

EPI Update for Friday October 20, 2006
Center for Acute Disease Epidemiology
Iowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- **Iowa's first confirmed influenza case of the season identified**
- **Meningococcal disease cases confirmed in northwest Iowa**
- **Breast cancer awareness month - Can men get breast cancer?**
- **Meeting announcement and training opportunities**

Iowa's first confirmed influenza case of the season identified

IDPH announced its first influenza case of the season in a woman in her 30s from southern Iowa. Influenza A was confirmed through culture. Since it is still early in the season, a rapid (point of care) influenza test result is not reliable to determine if a person has influenza; rapid tests have a low positive predictive value when there is no or low influenza activity in the community.

To determine if the positive rapid test result is a **true** positive, IDPH recommends contacting the University Hygienic Lab (UHL) for influenza testing by virus culture and/or PCR for the following cases:

- A patient has a positive rapid test for influenza.
- A patient has influenza like illness (ILI) but is rapid test negative.

The Food and Drug Administration (FDA) posted "Cautions in Using Rapid Tests for Detecting Influenza A Viruses" on Nov. 14, 2005 (www.fda.gov/cdrh/oivd/tips/rapidflu.html). The FDA alerts us to the fact that clinicians should use clinical experience, further laboratory testing, surveillance information about circulating influenza strains, and the current level of influenza activity, along with an understanding of the limitations of these rapid tests.

UHL has shipped specimen submission kits to laboratories throughout Iowa in order to provide these testing services. Results of testing will be posted on the UHL Web site that can be used as a guide for disease prevalence in Iowa (www.uhl.uiowa.edu/webstats/Webstats?parameter=1). For further information regarding confirmatory testing of a rapid influenza test, contact UHL at 319-335-4500.

For more information on influenza, including updated fact sheets for the 2006-07 influenza season, please visit IDPH's Web site at www.idph.state.ia.us/adper/flu.asp.

Meningococcal disease cases confirmed in northwest Iowa

Public health officials announced two confirmed cases of *Neisseria meningitidis*, serogroup type C, during Oct. 10-17. Investigation steps were taken to identify and notify close contacts of the ill. Local public health told contacts to see their physician to be treated with antibiotics, implemented meningococcal vaccine clinics, and initiated community education strategies on prevention measures. In addition a request was

distributed asking health care providers to increase surveillance activities in northwest Iowa.

Meningococcal disease is caused by *N. meningitidis*. The symptoms of this disease include sudden onset of high fever, headache, vomiting and stiff neck. A small rash with red pinpoint spots that do not turn white when pushed may also be present. *N. meningitidis* could cause bacteremia, meningitis, pneumonia and other serious conditions.

Meningococcal disease is not as contagious as the common cold or the flu. It is not spread by casual contact, or by simply breathing the air where a person with meningococcal disease has been. Meningococcal disease is transmitted by direct contact with mucus or droplets from the nose or throat of an infected person. Close contact with a person for at least four hours, contact with the person's saliva from kissing, sharing eating utensils, drinks, or cigarettes is how meningococcal disease is spread. Living in the same household with an infected person is also considered close contact.

Preventive measures to help protect individuals include:

- Washing hands frequently with soap and water or using hand sanitizer.
- Avoid sharing food, beverages, eating utensils, lipstick/lip balm, and cigarettes.
- Always cover your cough and sneeze with a disposable tissue or your sleeve.

Breast cancer awareness month - Can men get breast cancer?

Men can also get breast cancer. In men, breast cancer can happen at any age, but is most common in men who are between 60 and 70 years old. Male breast cancer is not very common. For every 100 cases of breast cancer, less than 1 are men. For men, signs of breast cancer and treatment are almost the same as for women. For more information, visit www.cancer.gov/cancertopics/pdq/treatment/malebreast/patient and www.cdc.gov/cancer/breast/basic_info/facts.htm.

Meeting announcement and training opportunities

Upper Midwest Center for Public Health Preparedness Grand Rounds Series:

Monday, Oct. 30, 12:00 - 1:00 p.m. CST, Room 2117

Medical Education and Research Facility (MERF), University of Iowa

This presentation will be available via live Web cast.

Registration for this program is required and available through the [PrepareIowa, Learning Management System](#).

Learning Objectives:

1. Increased understanding of the origin and current status of the H5N1 avian influenza in Asia, Africa, and Europe;
2. Greater appreciation of the cooperative roles played by veterinary and human medicine in controlling zoonotic influenza viruses and preventing an influenza pandemic.

2006-2007 Influenza Update ICN:

What: The 2006-2007 Influenza Update

Where: Iowa Communication Network (ICN)

When: 12:00 – 2:00 p.m. on Wednesday, Nov. 1

Who: Iowa's influenza surveillance clinicians, health care workers, laboratorians, public health workers and infection control professionals.

For more information, please visit the University Hygienic Laboratory web site at www.uhl.uiowa.edu/educationoutreach/conferencesevents/influenzaworkshop/index.xml.

Have a healthy and happy week!

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800-362-2736