

EPI Update for Friday, May 9, 2014
Center for Acute Disease Epidemiology (CADE)
Iowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- **Update on MERS-CoV in the United States**
- **Human metapneumovirus outbreak in long term care facility**
- **Importance of hand hygiene in reducing antibiotic resistance threats**
- **Meeting announcements and training opportunities**

Update on MERS-CoV in the United States

The first U.S. case of MERS-CoV was identified in a health care professional who had been providing medical care in Saudi Arabia. This patient was isolated and treated in an Indiana hospital (contact, standard, and airborne precautions were used).

Illness has not been reported among those in contact with this confirmed U.S. patient (no Iowa residents have been identified as contacts). Individuals should seek medical attention (and be reported to public health officials) if they develop consistent respiratory symptoms within 14 days of travel to the Arabian Peninsula.

Health care providers should immediately report any patients with suspect MERS-CoV infection to the Iowa Department of Public Health at 800-362-2736. The State Hygienic Laboratory has been authorized by CDC to conduct MERS-CoV PCR testing on respiratory specimens. IDPH will coordinate with SHL and local public health to arrange testing and further investigate suspect cases.

Thus far, there has not been evidence of sustained spread of MERS-CoV in community settings but small outbreaks in health care settings have been reported in other countries. There has been an increase in cases reported in the Arabian Peninsula this spring, similar to last year, showing the possibility of seasonal variation. The origin of MERS-CoV is unknown, although there have been several theories (e.g. exposure to camels).

Guidance for healthcare providers, laboratories, and infection control professionals is available at www.cdc.gov/coronavirus/mers/hcp.html

Human metapneumovirus outbreak in long term care facility

An outbreak of human metapneumovirus (hMPV) in an Iowa long term care facility has recently occurred; hMPV is a significant cause of respiratory infections, with nearly 100% of adults showing evidence of previous exposure. After a 5 to 6 day incubation period, illnesses resulting from hMPV infection may range from mild respiratory symptoms to pneumonia or death, with more serious infections occurring in older adults.

Transmission is similar to other respiratory viruses, mainly via contact with infected secretions, spread by contaminated inanimate objects, or via aerosol particles. hMPV testing is available from Iowa's State Hygienic Laboratory.

If you suspect an outbreak may be occurring, please contact IDPH immediately.

For more information on hMPV outbreaks in long term care settings, visit:

www.cdc.gov/mmwr/preview/mmwrhtml/mm6246a1.htm

Importance of hand hygiene in reducing antibiotic resistance threats

CDC encourages healthcare providers to promote and practice good hand hygiene to reduce the risk of infection among patients and prevent the spread of antimicrobial resistance. Every year, more than two million people in US develop infections that are resistant to antibiotics and at least 23,000 of them die. CDC has identified four core actions to prevent antibiotic resistance and hand hygiene is a key step in preventing infections.

According to a recent report from the World Health Organization, increasing hand hygiene compliance in health facilities from poor (<60%) to excellent (90%) reduces the acquisition of methicillin-resistant *Staphylococcus aureus* (MRSA) by 24%.

For more information on how hand hygiene may reduce the spread of multidrug resistance organisms in health-care settings, visit:

www.who.int/gpsc/5may/MDRO_literature-review.pdf?ua=1

Meeting announcements and training opportunities

None

Have a healthy and happy week! Enjoy the blooming Crabapple Trees!

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800-362-2736