

**EPI Update for Friday, September 7, 2007**  
**Center for Acute Disease Epidemiology (CADE)**  
**Iowa Department of Public Health (IDPH)**

Items for this week's EPI Update include:

- **Methicillin-resistant *Staphylococcus aureus* (MRSA) in athletes**
- **Cryptosporidiosis (crypto): an epidemiologist's experience**
- **Statewide cryptosporidiosis activity summary**
- **World Rabies Day encourages education**
- **Sites still needed: Iowa Influenza Surveillance Network**
- **Reminder: Your IDPH newsletter needs your input**
- **Meeting announcements and training opportunities**

**Methicillin-resistant *Staphylococcus aureus* (MRSA) in athletes**

Recently in the U.S., MRSA outbreaks among athletes have been identified. MRSA is transmissible from person to person through direct skin contact, and is of particular concern in contact sports. The Centers for Disease Control and Prevention (CDC) has published guidelines for prevention of MRSA skin and soft tissue infections. For more information about sports-related MRSA, visit [www.cdc.gov/mmwr/preview/mmwrhtml/mm5233a4.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5233a4.htm). For clinical management, visit [www.cdc.gov/ncidod/dhqp/pdf/ar/CAMRSA\\_ExpMtgStrategies.pdf](http://www.cdc.gov/ncidod/dhqp/pdf/ar/CAMRSA_ExpMtgStrategies.pdf).

When addressing sports-related infections, CDC's recommendations and national sports organization's guidelines should be followed. IDPH and local public health agencies are available for consultation regarding MRSA and other microbial infections in athletes; in most cases, contact sports events do not need to be cancelled.

**Cryptosporidiosis (crypto): A CADE epidemiologist's experience**

I thought I did all the right things to prevent disease as a parent and as an epidemiologist - hand sanitizer, frequent hand washing, thorough and routine house cleaning, etc. But seven days after a visit to the fair and an afternoon at a swimming pool, my three-year old son fell ill with cryptosporidiosis. I knew what was wrong right away - profuse, watery diarrhea was his primary symptom, followed by fever, chills, stomach ache and loss of appetite. Then exactly seven days after he became ill, I came down with crypto too.

*What I did right:*

- I contacted my child's doctor the first day of symptoms. They instructed me to collect several stool samples and bring them in at his appointment.
- I kept my infant in child care, but the three year old at home while he was ill.
- I thoroughly washed all linens, toys, eating utensils and cleaned diaper-changing surfaces.
- When I became ill, I stopped preparing food for my family. I isolated myself from others, including staying home from work, and washed my linens and clothing myself.
- We all stayed out of recreational water (swimming pools, lakes, etc.) through the close of the pool season.
- I kept my ill child out of child care while symptomatic, and when he returned, I informed the child care staff to take precautions while changing his diaper.
- I took time to talk to my physician about crypto when I was diagnosed. He had limited information about it, and since I was now an expert, I provided up-to-date information, including news on a recently approved medication, Nitazoxanide (Alinia). For more information, visit [wwwn.cdc.gov/travel/yellowBookCh4-Cryptosporidiosis.aspx](http://wwwn.cdc.gov/travel/yellowBookCh4-Cryptosporidiosis.aspx) .

*What I did wrong:*

- I thought a non-traditional environmental cleaner could prevent spread. If I have followed the Center for Disease Control and Prevention's (CDC) guidelines, I would have used 3 percent hydrogen peroxide.
- I thought the prescription medication now available to treat crypto would be readily available. However, all the pharmacies I contacted in the Des Moines area did not stock it. I had to order it and it took 24 hours to arrive.
- I provided a poor stool sample to my doctor and did not provide more than one, so my lab test was negative. Even though my illness was clearly linked epidemiologically to my son, my having this disease was not reported to CDC due to the fact that I had no lab confirmation.
- I used hand sanitizer both at the fair and after swimming at the pool. Both were ample opportunities for us to contract crypto and we should have washed hands instead. Hand sanitizers do not kill parasites like crypto.
- I used gloves frequently and washed my hands constantly but I could not remember not to touch food with my bare hands when I ate.

