

EPI Update for Friday, February 27, 2015
Center for Acute Disease Epidemiology (CADE)
Iowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- **Measles update**
- **New Clearinghouse materials for HIV**
- **Chlamydia continues to have the greatest number of cases**
- **New disease caused by Bourbon Virus**
- **Meeting announcements and training opportunities**

Measles update

There are no confirmed cases of measles in Iowa.

From January 1 to February 20, 2015, 154 people from 17 states and Washington DC were reported to have measles: AZ (7), CA (104), CO (1), DC (2), DE (1), GA (1), IL (14), MI (1), MN (1), NE (2), NJ (1), NY (2), NV (6), PA (1), SD (2) TX (1), UT (2), WA (5). Most of the cases, 118 (77 percent), are considered to be part of a large, ongoing, multi-state outbreak linked to Disneyland in California.

Health care providers need to remain vigilant about measles:

- Ensure all patients and staff are up-to-date with MMR vaccinations.
- Consider measles in patients presenting with febrile illness and clinically compatible symptoms (the 'Three Cs' - cough, coryza, and conjunctivitis) followed by a rash three to five days later; also, ask these patients about recent travel to U.S. areas with measles cases, both internationally and to U.S. venues frequented by international travelers.

To access an IDPH measles infographic on *Evaluating Patients for Possible Measles*, visit www.idph.state.ia.us/IDPHChannelsService/file.ashx?file=601B84EF-67AE-4CD9-B144-C67D1833F5BB. CDC's measles Web site can be found at www.cdc.gov/measles/.

New Clearinghouse materials for HIV

The Bureau of HIV, STD and Hepatitis has placed two new brochures at the Clearinghouse including *HIV Testing for Baby and Me*, and *HIV Testing is Your Key to Awareness, Assurance, Health*. (These take the place of the previous pamphlet titled, *What is HIV Testing?*).

These are provided free and can be ordered in bulk for handing out to patients. In addition to these items, many other IDPH educational materials can be ordered from the Clearinghouse. To view these materials, visit healthclearhouse.drugfreeinfo.org/cart.php?target=category&category_id=303.

Chlamydia continues to have the greatest number of cases

Of all of the conditions reported to the Iowa Department of Public Health, *Chlamydia trachomatis* continues to have the greatest number of cases. In 2013, 11,006 cases were reported to IDPH. Data for 2014 are not finalized yet, but preliminary findings indicate that this number has increased.

The vast majority of infections caused by *Chlamydia trachomatis* are sexually transmitted. These infections are very often asymptomatic; an estimated 70 percent of females do not exhibit signs or symptoms. Despite this, *Chlamydia trachomatis* can cause serious, long-term health consequences such as pelvic inflammatory disease (PID), infertility, and ectopic pregnancy if it is not treated early. Pregnant women who are infected and untreated can also pass the infection on to their newborns, leading to conjunctivitis or pneumonia. Additionally, chlamydial infections increase the likelihood of acquiring or transmitting HIV.

Screening remains an important tool in chlamydia control; CDC recommends annual chlamydia screening for all sexually active females 25 years of age or younger, regardless of the presence of signs or symptoms. Testing is also recommended for pregnant women, men who have sex with men, individuals who have new or multiple sex partners, and those presenting with signs or symptoms associated with chlamydia.

Chlamydia can be cured and early treatment prevents long-term consequences. The primary recommended treatment for chlamydia is 1 gram azithromycin given orally in a single dose. For more information regarding screening or treatment, please visit www.cdc.gov/std/prevention/screeningReccs.htm and www.cdc.gov/std/treatment/.

New disease caused by Bourbon Virus

The Kansas Department of Health and Environment and CDC are investigating a previously healthy older male with Bourbon virus disease who had onset of symptoms in late spring 2014 and later died. He reported exposure to ticks before becoming ill. This is the first known case of Bourbon virus disease (named after Bourbon County, where the patient lived).

This patient presented with fever, fatigue, anorexia, nausea, vomiting, and a maculopapular rash, and was thought to have a tick-borne disease. Despite being treated with doxycycline, he died. There are no specific medications or therapies for Bourbon virus disease; supportive therapy is recommended. While there is no routine testing available for Bourbon virus, contact IDPH if you have a patient with illness that might be compatible with Bourbon virus infection. For more information on the virus, visit www.cdc.gov/ncezid/dvbd/bourbon/index.html.

Meeting announcements and training opportunities

Save the Date: IDPH HIV, STD & Hepatitis Conference, June 18-19, 2015; Holiday Inn Airport Conference Center, Des Moines.

The *2015 Iowa Governor's Conference on Public Health* will be held April 14 and 15 in Cedar Rapids, Iowa. To register, visit www.iowapha.org/IGCPH/.

Have a healthy and happy (and hopefully warmer) week!

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