

EPI Update for Friday, May 5, 2006

Center for Acute Disease Epidemiology

Iowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- Mumps update
- New UHL guidance for mumps testing
- A new TB threat...
- Keyboard pathogens
- Availability of IMOVAX rabies vaccine
- Meetings announcements and training opportunities

Mumps update

A total of 1552 confirmed, probable, and suspect cases of mumps have been reported to the Iowa Department of Public Health (IDPH) as of the end of Wednesday, May 3. Seventy-four counties are now experiencing mumps activity. There have been nine confirmed instances of hospitalization for mumps; an additional 13 cases are still being evaluated for hospitalization. CADE has not identified any clusters of mumps cases in primary or secondary schools. Vaccination campaigns continue in all Iowa counties for persons aged 18-25. For more information on vaccination clinics, please contact your local public health department.

New UHL guidance for mumps testing:

- 1)** Beginning Thursday, May 4, the University Hygienic Laboratory (UHL) will perform Real Time PCR for mumps virus on all oral/buccal swab specimens. The results from PCR testing will be available in 24 to 48 hours of specimen receipt instead of seven days for virus culture.
- 2)** At this stage of the outbreak, urine is no longer considered a valuable specimen, need not be collected, and will not be tested.
- 3)** Serologic testing for IgM antibodies continues; however, analysis of the rise in IgG levels between acute and convalescent specimens is no longer recommended by the CDC and is contraindicated by the implementation of the recent vaccination program. Thus, IgG testing for mumps will no longer be performed at UHL.

If a person has been vaccinated with MMR within the three months prior to showing signs and symptoms of mumps, serologic testing is not recommended. The MMR vaccine is a live, attenuated virus vaccine, and there will be an IgM and/or IgG response. Specimens should be tested by PCR only. Recent history of MMR vaccination MUST be reported on the Test Request Form to help distinguish infection with mumps from other viruses. For more information, go to www.idph.state.ia.us/adper/mumps.asp
<<http://www.idph.state.ia.us/adper/mumps.asp>>

A new TB threat...

The latest national surveillance data shows that tuberculosis (TB) rates reached an all-time low in the United States in 2005, but that progress to eliminate TB is slowing. Furthermore, the increasing occurrence of drug-resistant TB (MDR), including extensively drug-resistant cases (XDR TB) presents significant challenges to treatment and control of the disease both in the United States and abroad. For more information, visit www.cdc.gov/mmwr/preview/mmwrhtml/mm5511a2.htm

Iowa continues to have one of the lowest TB case rates in the nation (1.9 cases per 100,000 population) despite a 17 percent increase in the number of cases. In 2004 Iowa reported 47 cases and in 2005, 55 were reported.

The proportion of reported TB cases in non-U.S. born persons has increased significantly in the past decade. In 2005, 55 percent of Iowa's cases were in non-U.S. born persons, compared to 38 percent in 1995. This disparity is further illustrated by the fact that people born outside the U.S. account for only 3.1 percent of Iowa's population. Iowa has not had a MDR case of TB since two cases were reported in 2000. No XDR TB cases have been reported in the state.

Careful monitoring of TB patients and sending TB specimens to UHL is important for continued complete and accurate TB surveillance in Iowa.

Keyboard pathogens

A new study supports that computer keyboards in healthcare settings not only may harbor a variety of disease-causing organisms, but can be successfully sanitized in the workplace.

According to a study by William Rutala, PhD, MPH from the University of North Carolina Health Care System, and his colleagues, "Computers are ubiquitous in the healthcare setting and have been shown to be contaminated with potentially pathogenic microorganisms..." (*Infect Control Hosp Epidemiology*. 2006; 27:372-377).

"Our data suggest that microbial contamination of keyboards is prevalent and that keyboards may be successfully decontaminated with disinfectants," the authors write. "Keyboards should be disinfected daily or when visibly soiled or if

they become contaminated with blood... We agree with other investigators who have recommended that routine disinfection be performed on computer keyboards that are used in patient care areas... the risk of transmission of pathogens from computer keyboards to patients would be prevented by compliance with current hand hygiene guidelines."

Availability of IMOVAX rabies vaccine

IMOVAX rabies vaccine (human diploid cell vaccine) is available again. For the past two years, Chiron was the only company producing rabies vaccine. During the summer and fall there is tremendous demand throughout the U.S. for the rabies post-exposure prophylaxis biologics. IMOVAX rabies vaccine is now available through Sanofi Pasteur, Inc.

For more information, contact Sanofi Pasteur at 1-800-822-2463 (1-800-VACCINE) or visit www.sanofipasteur.us/ <<http://www.sanofipasteur.us/>>

Meetings announcements and training opportunities:

Natural toxins and bioterrorism

The Grand Rounds presentation of the University of Iowa Upper Midwest Center for Public Health Preparedness will be presented by Mark A. Poli, U.S. Army Medical Research Institute on Thursday, May 11, from noon to 1 p.m. This presentation will be broadcast via the ICN and streaming video on the Web. Registration and more information are available at www.public-health.uiowa.edu/icphp/grand_rounds/current_session/ <http://www.public-health.uiowa.edu/icphp/grand_rounds/current_session/>

Have a healthy and happy week!
Center for Acute Disease Epidemiology
Iowa Department of Public Health
800-362-2736