



Appalachian Health Focus

Public Health: Protecting and improving your health throughout life in Alleghany, Ashe, and Watauga Counties.

**Disease Report
Jan-March 2005**

Issue 3

April-June 2005

July 22, 2005

Salmonellosis Alert

Diagnosis	Code	Cases
AIDS	950	0
Camphylobacter	50	7
Chlamydia	200	27
E. Coli	53	0
Enterococci	58	0
Ehrlichiosis	571	0
Gonorrhea	300	2
Hepatitis A, Acute	60	0
Hepatitis B, Carrier	115	1
HIV	900	2
HME	572	0
Legionellosis	18	1
Lyme Disease	51	0
Menningococcal	27	0
Rocky Mtn Spotted Fever	35	0
Salmonellosis	38	0
Shigellosis	39	0
Syphilis-2nd	720	0
Syphilis-neur	760	0
Tuberculosis	*TB	0
Whooping Cough	47	0

Recently, the North Carolina Communicable Disease Control Branch released a bulletin to public health staff regarding a recent increase in the number of cases of Salmonellosis across the state. While the average number of cases per year in the past three years (2002, 2003 and 2004) hovered at around 200, between January and June 2005, the State Laboratory of Public Health has confirmed 211 cases.

As you know, infection with Salmonella causes severe nausea, cramps, diarrhea and fever 12 to 72 hours after contaminated food is eaten. At this point, health officials at the state suspect eggs, specifically raw or undercooked eggs as the possible source, although no source has been completely ruled out. Testing for Salmonella bacteria consists of culturing a stool specimen or blood sample for the organism. This should be done early in the course of the illness prior to antimicrobial therapy.

Keep in mind that health care workers, child care workers, children and food handlers may need to be excluded from returning to work or daycare until diarrhea has stopped. When exclusion is mandated, the

release to return to work usually follows one negative stool culture. If antibiotic treatment has been initiated, the second stool should be collected 48 hours after patient completes antibiotic.

Usually, for uncomplicated gastroenteritis, no treatment is generally recommended except for rehydration and electrolyte replacement. Antibiotic treatment does not shorten the duration of disease, may not eliminate the carrier state, may lead to resistant strains or more severe infections, and may even prolong the carrier state. Antibiotic therapy **is recommended**, however, for infants under 2 months of age, the elderly, the debilitated, those with sickle cell disease, persons infected with HIV, or patients with continued or high fever or manifestations of extra-intestinal infection. Ciprofloxacin is highly effective in adults; but its use is not approved for persons under age 18; ampicillin or amoxicillin may also be used. TMP-SMX and chloroamphenicol are alternatives when microbial resistant strains are involved. HIV+ patients may require

life-long therapy to prevent Salmonella septicemia.

The Communicable Disease Nurse at your health department will be glad to assist you with reporting cases of Salmonellosis. If at any time, you need extra Communicable Disease Report Cards, feel free to call.



Alleghany County Health Department

157 Health Services Road
Sparta, NC 28675
(336) 372-5641
(336) 372- 8813 Business
(336) 372-7793 (Fax)

Ashe County Health Department

P.O. Box 208
Jefferson, NC 28640
(336) 246-9449
(336) 246-8163 (Fax)

Watauga County Health Department

126 Poplar Grove Connector
Boone, NC 28607
(828) 264-6635
(828) 264-4995 Environmental
(828) 264 -4997 (Fax)

Frequently Asked Questions about Rabies

Parents, waking their 16-month-old son in the morning, find a bat in the corner of the room and they question if the child needs to see a doctor. Why is there a concern about this situation?

Twenty-two of the 31 human cases of rabies in the United States between 1980 and 2000 have been associated with the bat rabies virus variants. However, only 2 reported a bat bite. Therefore, in situations in which a sleeping person wakes to find a bat in the room or an adult witnesses a bat in the room with a previously unattended child, mentally disabled person or intoxicated person, post-exposure prophylaxis should be considered.

What are the common adverse reactions of Rabies Vaccine?

Mild problems:

Soreness, redness, swelling or itching where the shot was given (30%-74%)

Headache, nausea, abdominal pain, myalgia, dizziness (5%-40%)

Moderate problems:

Hives, arthralgia, fever (6% of booster doses); Illness resembling Guillain-Barré Syndrome with complete recovery (very rare)

What constitutes a rabies exposure?

Rabies is transmitted when the virus is introduced into bite wounds, breaks in the skin or onto mucous membranes. Petting a rabid animal, and contact with blood, urine or feces of a rabid animal does not constitute an exposure and is not an indication for prophylaxis. With regards to saliva, if the material containing the virus is dry, it can be considered noninfectious because the rabies virus is inactivated by desiccation and heat.

For more information visit the N.C. Department of Health and Human Services Rabies website at <http://www.epi.state.nc.us/epi/rabies.html>.



Updates...

Epidemiology Teams 2005: Energy in Action

Eight members of the Appalachian District Health Department "Epi Team" attended the second annual Epi Teams conference in Research Triangle Park in June. Communicable disease nurses, environmental health specialists and other medical and public health professionals from across the state gathered to review case studies of recent outbreaks with diseases such as Norovirus, Q-fever and Legionella. If you are interested in fortifying your investigational and communicable disease skills, the following websites through the University of North Carolina at Chapel Hill have various on-line trainings that you may find useful:

Field Epidemiology Training:

<http://www.sph.unc.edu/nccphp/focus/>

Field Epidemiology Certificate:

<http://www.sph.unc.edu/nciph/fieldepi/>

Communicable Disease Surveillance and Investigation:

<http://www.sph.unc.edu/nciph/nccphp>

General training:

www.sph.unc.edu/nccphp/training

STD/HIV Video Update

The Appalachian District Health Department was pleased to offer the 2004 STD/HIV Video Update as originally presented by the Florida STD/HIV Prevention and Training Center on Friday, June 10. Six participants from New River Mental Health were able to complete their recertification requirement by attending.

June 27 was National HIV testing day. For your information, the ADHD offers free and confidential HIV testing with pre- and post-test counseling. HIV and AIDS are reportable diseases. Upon notification of a positive result, the ADHD will contact a Disease Intervention Specialist to facilitate partner notification and referrals. Please remember to include HIV prevention education as a routine aspect of patient care. Remind patients that condoms are free at the health department.



FUN FACT:

Actual Headline: "CDC says cheap beer spreads sexually transmitted diseases." -Tampa Tribune

Communicable Disease Nurse in Your Area

Alleghany County

Eva Wooten, RN,
336-372-5641

The communicable disease nurse in your area will be more than happy to assist you.

Ashe County

Candy Gambill, RN
336-246-9449

Watauga County

Sandy Hagler, RN
828-264-6635

**Daniel Staley, MS
Health Director**

**Ken Richardson
Chair, Board of Health**