 | 2 | 5 | 1 | 19 | 53 | 21 | 0 | 0 | 10 | 8 | 49 | 0 | 19 | 1 | 2130 | 91 | 0 |
| ACADIA | | | | | | 2 | 2 | 1 | | | | | | | | | 12 | | |
| ALLEN | | | | | | | | | | | | | 1 | | | | 3 | | |
| ASCENSION | | | | | | | 1 | | | | | | | | | | 6 | | |
| ASSUMPTION | | | | | | | | | | | | | 1 | | | | | | |
| AVOYELLES | | | | | | | | | | | | | | | | | 8 | | |
| BEAUREGARD | | | | | | | 1 | | | | | | | | | | 11 | | |
| BIENVILLE | | | | | | | | | | | | | | | | | 1 | | |
| BOSSIER | | | | | | | 1 | | | | | | | | 1 | | 32 | 1 | 4 |
| CADDO | 1 | | | | | | 1 | 1 | | | | 5 | 3 | | 4 | | 194 | 4 | 3 |
| CALCASIEU | | | | | | 1 | | | | | | | 4 | | | | 85 | | |
| CALDWELL | | | | | | | | | | | | | | | | | 5 | | |
| CAMERON | | | | | | | | | | | | | | | | | 4 | | |
| CATAHOULA | | | | | | | | | | | | | | | | | 3 | | |
| CLAIBORNE | | | | | | | | | | | | | 1 | | | | 12 | 2 | |
| CONCORDIA | | | | | | | | | | | | | | | | | 9 | | |
| DESOTO | | | | | | | | | | | | | | | | | 9 | | 2 |
| EAST BATON ROUGE | | | | | | | | | | | | | 6 | | 1 | | 165 | 12 | |
| EAST CARROLL | | | | | | | | | | | | | | | | | 11 | 1 | |
| EAST FELICIANA | | | | | | | | | | | | | | | | | | | |
| EVANGELINE | | | | | | | | | | | 1 | | | | 1 | | | | |
| FRANKLIN | | | | | | | | | | | | | | | | | | | |
| GRANT | | | | | | | | | | | | | | | | 1 | 5 | | |
| IBERIA | | | | | | | 1 | | | | | | | | | | 1 | 1 | |
| IBERVILLE | | | | | | | | | | | | | | | | | 6 | 1 | 1 |
| JACKSON | | | | | | | | 1 | | | | | | | | | 2 | | 1 |
| JEFFERSON | | 1 | 2 | 2 | | 11 | 16 | 4 | | | 3 | | 2 | | 1 | | 109 | 3 | |
| JEFFERSON DAVIS | | | | | | | 1 | | | | | | | | | | 15 | | |
| LAFAYETTE | | | | | | 2 | 5 | 5 | | 1 | | 1 | 1 | | 1 | | 23 | 4 | |
| LAFOURCHE | | | | 1 | | | | | | | | | | | | | 3 | | |
| LASALLE | | 1 | | | | | | | | | | | | | | | | | |
| LINCOLN | | | | | | | | | | | | | | | | | 6 | | |
| LIVINGSTON | | | | 1 | | | 2 | | | | | | | | | | 3 | 2 | |
| MADISON | | | | | | | 3 | | | | 1 | | | | | | 18 | | |
| MOREHOUSE | | | | | | | | | | | | | | | | | 14 | | |
| NATCHITOCHE | | | | | | | | | | | 1 | | | | 1 | | 23 | | |
| ORLEANS | | | | | 1 | 1 | 12 | 5 | | 1 | | 18 | 1 | 1 | | | 901 | 36 | |
| OUACHITA | | | | | | | | | | 1 | | 2 | 4 | | | | 118 | 7 | |
| PLAQUEMINES | | | | | | 1 | 1 | 1 | | | | | | | | | 1 | | |
| POINTE COUPEE | | | | | | | | | | | | | | | | | 4 | | |
| RAPIDES | 1 | | | | | | | 1 | | | | 1 | 1 | | | | 93 | 6 | 3 |
| RED RIVER | | | | | | | | | | | | | | | | | | | 1 |
| RICHLAND | | | | | | | | | | | | 1 | | | | | 9 | 1 | |
| SABINE | | | | | | | | | | | | | | | | | 4 | | |
| ST. BERNARD | | | | | | | 3 | | | 1 | 1 | 2 | 1 | | | | 3 | | |
| ST. CHARLES | | | | | | | | | | 1 | | | | | | | 10 | | |
| ST. HELENA | | | | | | | | | | | | | | | | | 4 | | |
| ST. JAMES | | | | | | | | | | | | | | | | | 1 | | |
| ST. JOHN | | | | | | | 1 | | | | | | | | | | 6 | | |
| ST. LANDRY | | | | 1 | | | | | | | | | | | | | 9 | | |
| ST. MARTIN | | | | | | | | 1 | | | | | | | | | 8 | | |
| ST. MARY | | | | | | | | | | | | | | | | | 3 | | |
| ST. TAMMANY | | | | | | | 1 | | | | | | | | | | 18 | 1 | |
| TANGIPAHOA | | | | | | | | | | | | | | | | | 19 | 1 | |
| TENSAS | | | | | | | | | | | | 1 | | | | | 1 | | |
| TERREBONNE | | | | | | 1 | | | | | | 1 | | | | | 4 | | |
| UNION | | | | | | | | 1 | | | | | 1 | | | | 5 | 3 | |
| VERMILION | | | | | | | | | | | | | | | | | 2 | 1 | |
| VERNON | | | | | | | | | | | | | | | | | 51 | 1 | |
| WASHINGTON | | | | | | | | | | 1 | | | 1 | | 1 | | 20 | 1 | |
| WEBSTER | | | | | | | | | | | | | 2 | | 1 | | 18 | | 2 |
| WEST BATON ROUGE | | | | | | | | | | | | 1 | | | | | 5 | 2 | |
| WEST CARROLL | | | | | | | | | | | | | | | | | | | |
| WEST FELICIANA | | | | | | | 1 | | | | | | | | | | | | |
| WINN | | | | | | | | | | | | | | | | | 7 | | 1 |
| OUT OF STATE | | | | | | | | | | | | | | | | | 10 | | |

* Includes Rubella, Congenital Syndrome.

** Acquired outside United States unless otherwise stated.

N.A. - Not Available

From January 1, through July 31, 1979, the following cases were also reported: 1- Typhus Fever, Endemic; 20-Trichinosis; 1-Psittacosis; 4-Leptospirosis; 1-Rocky mountain Spotted Fever; 1-Brucellosis