

The Infection

LAWRENCE-DOUGLAS COUNTY
Health Department
www.ldchealth.org

Connection

Health Department sees increase in syphilis

In recent months, the Health Department's sexually-transmitted disease program has seen three syphilis cases in Douglas County.

The illness is not common, according to Sue McDanel, ARNP of the department's Family Planning/STD program. Like gonorrhea,

syphilis appears to be cyclical, with outbreaks occurring every few years.

Physicians are asked to be aware and test patients presenting with signs and symptoms that include a firm, round, small and painless sore on the genitals, anus or mouth. A skin rash,

especially on the palms of the hands or soles of the feet, may also occur. For more information, please see the Dec. 17 Mortality and Morbidity Weekly Report article, Sexually Transmitted Diseases Treatment Guidelines 2010, or call the Health Department at (785) 843-0721.



Mitch Gunnell, 7 months, receives a DTap shot.

Agency keeps watch on pertussis

Months after California declared a pertussis outbreak in June, the number of cases begins to decline. While the outbreak may have reached other states, such as Oklahoma, Illinois and Texas (all have seen increases), the number of whooping cough cases in Douglas County continues to be normal this year.

From January through November, Health Department nurses have investigated 30

reported cases of the illness, which include suspect, probable, confirmed and those determined to not be a case.

The upcoming holidays, however, present an opportunity for the illness to spread as people travel and extended families come together. The Health Department urges physicians to provide the Tdap vaccination

See "Pertussis" on page 2

A special note for patients 60 and older

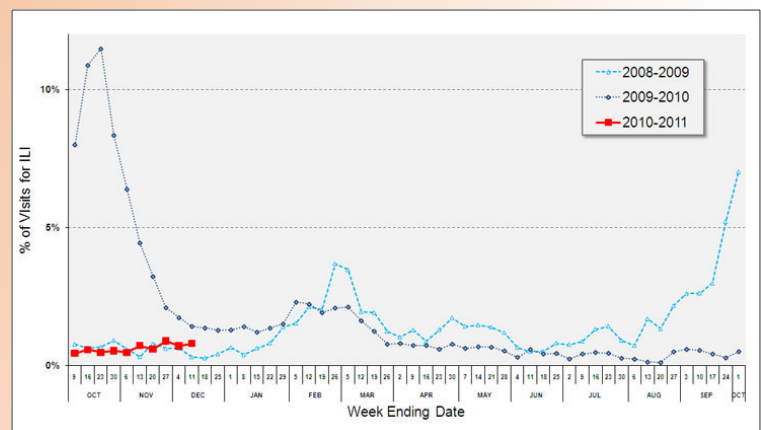
Adults 60 and older in need of a yellow fever vaccination need a physician's order to receive the shot at the Health Department. Adults in this age group may be at risk for systemic adverse events following their immunization.

Influenza activity reports are low so far this season

Flu activity remains low in Kansas. So far in December, less than 1 percent of patients visiting the Kansas Department of Health and Environment (KDHE) flu surveillance clinics had symptoms of flu-like illness. KDHE recruits health care providers throughout Kansas to participate as a surveillance site.

Each week, the total number of patients seen with influenza-like illness during the previous week by age group — preschool (0-4 years), school age through college (5-24 years), adults (25-49 years and 50-64 years) and older adults (>64 years) is determined.

The total number of patients seen during the previous week for any illness is also recorded. This data is submitted to the Centers for Disease Control and Prevention; sites are asked to report the previous week's



data by noon each Tuesday.

To date, three cases have been confirmed at the KDHE laboratory: 2 A/H1 cases and 1 A/H3 case.

