# EPI Update for Friday, April 12, 2013 Center for Acute Disease Epidemiology (CADE) lowa Department of Public Health (IDPH)

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

- Diagnosing scabies
- Influenza A (H7N9) in China: update
- Botulism: a rare but serious condition
- Meeting announcements and training opportunities

#### Diagnosing scabies

IDPH occasionally receives reports of suspect scabies outbreaks. Scabies is an infestation of the skin by a microscopic mite and it usually spreads via prolonged direct skin-to-skin contact. Outbreaks typically occur in settings such as nursing homes or residential facilities.

Whenever possible, diagnosis of scabies should be confirmed by identifying the mite, mite eggs, or mite fecal matter. This can be done by removing the mite from the end of its burrow using the tip of a needle, or by obtaining a skin scraping to examine under a microscope. For more information and techniques for confirming a scabies diagnosis visit

www.idph.state.ia.us/idph universalhelp/main.aspx?system=IdphEpiManual&context=Scabies chapter.

#### Influenza A (H7N9) in China: update

As of April 11, 2013, a total of 38 patients have been laboratory confirmed with influenza A (H7N9) virus in China, including10 deaths, 19 severe cases and nine mild cases. At this time there is no evidence of ongoing human-to-human transmission. This new H7N9 virus has not been detected in people or birds in the United States.

For more information, please visit: www.cdc.gov/flu/avianflu/h7n9-virus.htm

#### Botulism: a rare but serious condition

There are four forms of botulism in humans, all due to toxin produced by the bacteria *Clostridium botulinum*. Foodborne botulism is caused by ingesting pre-formed toxin. Infant botulism occurs when an infant ingests the bacteria, which colonize the gut and produce toxin. Similarly, colonization may occur in older children and adults, though this is rare. Wound botulism occurs when a wound becomes infected with the bacteria and toxin is produced.

Botulism is rare in the U.S., with roughly 150 cases reported each year. The last case of botulism in Iowa occurred in 2008. Infant botulism is the most common form of the disease.

Suspect cases of botulism are immediately reportable to IDPH, which will confirm the diagnosis and secure antitoxin for treatment. Antitoxin against infant botulism is only available from the California Department of Public Health. Antitoxin for all other cases is only available from CDC.

For more information on botulism, please visit www.idph.state.ia.us/cade/DiseaseIndex.aspx?disease=Botulism.

## Meeting announcements and training opportunities

Registration is now open for the 2013 Iowa Immunization Conference, which will take place June 12 and 13 at Veterans Memorial Auditorium in Des Moines. For more information and to register, visit

www.idph.state.ia.us/ImmTB/Immunization.aspx?prog=Imm&pg=ImmHome.

The 2013 Iowa Infection Prevention and Control Seminar will be held Tuesday and Wednesday, May 7 and 8 at the Marriott Conference Center in Des Moines. For more information and to register, visit <a href="https://www.continuetolearn.uiowa.edu/UlConferences/">www.continuetolearn.uiowa.edu/UlConferences/</a>.

The 2013 Annual CSTE Conference will be held June 9 through 13 in Pasadena, CA. For more information, visit <a href="mailto:cste.com/cste/2013/late/cfp.cgi">cste.com/cste/2013/late/cfp.cgi</a>.

Dr. Patricia Quinlisk from IDPH and Dr. Lucy Desjardin from SHL will be teaching a course titled "Field Experiences in Public Health" this summer. The course is available to University of Iowa, Iowa State University, and Des Moines University students who have taken a public health epidemiology course. The course will be taught electronically from two locations (University of Iowa and Des Moines University). Students will gain experience in several areas of public health using practical examples, site visits, and field investigations. For more information, call 319-335-2575 or 800-272-6430.

#### Have a healthy and happy week!

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