

EPI Update for Friday, April 21, 2017

Center for Acute Disease Epidemiology (CADE)

Iowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- Diagnosing and managing *Shigella* strains with possible reduced susceptibility to ciprofloxacin
- Complications of mumps among students with two doses of MMR
- Zika may cause birth defects in one in 10 pregnancies
- Electronic laboratory reporting redirect project
- Iowa Acute Disease Monthly Update
- In the news: You draw it: Just how bad is the drug overdose epidemic?
- Infographic: Don't let mumps spoil your fun
- Meeting announcements and training opportunities

Diagnosing and managing *Shigella* strains with possible reduced susceptibility to ciprofloxacin

Infections with emerging strains of *Shigella* may be harder to treat with ciprofloxacin, an antibiotic often used when treatment is needed, due to emerging quinolone resistance. Using an antibiotic that is not effective can contribute to the growing problem of multidrug-resistant *Shigella* and increase the chance of others getting sick from this highly contagious bacterium.

CDC issued an alert this week, recommending that healthcare providers consider the following when treating patients with shigellosis.

- Do not use antibiotics unless necessary for *Shigella* infections;
- If antibiotics are necessary, test for antibiotic resistance in all shigellosis cases to determine which antibiotics the bacteria may be susceptible to; and
- Avoid using ciprofloxacin when the minimum inhibitory concentration (MIC) is ≥ 0.12 ug/ml, even if the laboratory report identifies the isolate as susceptible.

For more information and additional recommendations for healthcare providers, laboratories, and public health officials, read the full CDC Health Advisory: <https://emergency.cdc.gov/han/han00401.asp>.

Complications of mumps among students with two doses of MMR

During July 2015–May 2016, a mumps outbreak occurred at the University of Iowa. A total of 301 cases of mumps were diagnosed among students. The University Iowa, Johnson County Public Health Department, and the Iowa Department of Public Health with assistance from CDC, conducted an investigation. Among the 95 percent of students with mumps for whom clinical information was available, 20 patients with complications were identified (16 self-reported and four clinician-diagnosed). The 20 cases included 15 (5 percent) cases of orchitis, three (1 percent) of transient hearing loss, two of mastitis, and one of meningitis (one patient had both orchitis and transient hearing loss). All 20 patients had documentation of receipt of at least two doses of measles-mumps-rubella vaccine. Because data are limited regarding the presentation and clinical course of mumps complications in persons who have received two doses of mumps-containing vaccine, the note describes three cases with complications (orchitis, transient hearing loss, and meningitis).

To read the article, visit www.cdc.gov/mmwr/volumes/66/wr/mm6614a4.htm?s_cid=mm6614a4_e.

Zika may cause birth defects in one in 10 pregnancies

CDC reported about one in 10 pregnant women with a confirmed Zika virus infection had a fetus or baby with Zika-related birth defects. The information comes from CDC's U.S. Zika Pregnancy Registry, which includes data from all 50 states, DC, and all U.S. territories except Puerto Rico. The study looked at 250 women with a definitive positive test result for Zika virus. The risk for birth defects was higher (one in 15) for women infected during the first trimester of pregnancy.

For more information, visit

<https://www.cdc.gov/mmwr/volumes/66/wr/mm6613e1.htm>.

Electronic laboratory reporting redirect project

The Iowa Department of Public Health (IDPH), in collaboration with multiple state and metropolitan public health jurisdictions, as well as multiple public health program areas (infectious disease, HIV, and STD), conceived, designed, built, tested, and shared an innovative software component that enhances electronic laboratory reporting (ELR) and plays an integral role in a process that IDPH calls ELR Redirect.

See this link for a short video: cste.site-ym.com/blogpost/1084057/232701/The-Public-Health-ELR-Network.

ELR Redirect has been implemented at the production level between Iowa and Nebraska, as well as Iowa and Wisconsin public health jurisdictions. There are also open test ELR Redirect projects at various stages between Iowa and Illinois, Iowa and Kansas, Iowa and Minnesota, Iowa and South Dakota, as well as Michigan and Wisconsin.

Iowa Acute Disease Monthly Update

The new issue of the Iowa Acute Disease Monthly Update is available. Visit <http://idph.iowa.gov/CADE> and scroll down to "Reports" or access the report directly at <http://idph.iowa.gov/Portals/1/userfiles/79/Reports/Misc/Monthly%20Report/IADMU%20Apr%2017.pdf>.

In the news: You Draw It: Just How Bad Is the Drug Overdose Epidemic?
www.nytimes.com/interactive/2017/04/14/upshot/100000005019985.mobile.html

Infographic: Don't let mumps spoil your fun

<https://www.cdc.gov/mumps/infographics/mumps-mmr.html>

Meeting announcements and training opportunities

None

Have a healthy and happy week!

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