For more information about influenza surveillance, please visit <http://www.kdheks.gov/flu/surveillance.htm>

EatWell Lawrence working as part of larger initiative to make city healthier

Have a restaurant you love, but wish it could make its menu healthier and that others knew about it? You can help. LiveWell EatWell, a project of LiveWell Lawrence, is seeking restaurants that offer healthy menu options. Ask your favorite restaurant if they



are a part of EatWell Lawrence. Restaurants in the program must have menu options that include steamed or fresh vegetables, fresh fruit and at least one lower-fat entrée. To learn more about the program, go to www.ldchealth.org

Haiti cholera epidemic requires vigilance to prevent U.S. outbreak

Epidemic cholera appeared in Haiti in October 2010. According to the World Health Organization, more than 17,000 persons have been hospitalized and more than 1,000 persons have died from cholera associated with this epidemic.

Based on experiences from previous epidemics, there is potential that epidemic cholera may continue to occur in Haiti for an extended time period (months or years) and may spread to other countries. Although continuing transmission of imported cholera is unlikely in the U.S., epidemic-associated *Vibrio cholerae* infections may occur in the United States as a result of persons traveling to affected areas. This is evidenced by a recent news report that an imported case associated with the epidemic in Haiti occurred in Florida.

Per Kansas Administrative Regulation 28-1-2, cholera cases must be reported to KDHE within four hours by telephone (Epidemiology Hotline: 877-427-7317). In addition, the Executive Committee of the Council of State and Territorial Epidemiologists (CSTE) in the U.S. has approved a temporary position statement designating cholera as immediate (urgent – within 24 hours) notification to the Centers for Disease Control and Prevention.

Additional guidance for investigation of suspected cholera cases is available as a Kansas Disease Investigation Guideline at http://www.kdheks.gov/epi/Investigation_Guidelines/Cholera_Investigation_Guideline.pdf

Pertussis at normal levels in county

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to adults and the DTap vaccine to young patients – both available at the agency. This is especially critical for families with infants, since they cannot receive their first DTap vaccine until they 2 months old.

“With a cocoon of immunity, Douglas County residents can protect the most vulnerable from whooping cough and prevent a community outbreak,” said Roxie Dohogne, RN, communicable disease nurse at the department.

Laughter is the best medicine



Douglas County Disease Report

| Disease category | Disease name | Aug. 10 | Sept. 10 | Oct. 10 | Nov. 10 | Total |
|------------------------------|------------------------|---------|----------|---------|---------|-------|
| Enteric | Campylobacter inf. | 9 | 0 | 1 | 1 | 11 |
| | Cryptosporidiosis | 0 | 1 | 1 | 0 | 2 |
| | E. coli | 0 | 1 | 1 | 0 | 1 |
| | Giardiasis | 2 | 1 | 2 | 0 | 4 |
| | Salmonella | 0 | 3 | 1 | 0 | 4 |
| | Shigella | 1 | 0 | 0 | 0 | 1 |
| General | Brucellosis | 1 | 0 | 0 | 0 | 1 |
| | Hepatitis A | 1 | 5 | 1 | 3 | 10 |
| | Hepatitis B | 2 | 1 | 0 | 2 | 5 |
| | Hepatitis C | 3 | 5 | 3 | 6 | 17 |
| | Meningitis, viral | 0 | 9 | 0 | 0 | 9 |
| | Strep pneumo. invasive | 0 | 0 | 0 | 2 | 2 |
| | Strep disease, group A | 0 | 0 | 1 | 0 | 1 |
| Vector | Dengue | 0 | 1 | 0 | 0 | 1 |
| | Lyme disease | 1 | 1 | 0 | 1 | 3 |
| | RMSF | 1 | 1 | 5 | 0 | 7 |
| Vaccine-preventable diseases | Mumps | 0 | 2 | 0 | 1 | 3 |
| | Pertussis | 3 | 5 | 1 | 3 | 12 |
| | Varicella | 2 | 0 | 3 | 0 | 5 |
| STDs (tested at HD only) | Chlamydia | 7 | 11 | 8 | 16 | 42 |
| | Gonorrhea | 7 | 2 | 3 | 5 | 17 |
| | Syphilis | 0 | 2 | 1 | 1 | 4 |

This report includes the number of cases investigated by the Lawrence-Douglas County Health Department. Case classifications include: Confirmed, probable, suspect and those determined to not be a case.