EPI Update for Friday, December 12, 2008
Center for Acute Disease Epidemiology
Iowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- **Iowa identifies first influenza case of the season**
- **Important information about influenza A resistance to Oseltamivir (Tamiflu®)**
- **Norovirus shedding after experimental human infection**
- **Staying safe while staying warm this winter**
- **Safe winter walking**
- **Clarification from last week's article "Rabies in a Missouri man"**
- **Meeting announcements and training opportunities**

Iowa identifies first influenza case of the season

Influenza A was confirmed in a 25 year old female from Eastern Iowa. All states surrounding Iowa have reported at least one case of influenza. Influenza activity is expected to increase over the next several weeks.

Health care providers are encouraged to submit specimens to the University Hygienic Laboratory on suspected initial cases of influenza. Rapid flu tests are not reliable until flu prevalence is high. Submissions help public health officials determine the types and strains circulating in Iowa and many specimens are sent onto CDC for further testing, including genotyping and resistance to antiviral medication.

Weekly influenza reports are available every Wednesday at www.idph.state.ia.us/adper/iisn.asp. The reports now contain basic viral respiratory information including percent of rapid RSV tests positive.

This is National Influenza Vaccination Week. All eligible patients should be vaccinated. It is not too late to be vaccinated for influenza and vaccination now will provide protection in time for the holidays.

Important information about influenza A resistance to Oseltamivir (Tamiflu®)

Evidence of resistance to a class of influenza antiviral medication, neuraminidase inhibitors, was seen in 2007-2008 both in the U.S. and the Southern Hemisphere. In response to this, CDC expanded antiviral resistance testing of influenza specimens submitted by state public health laboratories for 2008-2009. Preliminary results will be released in MMWR. The report indicates many influenza AH1N1 viruses were resistant to oseltamivir (Tamiflu®). To view the MMWR article, go to www.cdc.gov/mmwr/preview/mmwrhtml/mm5749a3.htm

Recommendations for the treatment of influenza A and B have not changed at this time and are available at www.cdc.gov/flu/professionals/acip/index.htm.

Norovirus shedding after experimental human infection

A study recently published in Emerging Infectious Diseases and conducted at Baylor University looked at the duration and magnitude of virus shedding in persons infected with Norwalk virus after experimental inoculation.

Challenge studies were conducted on healthy adults who had no history of nonbacterial gastroenteritis within three months of inoculation or of bacterial or protozoal enteric infection with one month. Participants were admitted to the hospital and orally received different dosages of diluted norovirus or a placebo. Clinical signs and symptoms were evaluated every four hours and all fecal samples were collected. Participant's signs and symptoms included abdominal cramps, nausea, vomiting, and watery diarrhea. The median duration of these signs and symptoms was 23 hours.

This study found that norovirus could be detected in fecal samples for a median of four weeks and for up to eight weeks after inoculation. Peak virus titers were most commonly found in fecal samples collected after the resolution of symptoms. These observations support epidemiologic observations from norovirus outbreaks linked to food handlers who had recovered from symptomatic infection or in asymptomatic individuals. For more information about norovirus, visit either www.idph.state.ia.us/idph_universalhelp/main.aspx?system=IdphEpiManual&context=Norovirus_factsheet or www.cdc.gov/ncidod/dvrd/revb/gastro/norovirus.htm
For more information on the Baylor study, visit www.cdc.gov/eid/content/14/10/1553.htm

Staying safe while staying warm this winter

As temperatures drop and home heating bills rise, more people look to alternate methods of keeping warm indoors. When people use space heaters and fireplaces to stay warm, the risk of household fires increases, as well as the risk of carbon monoxide (CO) poisoning. Every year, more than 500 people die in the U. S. from accidental CO poisoning. CO is an odorless, colorless gas that can cause sudden illness and death if inhaled.

Always follow the manufacturer's instructions, and remember these safety tips:

- Use fireplace, wood stoves, or other combustion heaters only if they are properly vented to the outside and do not leak flue gas into the indoor air space.
- Use only the type of fuel your heater is designed to use—don't substitute.
- Do not place a space heater within 3 feet of anything that may catch on fire, such as drapes, furniture, or bedding, and never cover your space heater.
- Store a multipurpose, dry-chemical fire extinguisher near the area to be heated.
- Protect yourself from carbon monoxide (CO) poisoning by installing a battery-operated CO detector and never using generators, grills, camp stoves, or similar devices indoors.

Carbon monoxide poisoning is reportable to the Iowa Department of Public Health if there is a blood-carbon monoxide level equal to or greater than 10 percent carboxyhemoglobin or its equivalent in a breath analyzer test, or a clinical diagnosis regardless of any test results. It should be reported by calling the Disease Reporting Hotline at 800-362-2736.

More information on carbon monoxide poisoning can be found at www.cdc.gov/co/pdfs/faqs.pdf.

Safe winter walking

Slips, trips and falls are the second most common cause of accidental deaths in the U.S. each year. While fatalities are not always the outcome, painful, sometimes debilitating injuries often result from slips, trips and falls. The good news is many of these injuries are preventable through simple safety precautions.

Transition risks: Use special care when entering and exiting buildings or vehicles; use handrails or the vehicle for support as you transition from one position to the next.

Parking lots: Statistics show that almost 80 percent of slips and falls due to snow and ice occur in parking lots and on sidewalks, with more than 50 percent occurring between 6 a.m. and noon.

North-facing entrances: When possible, avoid north-facing entrances to buildings. Unless properly cleared, these areas tend to remain icy and slippery.

Appropriate footwear: Appropriate footwear in inclement weather is a must. Rubber and neoprene composite boots and shoes will give more traction than leather or plastic.
When you can't avoid walking on slick surfaces: If you must walk on a slippery surface, slow down, take small steps, and keep a hand free for balance. Bend your knees slightly and walk flat-footed with your center of gravity directly over your feet as much as possible. Bending slightly forward may help protect your head if your feet do slip out from under you.
Be smart: Carrying items can impair your balance. Don't try to carry more than you can easily manage and still maintain balance. Slow down and watch for hazards. Use handrails where available. If possible, do not carry children while walking on slippery ground because a fall could put the child's safety in jeopardy.
Indoor risks: Wet surfaces are a huge risk. When entering buildings, remove snow and water from footwear to prevent creating wet slippery conditions indoors. Mop and dry spills immediately. Place caution signage in problem areas until dry.

This information was compiled from various sources by the IDPH Occupational Safety and Health Surveillance Program. For an interactive reference about winter safety, visit www.osha.gov/SLTC/youth/winterjobs/index.html

Clarification from last week's article "Rabies in a Missouri man"

We received a couple of comments pointing out that the first sentence in the article regarding the rabies case in Missouri is worded in such a way as to suggest that it was the first fatality in the U.S. since 1959. This is not the case. Our first sentence should have read, "The first human rabies fatality in Missouri since 1959 was reported this week." We apologize for any confusion this may have caused and thanks to our Epi Update reader for their comments.

Meeting announcements and training opportunities
None at this time.

Have a healthy and happy week!

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800-362-2736