

**EPI Update for Friday, July 17, 2015**  
**Center for Acute Disease Epidemiology (CADE)**  
**Iowa Department of Public Health (IDPH)**

Items for this week's EPI Update include:

- **Reminder: suspect meningococcal invasive disease is immediately reportable**
- **Opportunities to educate patients regarding sodium intake**
- **Meeting announcements and training opportunities**

**Reminder: suspect meningococcal invasive disease is immediately reportable**

Suspect and confirmed cases of invasive *Neisseria meningitidis* are immediately reportable to IDPH. While often confirmed via blood or cerebrospinal fluid culture, the first lab results available are often gram stains. If a health care provider suspects *N. meningitidis* and gram negative diplococci are seen on a gram stain, please immediately report the case to IDPH. Public health action will likely be taken based upon the gram stain results.

The State Hygienic Laboratory (SHL) will confirm and serogroup isolates of *N. meningitidis* (in addition, SHL will isolate the organism from appropriate clinical samples upon request). Laboratories are required to submit all isolates cultured from normally sterile sites for serogrouping. This serogrouping aids in public health surveillance.

IDPH will work with local public health to identify close contacts of the case and provide recommendations for post-exposure prophylaxis. Once identified, contacts should receive chemoprophylaxis as soon as possible, preferably within 24 hours after the index case has been identified.

For more information about *N. meningitidis*, visit [www.idph.state.ia.us/CADE/DiseaseIndex.aspx?disease=Meningitis](http://www.idph.state.ia.us/CADE/DiseaseIndex.aspx?disease=Meningitis) (Meningococcal invasive disease).

**Opportunities to educate patients regarding sodium intake**

A recent MMWR article indicated that 45.5 percent of adult Iowans reported taking action to reduce sodium intake in 2013, and 17.8 percent reported receiving advice from a health professional on how to reduce their sodium intake. Those with self-reported hypertension were more likely to take action to reduce sodium intake than those without hypertension. These respondents were also more likely to receive information on how to do so from a health care professional.

In 2011, the average daily sodium intake among U.S. adults was estimated to be 3,592 mg above the *Healthy People 2020* target of 2,300 mg. Reducing average sodium intake by even 1,200 mg daily is projected to save \$18 billion in health care costs annually. Health care providers can help patients reduce sodium intake by recommending healthy dietary patterns.

For more information about sodium intake in Iowa and the U.S., visit [www.cdc.gov/mmwr/preview/mmwrhtml/mm6425a3.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6425a3.htm).

**Meeting announcements and training opportunities**

None

**Have a healthy and happy week!**

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