

# BULLETIN

## Improved surveillance for transmissible spongiform encephalopathies

Transmissible spongiform encephalopathies (TSEs) of humans, such as Creutzfeldt-Jakob disease (CJD) and variant Creutzfeldt-Jakob disease (vCJD) are reportable in Idaho as of July 1, 2004. The number of deaths in Idaho residents due to CJD, by age at death, reported from 1984–2003 is shown in Figure 1. Previously CJD only came to the attention of public health epidemiologists when death certificates were filed. This did not allow time for us to help arrange adequate ante mortem or autopsy testing for TSEs.

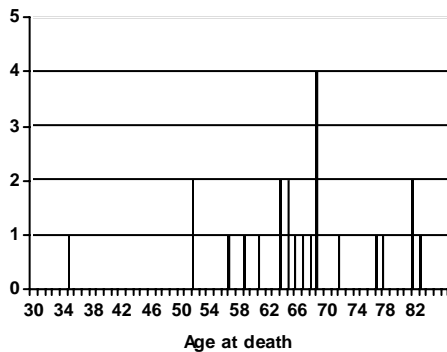


Figure 1. Number of CJD deaths by age at death—Idaho, 1984–2003.

To broaden surveillance for the variant form of CJD in the US, CDC has encouraged physicians to increase their index of suspicion for this illness and recommends investigation of CJD deaths among persons aged less than 55 years.

The National Prion Disease Pathology Surveillance Center (NPDPS) also is working with state health departments to improve surveillance for CJD and other prion diseases. This laboratory-based surveillance center, which

is located at Case Western Reserve University, Cleveland, Ohio, provides state-of-the-art prion disease diagnostic services free of charge nationally to all US clinicians and public health departments. The NPDPS is providing these prion disease diagnostic services because they are often otherwise not readily available, they serve to enhance surveillance, and the detection of emerging prion diseases has become an increasingly important public health priority. The NPDPS performs histopathology, immunohistochemistry, Western blot, and prion gene analyses of human autopsy and biopsy tissues to establish prion disease diagnoses. Such tests are necessary to most definitively establish the diagnosis of any of the classic forms of CJD, determine the specific type of prion disease, and to confirm the presence of the CJD protein marker 14-3-3. The results are reported to the health care provider, to the state health department, and to CDC.

The Office of Epidemiology and Food Protection encourages neurologists to use the diagnostic services of the NPDPS on all their clinically suspected and diagnosed cases of prion disease. For more information about the center, sampling protocols, and shipping instructions, see <http://www.cjdsurveillance.com>. If you have questions regarding the services available, please call the Office of Epidemiology and Food Protection (OEF), or the NPDPS Center directly at 216-368-0587.

### More inside:

ID Health Alert Network .....	2
Disease Counts, 2002 and 2003 .....	2
First rabid bat of 2004 in Idaho.....	3
STD/AIDS Training .....	3

## **Idaho Health Alert Network**

The Idaho Health Alert Network (HAN), a new web-based alerting system, is sponsored by the Idaho Department of Health and Welfare's Health Preparedness Program and was established under a cooperative agreement with the U.S. Centers for Disease Control and Prevention. HAN was developed to assure mechanisms exist for the rapid electronic receipt and broadcast, by fax or e-mail, of health advisories and alerts to healthcare providers and local response partners. For example, during the ongoing syphilis outbreak in Idaho, health alerts have been sent by district health departments through HAN to primary care providers informing them of the outbreak and recommending changes in screening practices. The Idaho HAN increasingly will be used to announce disease outbreaks or other serious events such as the intentional release of a biologic agent. Health advisories provide important information for a specific incident or situation, but may not require immediate action. Health alerts, on the other hand, convey the highest level of importance, and may include recommendations for changes in clinical practices including increased screening, prophylaxis for exposed persons, or counseling for those concerned about possible exposure to an infectious or chemical agent. Press releases and other news items will also be posted to the HAN website as a resource. Health messages will be sent to you via fax or e-mail from your local or state health department.

To register to receive faxes or e-mail notices from the Idaho HAN, if you have not already done so, log on to <http://health.dhw.state.id.us/idhan>. You will only receive alerts targeted to physicians. If you need assistance registering you may call the HAN helpdesk @ 208-334-0691.

### **Selected infectious disease counts — Idaho, 2002 and 2003**

Final disease counts for 2002 and 2003 are shown in Table 2. A few highlights follow the table.

Table 2. Selected infectious disease counts.

<b>Reported Disease</b>	<b>2002</b>	<b>2003</b>
Brucellosis	2	0
Campylobacteriosis	208	244
Chlamydia	2535	2366
Cryptosporidiosis	29	27
E. coli O157:H7	45	85
E. coli, toxigenic, non-O157:H7	18	16
Giardiasis	137	206
Gonorrhea	96	68
<i>H. Influenzae</i> , invasive	2	7
Hantavirus	1	2
Hepatitis A	31	18
Hepatitis B, acute	7	8
Hepatitis C, acute	1	1
HIV	30	32
Legionella	3	7
Leptospirosis	1	1
Listeriosis	2	2
Lyme Disease	4	3
Meningitis, aseptic	4	22
viral	8	98
Mumps	1	1
<i>N. meningitidis</i> , invasive	5	9
Pertussis	151	80
Q Fever	2	1
Rabid animals (all bats)	38	15
Rabies PEP	15	10
Relapsing Fever	1	2
Rubella	3	0
Salmonellosis	184	181
Shigellosis	22	36
Strep, Group A, invasive	11	19
Syphilis (all types)	23	45
Tuberculosis	14	13
West Nile encephalitis or fever	1	3
Yersiniosis	0	6

