

**EPI Update for Friday, March 11, 2016**  
**Center for Acute Disease Epidemiology (CADE)**  
**Iowa Department of Public Health (IDPH)**

Items for this week's EPI Update include:

- **Mumps update**
- **Influenza activity update**
- **CDC releases HAI resources**
- **Historical malaria in Iowa**
- **Meeting announcements and training opportunities**

**Mumps update**

Over the last several weeks, mumps activity has decreased on the University of Iowa campus. The number of cases identified on the University of Northern Iowa campus has been slightly increasing over the same time period and is being watched closely. To prevent the spread of mumps, infected persons should self-exclude from school or work for five days after onset of illness.

For additional information on mumps activity in Iowa, visit [idph.iowa.gov/cade/disease-information/mumps](http://idph.iowa.gov/cade/disease-information/mumps) and [idph.iowa.gov/ehi/mumps](http://idph.iowa.gov/ehi/mumps)

**Influenza activity update**

Influenza activity is increasing in Iowa. Four influenza viruses have been confirmed by the State Hygienic Laboratory as circulating in Iowa: influenza A (H3), influenza A (H1N1), influenza B (Victoria), and influenza B (Yamagata).

The flu vaccine is the best defense against getting influenza; however, it is also important to take personal actions to help prevent the spread of illness. Remember the 3Cs: Cover your coughs and sneezes; Clean your hands frequently; and Contain germs by staying home when ill. Anti-viral medications are an important second line of defense to treat the flu in persons at highest risk of developing more severe illness. Antivirals work best if started as soon as, or within 48 hours of when symptoms begin.

For more information on influenza activity in Iowa, visit [idph.iowa.gov/cade/disease-information/influenza](http://idph.iowa.gov/cade/disease-information/influenza) .

**CDC releases new HAI resources**

The CDC has released new Healthcare Associated Infections (HAI) and antimicrobial resistance resources. A recent report urges healthcare personnel to protect patients from HAI using a combination of approaches. To review the report, please visit [www.cdc.gov/vitalsigns/protect-patients/](http://www.cdc.gov/vitalsigns/protect-patients/). A new interactive web-based application which includes data on HAI caused by antibiotic resistant bacteria (state, regional, and national level data is accessible) is available at [www.cdc.gov/hai/surveillance/ar-patient-safety-atlas.html](http://www.cdc.gov/hai/surveillance/ar-patient-safety-atlas.html). The national and state-level HAI Progress Report has been released. The progress report is available at [www.cdc.gov/hai/surveillance/progress-report/index.html](http://www.cdc.gov/hai/surveillance/progress-report/index.html).

### **Historical malaria in Iowa**

Americans are no longer at great risk of contracting malaria in the continental United States; however, this wasn't always true. In the 1800's, malaria was present throughout much of the Midwest, South, and Southeast. In [The Little House on the Prairie](#), Laura Ingalls Wilder's describes pioneer life with her family. At one point, when living on the Kansas prairie, the entire family is ill with "fever 'n' ague". Pa asks, "*First I'm hot and then I'm cold, and I ache all over. Is that the way you girls feel? Do your very bones ache?*" Laura writes, "*Clouds of mosquitos follow Ma and Laura wherever they go. The mosquitoes like to suck the sweet juice from the blackberries, but they like to bite Laura and Ma just as much.*" Some of the family thought this illness came from eating bad watermelon and others, from the harmful night air. However, it may have been malaria, which does in fact mean 'bad air'.

By 1912, local spread of malaria in Iowa was pretty much over, although it remained a problem in the southeastern U.S. In fact, the Atlanta-based CDC originated in the World War II era as the Office of Malaria Control in War Areas. Focused on improving the health of soldiers, it decreased the transmission of vector-borne diseases like malaria in areas of southeastern states with military bases. By 1947, the National Malaria Eradication Program was established, and performed more than 4,650,000 DDT applications to the interiors of rural homes over the next two years; it also worked on improving swamp drainage to decrease mosquito breeding, and performed outdoor spraying of insecticides. By 1951, malaria was effectively eradicated in the U.S., although it could be reintroduced in areas where the *Anopheles* mosquito still occurs.

In the past 10 years, there have been 114 cases of malaria diagnosed in Iowa, all of them travel or immigration associated. For more information on the history of malaria, visit [www.cdc.gov/malaria/about/history/elimination\\_us.html](http://www.cdc.gov/malaria/about/history/elimination_us.html). To find travel recommendations concerning malaria and other infectious diseases, visit [wwwnc.cdc.gov/travel/destinations/list](http://wwwnc.cdc.gov/travel/destinations/list).

### **Meeting announcements and training opportunities**

*Iowa Statewide Infection Prevention and Control Conference*. Cedar Rapids Marriott Hotel and Conference Center May 3-4, 2016. Online registration is at [www.continuetolearn.uiowa.edu/UIConferences/meetings.aspx?cnfcode=16-122-01](http://www.continuetolearn.uiowa.edu/UIConferences/meetings.aspx?cnfcode=16-122-01).

### **Have a healthy and happy (and warm) week!**

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