



Public Health
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COMMUNICABLE DISEASES

MONTHLY NEWSLETTER

For Joplin City, Barton, Dade, Jasper, McDonald, Newton and Vernon Counties

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Special points of interest

Reportable Diseases and Conditions

Learn about reportable diseases & conditions in Missouri by contacting the local health department in your area, or the Missouri Department of Health and Senior Services.

Visit the state health department website at

<http://www.dhss.mo.gov/CDManual/CDManual.htm>

FDA Warns of Salmonella Risk with Cantaloupes from a Honduran firm

The U.S. Food and Drug Administration (FDA) has issued an import alert regarding entry of cantaloupe from Agropecuaria Montelibano, a Honduran grower and packer, because, based on current information, fruit from this company appears to be associated with a Salmonella Litchfield outbreak in the United States and Canada. The import alert advises FDA field offices that all cantaloupes shipped to the United States by this company are to be detained.

In addition, the FDA has contacted importers about this action and is advising U.S. grocers, food service operators, and produce processors to remove from their stock any cantaloupes from this company. The FDA also advises consumers who have recently bought cantaloupes to check with the place of purchase to determine if the fruit came from this specific grower and packer. If so, consumers should throw them away.

To date, the FDA has received reports of 50 illnesses in 16 states and nine illnesses in Canada linked to the consumption of cantaloupes. No deaths have been reported;

however, 14 people have been hospitalized. The states are Arizona, California, Colorado, Georgia, Illinois, **Missouri**, New Jersey, New Mexico, New York, Ohio, Oklahoma, Oregon, Tennessee, Utah, Washington, and Wisconsin.

The FDA is taking this preventive measure while the agency continues to investigate this outbreak in cooperation with the Centers for Disease Control and Prevention and the state partners. Such intervention is a key component of FDA's Food Protection Plan.

Symptoms of foodborne Salmonella infection include nausea, vomiting, fever, diarrhea, and abdominal cramps. In persons with poor health or weakened immune systems, Salmonella can invade the bloodstream and cause life-threatening infections. Individuals who have recently eaten cantaloupe and experienced any of these symptoms should contact their health care professional.

For more information on produce safety, please visit: <http://www.cfsan.fda.gov/~dms/prodsafe.html>

Source: FDA

Avian Influenza Updates—Worldwide

As of April 2, 2008, a total of 376 confirmed cases with 238 deaths have been reported worldwide since 2003 according to World Health Organization (WHO). This accounts for 63.2% mortality rate.

Since the beginning of 2008 through April 2, 2008, there have been 27 confirmed cases with 21 deaths reported worldwide. In the month of March, 7 cases were reported, with 4 of them being fatal.

Two of the most affected countries are Indonesia and Vietnam, both contributing about 63.2% of the total cases worldwide.

Source: World Health Organization (WHO)

