

EPI Update for Friday, October 6, 2006  
Center for Acute Disease Epidemiology  
Iowa Department of Public Health (IDPH)

*Items for this week's EPI Update include:*

- **Update on multi-state outbreak of *E. coli* O157:H7 infections from fresh Spinach**
- **Cooler temperatures have hit, but watch out; you can still be bit!**
- **Influenza and mumps (MMR) vaccination campaign**
- **Breast Cancer Awareness Month**

**Update on multi-state outbreak of *E. coli* O157:H7 infections from fresh Spinach**

As of Tuesday Oct. 3, 192 persons in 26 states have been reported as being infected with the strain of *E. coli* O157:H7 associated with fresh bagged spinach.

Among the cases, 98 (51 percent) were hospitalized, 30 (16 percent) developed a type of kidney failure called hemolytic-uremic syndrome (HUS), and one adult in Wisconsin died. One hundred thirty-six (71 percent) of the cases have been female and 20 (11 percent) have been children under 5 years old. The proportion of persons who developed HUS was 28 percent in children (younger than 18 years old), 9 percent in persons 18 to 59 years old, and 14 percent in persons 60 years old or older. Among cases who provided the date when their illnesses began, 80 percent became ill between Aug. 19 and Sept. 5. The peak time when illnesses began was Aug. 30 to Sept. 1; on one of those three days, 31 percent of persons with the outbreak strain became ill.

For more information, visit [www.cdc.gov/foodborne/ecolispinach/](http://www.cdc.gov/foodborne/ecolispinach/).

**Cooler temperatures have hit, but watch out; you can still be bit!**

Even with the cooler temperatures during the month of September, West Nile virus is still very active. This week, five additional mosquito pools were reported as positive for West Nile virus; all pools were collected in Scott County during September. This means we can expect to see humans being infected with West Nile virus well into October. Humans typically develop symptoms 3 to 14 days after being bit by an infected mosquito. While most Iowans will never develop symptoms of West Nile virus, some will develop fever, headache, fatigue, swollen lymph glands, eye pain and/or skin rash on the neck, trunk, arms or legs. Symptoms of severe disease may include diarrhea, vomiting, headache, high fever, neck stiffness, stupor, disorientation, coma, tremors, convulsions, muscle weakness, and paralysis.

While it may seem that there are many mosquitoes outside, the primary vectors of West Nile virus in Iowa are the *Culex* mosquitoes (not your ordinary nuisance mosquitoes). They are fairly cold- and drought-tolerant mosquitoes, thus are still around. The Iowa State University entomology department reports that there has been an increase in pest and vector mosquito species from those reported last week, indicating that conditions

continue to be favorable for mosquito activity. Iowans should still be taking precautions to protect against being bit by mosquitoes. Thus, when outdoors, make sure you are wearing a mosquito repellent containing DEET.

For surveillance maps and prevention information, visit [www.idph.state.ia.us/adper/wnv\\_surveillance.asp](http://www.idph.state.ia.us/adper/wnv_surveillance.asp).

For guidance on West Nile virus human testing, visit [www.uhl.uiowa.edu/services/diseases/mosquitoborne/wnv/humantesting.xml](http://www.uhl.uiowa.edu/services/diseases/mosquitoborne/wnv/humantesting.xml).

For information about mosquito surveillance, visit [www.ent.iastate.edu/medent/about](http://www.ent.iastate.edu/medent/about).

### **Influenza and mumps (MMR) vaccination campaign**

Fortunately, Iowa has not seen outbreaks on college campuses yet this fall (even though other states have seen outbreaks). But it is important to continue the MMR vaccination campaign, targeting susceptible individuals 18 through 46 years of age, to decrease the risk of this occurring. Since we are starting flu vaccine clinics now, this is a good opportunity to also offer the mumps vaccine to those who are eligible.

Remember, when giving MMR and flu vaccines, the Measles-Mumps-Rubella (MMR) vaccine is a live attenuated vaccine and can be given at the same visit as the influenza vaccine. There are 2 types of influenza vaccines available; **inactivated** (injection) and the **live** attenuated (nasal spray). Both vaccines are safe and effective. Both can be given at the same time as the MMR vaccine, i.e., inactivated (such as the flu shot) or live vaccines (such as the live, attenuated influenza vaccine-LAIV nasal spray) can be administered simultaneously. However, after administration of a live vaccine, at least 4 weeks should pass before another live vaccine is administered.

### **Breast Cancer Awareness Month**

October is Breast Cancer Awareness Month. This year in America, more than 211,000 women will be diagnosed with breast cancer and 43,300 die. One woman in eight either has or will develop breast cancer in her lifetime. In addition, 1,600 men will be diagnosed with breast cancer and 400 will die this year. If detected early, the five-year survival rate exceeds 95 percent. Mammograms are among the best early detection methods, yet 13 million U.S. women 40 years of age or older have never had a mammogram.

For more information, visit [www.nationalbreastcancer.org/](http://www.nationalbreastcancer.org/)

### **New edition of IDPH newsletter available**

The October 2006 issue of the *Iowa Health Focus* newsletter is now available online at [www.idph.state.ia.us/do/focus.asp](http://www.idph.state.ia.us/do/focus.asp). EPI Update readers may be especially interested in reading the article about the simulated pandemic influenza exercise held at the end of last month.

**Have a healthy and happy week!**

**Center for Acute Disease Epidemiology**

**Iowa Department of Public Health**

**800-362-2736**