# EPI Update for Friday, August 5, 2011 Center for Acute Disease Epidemiology (CADE) lowa Department of Public Health (IDPH)

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

- Salmonella Heidelberg outbreak associated with ground turkey
- Canning safety
- Ten greatest achievements in public health
- Meeting announcements and training opportunities

# Salmonella Heidelberg outbreak associated with ground turkey

Approximately 36 million pounds of fresh and frozen ground turkey products have been voluntarily recalled due to possible contamination with *Salmonella* Heidelburg. Nationwide, 78 illnesses in 26 states have been preliminarily linked to the recalled products. To date, one illness has been identified in lowa - a child from Plymouth County who has since recovered.

Remind patients to prevent Salmonellosis by following these recommendations:

- Keep raw meat, fish and poultry away from other food that will not be cooked. Use separate cutting boards for raw meat, poultry and egg products and cooked foods.
- Cook poultry to an internal temperature of 165 degrees F as measured with a food thermometer; leftovers should also be reheated to 165 degrees F. The color of cooked poultry is not always a sure sign of its safety. Only by using a food thermometer can one accurately determine that poultry has reached a safe minimum internal temperature of 165 °F throughout the product. Turkey can remain pink even after cooking to a safe minimum internal temperature of 165 °F. The meat of smoked turkey is always pink.
- Refrigerate raw meat and poultry within two hours after purchase (one hour if temperatures exceed 90 degrees F). Refrigerate cooked meat and poultry within two hours after cooking.
- Wash hands with warm, soapy water for at least 20 seconds after handling raw meat and poultry. Also wash cutting boards, dishes and utensils with hot soapy water.
   Clean up spills right away.

For more information on the outbreak, visit <a href="http://stage1.order.cargill.com/index.html">www.cdc.gov/salmonella/heidelberg/080111/index.html</a>
For more information on recalled products, visit <a href="http://stage1.order.cargill.com/index.html">http://stage1.order.cargill.com/index.html</a>.

#### **Canning safety**

As farmers' markets fill up with bounties from local fields, and backyard gardens produce more beans and tomatoes than can be eaten, experienced canners and those considering canning are getting out their jars and pressure canners. Canning is a great way to preserve food, but if done incorrectly can lead to serious consequences. In 2009, there were three botulism outbreaks in the United States (events with two or more

cases). The three outbreaks were caused by home-canned green beans (associated with three cases in Washington), home-canned asparagus (three cases in Washington and Minnesota), and home-canned tuna (two cases in CA).

Botulism is a rare but serious paralytic illness caused by a nerve toxin that is most commonly produced by the bacterium *Clostridium botulinum*. The classic symptoms of botulism include double vision, blurred vision, drooping eyelids, slurred speech, difficulty swallowing, dry mouth, and muscle weakness. If untreated, these symptoms may progress to cause paralysis of the respiratory muscles, arms, legs, and trunk.

A USDA Guide on Canning is available at www.uga.edu/nchfp/publications/publications usda.html.

## Ten greatest achievements in public health

Achievement #10 - Public Health Preparedness and Response

Since the international and domestic terrorist actions of 2001 highlighted gaps in the nation's public health preparedness, tremendous improvements have been made. In the first half of the decade, efforts were focused primarily on expanding the capacity of the public health system to respond (e.g., purchasing supplies and equipment). In the second half of the decade, the focus shifted to improving the laboratory, epidemiology, surveillance, and response capabilities of the public health system. For example, from 2006 to 2010, the percentage of Laboratory Response Network labs that passed proficiency testing for bioterrorism threat agents increased from 87 percent to 95 percent. The percentage of state public health laboratories correctly subtyping *Escherichia coli* O157:H7 and submitting the results into a national reporting system increased from 46 percent to 69 percent, and the percentage of state public health agencies prepared to use Strategic National Stockpile material increased from 70 percent to 98 percent.

During the 2009 H1N1 influenza pandemic, these improvements facilitated the rapid detection and characterization of the outbreak, deployment of laboratory tests, distribution of personal protective equipment from the Strategic National Stockpile, development of a candidate vaccine virus, and widespread administration of the resulting vaccine. These public health interventions prevented an estimated 5 to 10 million cases, 30,000 hospitalizations, and 1,500 deaths.

Existing systems also have been adapted to respond to public health threats. During the 2009 H1N1 influenza pandemic, the Vaccines for Children program was adapted to enable provider ordering and distribution of the pandemic vaccine. Similarly, President's Emergency Plan for AIDS Relief clinics were used to rapidly deliver treatment following the 2010 cholera outbreak in Haiti.

### Meeting announcements and training opportunities

The 2011 TB Case Management Conference will be held September 27-28, 2011 at the Genesis Hospital Adler Education Center, Davenport, Iowa. The course is intended for nurses and public health staff who are actively engaged in the identification, case management, and treatment of patients with tuberculosis infection or disease.

The goal of the conference is to provide an in-depth training experience covering the knowledge and skills essential for the nurse with primary responsibility of TB case management. The course is designed to provide coverage of the evaluation, treatment and case management of medically and psychosocially difficult-to-treat patients. The workshop will go beyond the basic TB curriculum and enhance the participant's ability to be accountable for all facets of case management. There is no fee for this conference. Nursing CEUs are available. This conference is sponsored by IDPH TB Control Program and Heartland National TB Center.

To register and view the conference brochure visit <a href="www.heartlandntbc.org/training.asp">www.heartlandntbc.org/training.asp</a>.

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