Analysis: Joseph Njenga

Communicable Disease Report

Cumulative Cases From January Through End of March By Local Jurisdiction and Year (2007 & 2008) (Includes confirmed, probable and suspect cases)														
CONDITION/YEAR BY LPHA	JOPLIN		JASPER		BARTON		DADE		MCDONALD		VERNON		NEWTON	
	2007	2008	2007	2008	2007	2008	2007	2008	2007	2008	2007	2008	2007	2008
ANIMAL BITES	47	22	18	21	4	1	0	1	5	1	1	1	3	5
BLASTOMYCOSIS	0	0	0	0	1	0	0	0	0	0	0	0	0	0
CAMPYLOBACTERIOSIS	1	1	3	4	1	1	0	1	0	1	2	1	0	1
CREUTZFELDT-JAKOB DIS	0	0	0	0	0	0	0	1	0	0	0	0	0	0
CRYPTOSPORIDIOSIS	0	0	1	0	0	0	0	0	0	0	0	0	1	0
E. COLI SHIGA TOXIN	0	0	1	1	0	0	0	0	0	0	0	0	0	0
E. COLI O157 H7	0	0	0	0	0	0	0	1	0	0	0	0	0	0
EHRlichiosis HME	0	1	0	0	0	0	0	0	0	0	0	0	1	1
GIARDIASIS	2	1	1	0	3	0	0	0	0	0	0	0	2	0
HEPATITIS A ACUTE	0	0	0	0	0	0	0	0	0	0	0	1	0	0
HEPATITIS B PREGNANCY	1	0	0	2	0	0	0	0	0	0	0	0	2	1
HEPATITIS B ACUTE	2	0	0	2	1	0	1	0	0	0	0	0	1	2
HEPATITIS B CHRONIC	2	1	0	0	0	0	0	0	1	0	0	1	1	0
HEPATITIS C ACUTE	1	1	0	0	0	0	0	0	0	0	0	1	0	0
HEPATITIS C, CHRONIC IN	36	32	17	12	2	1	3	0	6	10	8	3	7	16
LEGIONELLOSIS	0	0	0	0	1	1	0	0	0	0	0	0	0	0
LYME	0	0	2	1	0	1	0	0	0	0	0	0	1	0
MENINGOCOCCAL DIS	1	2	0	0	0	0	0	0	0	0	0	0	0	0
MUMPS	0	0	0	0	0	0	0	0	0	1	0	0	0	0
Q FEVER	0	0	0	0	0	0	0	0	1	0	0	0	0	0
ROCKY MOUNTAIN SPOT	0	1	1	0	0	1	0	0	1	0	3	1	2	5
SALMONELLOSIS	1	3	1	3	1	0	0	0	1	1	2	3	2	1
SHIGELLOSIS	0	1	1	0	0	0	0	0	0	0	0	0	0	0
STREP PNEUMONIAE, <4	0	1	0	0	0	0	0	0	0	0	0	0	0	0
STREP PNEUMONIAE, DR	0	0	1	0	0	0	0	1	0	0	0	0	0	0
TULAREMIA	0	0	0	0	0	1	0	0	0	0	0	0	0	0
VARICELLA /CHICKENPOX	5	0	1	3	0	0	0	0	0	0	0	0	1	3
Total Cases To-Date	99	67	48	49	14	7	4	5	15	14	16	12	24	35

Source: Missouri Department of Health and Senior Services, Crystal Reports

Data period : January through end of March

According to the above cumulative data, 2007 had more cases reported as of the end of March as compared to the current year, 2008. Jasper, Dade and Newton counties had more cases reported in 2008 than in 2007.

The overall total number of cases reported during the 13 weeks period was: 189 cases in 2008 and 220 cases in 2007. This accounts for a decrease of 14.1% in 2008 from 2007.

Barton County reported a decrease of about 50% (14 in 2007 to 7 in 2008) while Newton reported an increase of about 46% (24 in 2007 and 35 in 2008).

Analysis: Joseph Njenga



Rocky Mountain Spotted Fever (RMSF)

A Seasonal Tick-borne illness mostly occurring from April through September



What is Rocky Mountain spotted fever?

Rocky Mountain spotted fever (RMSF) is the most severe tick-borne rickettsial illness in the United States. It is transmitted to humans by the bite of an infected tick. The American dog tick and Rocky Mountain wood tick are the primary organisms that transmit RMSF bacteria in US.

Symptoms of Rocky Mountain spotted fever?

Early clinical presentation of RMSF is often nonspecific and may resemble many other diseases. Initial symptoms may include fever, nausea, vomiting, muscle pain, lack of appetite and severe headache. Later signs and symptoms include rash, abdominal pain, joint pain, and diarrhea. Three important components of the clinical presentation are fever, rash, and a previous tick bite, although one or more of these components may not be present when the patient is first seen for medical care. RMSF can be a severe illness, and the majority of patients are hospitalized.

How soon after exposure do symptoms appear?

The symptoms begin between 3 to 14 days after the tick bite

Incidence of Rocky Mountain Spotted Fever in U.S.

RMSF is seasonal and occurs throughout U.S., including Missouri. The period with the highest incidence is between April and September, accounting for over 90% of RMSF infections in U.S.

How is Rocky Mountain spotted fever diagnosed?

RMSF is diagnosed based on a combination of clinical signs and symptoms as well as specialized confirmatory laboratory tests.

How is Rocky Mountain spotted fever treated?

It is best treated by using a tetracycline antibiotic, usually doxycycline. Many people with RMSF require hospitalization.

Can one get Rocky Mountain spotted fever more than once?

Infection is thought to provide long lasting immunity against being infected again. However, prior illness with RMSF should not deter persons from practicing good tick-preventive measures or visiting a physician if signs and symptoms consistent with the illness occur, especially following a tick bite, as other diseases may also be transmitted by ticks.