Tracking of zoonotic diseases is an area of growing national interest, partly because of increased concerns about bioterrorism. Zoonotic diseases of bioterror potential reported in 2002 and 2003 in Idaho included brucellosis and Q-fever. No cases of anthrax were reported in 2002 or 2003. Reports of more common pathogens of animal origin included *Salmonella*, *E. coli* (O157:H7 and other toxigenic strains), and *Campylobacter*. *Campylobacter* is the most common enteric pathogen reported with an average of 238 cases per year. Outbreaks of *Campylobacter* in Idaho are frequently associated with consumption of raw dairy products.

In 2003 an outbreak of echovirus-30 was responsible for a large number of reported cases of viral and aseptic meningitis from the northern regions of Idaho. Tests on available samples were negative for West Nile virus. The single West Nile virus case in 2002 was in an Idaho resident who had traveled to the East Coast. In 2003, three human cases were reported, two in travelers to Colorado and one in a person who necropsied infected alligators. WNV was not detected in mosquitoes or birds in Idaho in either 2002 or 2003.

For a recent description of the ongoing syphilis outbreak in Idaho, see the December 2003 issue of the Idaho Disease Bulletin, <http://www.healthandwelfare.idaho.gov/DesktopModules/Articles/ArticlesView.aspx?TabID=0&Alias=Rainbow&Lang=en-US&ItemID=1345&mid=11162>.

### **First rabid bat of 2004 in Idaho**



Rabid bats are reported annually from almost all parts of Idaho. This year the first rabid bat submitted to the Idaho Bureau of Laboratories came from northern Idaho. Rabies is enzootic in bats in Idaho and sporadic in other mammals. Only the bat strain of rabies virus has been documented in Idaho to date. Thirty-eight rabid bats were detected in Idaho in 2002 and 15 in 2003. In addition to rabid bats, since 1991 one rabid horse, two rabid cats, and one rabid bobcat have been reported in Idaho. All had the bat strain

of rabies. Exposure to rabies from a bat can be unrecognized; an overt bite is not considered the only avenue for exposure from these small mammals! Waking up and finding a bat in the room, even in the absence of any evidence of a bat bite, or having infectious material (such as saliva) from a bat get into the eyes, nose, mouth, or a wound has resulted in several human cases nationwide. If you have any doubt about a human exposure to a bat, testing of the bat, free of charge, will be facilitated by your local district health department. Testing of the bat brain will be done at the Idaho Bureau of Laboratories. The advisory committee on immunization practices (ACIP) guidelines for the prevention of rabies in humans may be found at <http://www.cdc.gov/mmwr/preview/mmwrhtml/00056176.htm> Rabies post-exposure prophylaxis (PEP) is reportable in Idaho.



Two STD training opportunities in Boise are available this August!  
Great CEUs/CMEs available!  
Hurry and reserve your space today!!!

These courses are designed for health care providers in Idaho who diagnose and treat patients with sexually transmitted diseases.

**Course 1: STD Update Course.** \$85 August 31-September 1, 2004, Boise.

**Course 2: STD Intensive Course.** \$100 Individually scheduled 2.5-day practicum session following Course 1 for those with at least 6 months of STD exam experience.

**The agenda and all registration materials can be found at the STD/AIDS Program website [http://www.healthandwelfare.idaho.gov/portal/alias\\_Rainbow/lang\\_en-US/tabID\\_3563/DesktopDefault.aspx](http://www.healthandwelfare.idaho.gov/portal/alias_Rainbow/lang_en-US/tabID_3563/DesktopDefault.aspx)**

***Questions? contact Annabeth Elliott with the state STD/AIDS Program at 208-334-6605.***

Sponsored by the Seattle STD/HIV Prevention Training Center, CDC; Idaho State Department of Health and Welfare, STD/AIDS Program; and the Central District Health Department STD Clinic

**Idaho Disease Bulletin**

Office of Epidemiology and Food Protection  
P. O. Box 83720  
450 W. State St., 4<sup>th</sup> Floor  
Boise, ID 83720-0036  
<http://www.idahohealth.org>  
(208) 334-5939

**Editors:**

**Christine G. Hahn, MD**  
**State Epidemiologist**

**Leslie Tengelsen, PhD, DVM**  
**Deputy State Epidemiologist**

**Kris Carter, DVM, MPVM**  
**Career Epidemiology Field Officer**

For details on Idaho reporting requirements, refer to the Rules and Regulations Governing Idaho Reportable Diseases (<http://www2.state.id.us/adm/adminrules/rules/idapa16/0210.pdf>). A poster version is also available free of charge. If you wish to have a copy or a poster, please contact Judi at the Office of Epidemiology and Food Protection at 208-334-5939.

**ROUTINE PHYSICIAN 24-HOUR DISEASE REPORTING LINE: 1-800-632-5927**  
**EMERGENCY PHYSICIAN 24-HOUR REPORTING LINE: 1-800-632-8000**

Idaho Disease  
**BULLETIN**  
Idaho Department of Health and Welfare  
Division of Health  
P. O. Box 83720  
Boise, ID 83720-0036

PRSRT STD  
U.S. POSTAGE  
PAID  
PERMIT NO. 1  
BOISE, ID