

Epi Update for Friday, March 3, 2017

Center for Acute Disease Epidemiology (CADE)

Iowa Department of Public Health (IDPH)

Items for this week's EPI Update include:

- **Hepatitis C infection in Iowa**
- **Submission of specimens from influenza-associated parotitis cases**
- **Tularemia from a fish hook injury in Minnesota resident**
- **Infographic: Data used to investigate foodborne illness outbreaks**
- **Meeting announcements and training opportunities**

Hepatitis C infection in Iowa

IDPH has released its first report on hepatitis C infection in Iowa. Hepatitis C, a liver infection, is the leading cause of liver cancer and liver transplants in the U.S.

The number of Iowans diagnosed with hepatitis C virus (HCV) infection increased nearly three-fold, from 754 cases in 2000 to 2,235 cases in 2015. The number of HCV diagnoses among those between the ages of 18 and 30 has more than quadrupled since 2009, with 303 diagnoses in 2015. The majority (63 percent) of Iowans reported with HCV were between the ages of 45 and 64. This mirrors national data, and has prompted the CDC to recommend anyone born between 1945 and 1965 talk to their doctor about being tested for Hepatitis C.

For more information, visit www.idph.iowa.gov/hivstdhep/hep.

Submission of specimens from influenza-associated parotitis cases

During the 2016-2017 influenza season, CDC has received a small number of reports of parotitis cases that have tested negative for mumps, but positive for influenza (known as 'flumps'). Thus, CDC is requesting clinical specimens (both buccal and respiratory) from mumps-negative, influenza-positive parotitis patients be submitted to SHL (which will forward on to CDC) for additional characterization.

Patients with acute parotitis who are epidemiologically linked to an ongoing outbreak should be prioritized for mumps testing and in that context, a negative test result for mumps does not rule out a mumps diagnosis; however, testing for alternative pathogens should also be considered, including influenza testing if influenza is circulating in the community.

For more information, visit www.cdc.gov/flu/about/season/questions-answers-parotitis.htm or call the IDPH Center for Acute Disease Epidemiology at 800-362-8736.

Tularemia from a fish hook injury in Minnesota resident

On June 18, a Minnesota woman was fishing on a freshwater lake in South Dakota. While removing a hook from a fish, the hook penetrated the pulp of her left middle finger. Over the next two weeks, she developed pain and swelling at the site of the puncture, a tender left axillary lymph node, and an eschar-like ulcer. A specimen collected from the finger wound was confirmed as *F. tularensis*. Five weeks of antibiotics were prescribed and as of July 8, the lymphadenopathy had resolved and the finger wound was improving. No other cases of tularemia were discovered from this area of South Dakota.

Tularemia can cause a wide range of symptoms in humans depending on the route of exposure. Symptoms include fever, lymphadenopathy, and an ulcer at the site of cutaneous inoculation. Type B is frequently associated with rodents and aquatic environments. This case highlights the significance of obtaining a thorough history including freshwater exposure in cases of tularemia, and the importance of obtaining wound cultures, especially when wound infections do not respond to empiric antibiotic therapy.

For more information, visit www.cdc.gov/tularemia/ or www.cdc.gov/mmwr/volumes/66/wr/mm6607a3.htm?s_cid=mm6607a3_e.

Infographic: Data used to investigate foodborne illness outbreaks

During a suspected foodborne illness outbreak, public health and regulatory officials gather 3 types of data during an investigation.



Infographic available at www.cdc.gov/foodsafety/outbreaks/pdfs/outbreak-infographic.pdf

Meeting announcements and training opportunities

Iowa's Water Quality: A Public Health Perspective. This interactive workshop will be held on April 10 at the Des Moines Airport Holiday Inn. For more information, visit www.iowapha.org/events.

Have a healthy and happy (hot, then snowy, then warm) week!

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