How can Rocky Mountain spotted fever be prevented?

Limiting exposure to ticks reduces the likelihood of infection with RMSF. In persons exposed to tick-infested habitats, prompt careful inspection and removal of crawling or attached ticks is an important method of preventing disease. It may take extended attachment time before organisms are transmitted from the tick to the host.

It is unreasonable to assume that a person can completely eliminate activities that may result in tick exposure. Therefore, prevention measures should emphasize personal protection when exposed to natural areas where ticks are present.

Who is at increased Risk for RMSF Infection?

The frequency of reported cases of Rocky Mountain spotted fever is highest among males, Caucasians, and children. Two-thirds of the Rocky Mountain spotted fever cases occur in children under the age of 15 years, with the peak age being 5 to 9 years old. Individuals with frequent exposure to dogs and who reside near wooded areas or areas with high grass may also be at increased risk of infection.

Source: CDC, Missouri Department of Health and Senior Services & American Academy of Pediatrics (AAP) Red Book

A Note to All Health-care Providers

Rocky Mountain Spotted Fever (RMSF) is a reportable illness in Missouri (19CSR 20-20.020).

RMSF should be reported to the local health authority or to Missouri Department of Health and Senior Services within three (3) calendar days of the first knowledge or suspicion.

A CD-1 form is used in reporting Rocky Mountain Spotted Fever (RMSP), among other reportable diseases and conditions. CD-1 form can be obtained by contacting your local health authority or from the DHSS website.

To find out more about the reportable diseases and conditions in Missouri, contact your Local health departments or visit Missouri Department of Health and Senior Services website at <http://www.dhss.mo.gov/CommunicableDisease/reportablediseaselist2.pdf>



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Questions/Comments?

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Upcoming Events / Trainings

APRIL 2008

Missouri Public Health Week – April 7-11, 2008

Materials for Missouri Public Health Week are now posted on the DHSS website at <http://www.dhss.mo.gov/LPHA/Resources.html>.

Statewide Healthcare Disaster Planning Meeting (April 17 and 18, 2008): For more information, contact Leslie Porth (lporth@mail.mhanet.com) or Cindy O'Rourke at (573) 893-3700

Tuberculosis Contact Investigation Training – April 24, 2008 at the Kansas City Health Department, MO. The intended audience for the training is TB staff at the local public health agencies. No registration fee and lunch will be provided. Contact information: 573-526-0235, or e-mail to Rose.Kowieski@dhss.mo.gov. The registration deadline is April 11.

Crisis and Emergency Risk Communication (CERC) Courses – April, May and June. The registration brochure can be found at: http://www.dhss.mo.gov/BT_Response/CERT-Registration08.pdf

MAY 2008

National Viral Hepatitis Poster Contest 2008

World Hepatitis Day is May 19. The Division of Viral Hepatitis of the Centers for Disease Control and Prevention (CDC) is sponsoring a national poster contest in honor of World Hepatitis Day. For more information and official contest rules, visit www.cdc.gov/hepatitis/postercontest.

**For local Pandemic
Influenza resources,
please visit
www.JascoFlu.com**

**IF YOUR INSTITUTION WOULD
LIKE TO PARTICIPATE IN OUR
COMMUNICABLE DISEASE
SURVEILLANCE, CONTACT YOUR
LOCAL HEALTH DEPARTMENT**

FOR MORE INFORMATION.

**SURVEILLANCE IS VITAL IN THE CONTROL AND
PREVENTION OF DISEASES**

**Do your part in disease
prevention and control**

Weekly Influenza Activity Update—March 2008

With the Influenza season almost ending, Influenza activity continued to decrease in the U.S. during week 12 (ending March 22, 2008).

As indicated in the seven local jurisdictions, the overall number of cases in 2007-2008 season continue to be less than the previous 2006-07 season.

However, Barton County reported more cases of influenza in 2007-08 season than was reported in 2006-07 season as of the end of March.

Analysis: Joseph Njenga

Influenza Season (2006-07 & 2007-08) Through End of March (Week 13)

	2006-07	2007-08
Joplin	1934	1767
Jasper	89	55
Newton	2	4
McDonald	0	0
Dade	0	0
Vernon	37	0
Barton	58	78

“Never doubt that a small group of thoughtful, committed people can change the world. Indeed, it is the only thing that ever has”. (Margaret Mead)