In the end my husband and infant remained healthy and we are now "crypto" free.

**Statewide cryptosporidiosis activity summary**

Iowa is still experiencing a significant outbreak of cryptosporidiosis with numbers of cases reaching 270. The following counties have reported higher than normal numbers of cases: Carroll, Cerro Gordo, Dubuque, Linn, Polk, Sioux, Story and Tama. Those most likely to be affected are children ages 5 to 11 and their parents. For more information, visit [www.idph.state.ia.us/adper/cade.asp](http://www.idph.state.ia.us/adper/cade.asp).

### **World Rabies Day encourages education**

Human cases of rabies are very rare in Iowa and in the U.S.; typically one to three cases of human rabies are reported per year in the U.S. In recognition of the significant impact rabies has on global health, Sept. 8 has been declared World Rabies Day. Iowa's most recent human case of rabies occurred in 2002. Prior to that, the last case was in 1951. For more information, visit [www.idph.state.ia.us/adper/rabies.asp](http://www.idph.state.ia.us/adper/rabies.asp). Recommendations for human rabies prevention, visit <http://www.cdc.gov/mmwr/PDF/rr/rr4801.pdf>.

CADE provides 24/7 consultation for rabies. During business hours, call 800-362-2736. After-hours, call 515-323-4360 and the State Patrol will contact CADE on-call staff. The human, animal, and public health communities are encouraged to observe World Rabies Day by educating themselves and others on this significant public health issue. For more information on World Rabies Day, visit [www.worldrabiesday.org](http://www.worldrabiesday.org).

### **Sites still needed: Iowa Influenza Surveillance Network**

The Iowa Influenza Surveillance Network is seeking participants to track influenza activity for the 2007-2008 season. Surveillance is essential to determine how influenza is impacting Iowans and what public health officials may do to lessen its impact.

The following participants are needed:

- Physicians, nurse practitioners and physician assistants who typically see influenza-like illness in their patients
- School nurses
- Child care centers (with a minimum of 50 children enrolled)
- Long-term care facilities

Participants are asked to track simple measures of influenza activity. For example, schools are asked to track the number of children absent due to illness each week and the average number of children enrolled each week. All participants are asked to report data weekly into a web-based reporting tool. Reporting starts the first week of October and continues through the last week in March, 2008. For more information or to enroll in the network, contact Meghan Harris at IDPH at 515-281-7134 or [mharris@idph.state.ia.us](mailto:mharris@idph.state.ia.us).

### **Reminder: Your IDPH newsletter needs your input**

If you haven't already done so, please help us improve your source for general news from IDPH, the *Iowa Health Focus* newsletter. Please click [here](#) to take a brief (4-minute) survey. You can also go to [www.idph.state.ia.us/adper/focus.asp](http://www.idph.state.ia.us/adper/focus.asp) and click on the link at the top of the page. The survey will be available until September 14.

## **Meeting announcements and training opportunities**

Save the date: Fall Regional Environmental Health Meetings, 10:00-3:30

Region 1 – Ankeny – October 16

Region 2 – Mason City – October 25

Region 3 – Spencer – October 31

Region 4 – Atlantic – October 12

Region 5 – Washington – November 15

Region 6 – Toddville – October 18

Epi Update Fall Conference dates and locations

Region 1 – Marshalltown – Sept. 21, 2007

Region 2 – Mason City – Oct. 8, 2007

Region 3 – Cherokee – Oct. 11, 2007

Region 4 – Creston – Oct. 2, 2007

Region 5 – Ottumwa – Sept. 14, 2007

Region 6 – Cedar Rapids – Sept. 26, 2007

For more information, visit:

[www.idph.state.ia.us/adper/common/pdf/epi\\_update\\_fall\\_2007.pdf](http://www.idph.state.ia.us/adper/common/pdf/epi_update_fall_2007.pdf)

**Have a healthy and happy week!**

Center for Acute Disease Epidemiology

Iowa Department of Public Health

800-362-2736