



DuPage County Health Department R E V I E W

Volume 2, No. 7

July 2006



111 North County Farm Road
Wheaton, IL 60187
(630) 682-7400
www.dupagehealth.org

Linda Kurzawa
President, Board of Health

Maureen McHugh
Interim Executive Director

Rashmi Chugh, MD, MPH
Medical Officer

Contact Information

Communicable Disease
(630) 682-7979, ext. 7553

Environmental Health
(630) 682-7979, ext. 7046

Immunizations
(630) 682-7400

Sexually Transmitted Diseases
(630) 682-7979, ext. 7575

HIV/AIDS
(630) 682-7979, ext. 7310

Tuberculosis
(630) 682-7522

School Health
(630) 682-7979, ext. 7300

Travel Clinic
(630) 682-7979, ext. 7590

Animal Care & Control
(630) 407-2800

The purpose of this two-page surveillance update is to promote the control and prevention of **communicable disease (CD)** by providing clinically relevant information and resources to healthcare professionals in DuPage County.



Under the Microscope Rabies

All animal bites to humans that occur in DuPage County must be reported to Animal Care and Control at 630-407-2800. All potential rabies exposures must be reported to Communicable Disease Services at 630-682-7979, extension 7553.

Rabies is a preventable viral disease of mammals most often transmitted from the bite of a rabid animal. Over the last 100 years, rabies in the United States has changed dramatically. More than 90% of all animal cases reported annually to the Centers for Disease Control and Prevention (CDC) now occur in wildlife (e.g., raccoons, skunks, bats, and foxes); before 1960 the majority was in domestic animals. The virus is present primarily in the saliva, brain tissue and spinal fluid of a rabid animal.¹

The number of rabies-related human deaths in the United States has declined from more than 100 annually at the turn of the century to one or two per year in the 1990's. Modern day prophylaxis has proven nearly 100% successful, and is the reason for the low number of human cases. **In the United States, human fatalities associated with rabies occur in people who fail to seek medical assistance, usually because they were unaware of their exposure.**² The last human case in Illinois was reported in 1954.

Most of the recent cases of human rabies that have occurred in the United States have been caused by bat strains of rabies. Rabid bats can be found in any county in Illinois. Awareness that bats can carry the rabies virus can help people protect themselves.

Approximately 3 to 5 percent of bats are infected with the rabies virus. **Bats, like all wild animals, should never be handled.** People usually know when they have been bitten by a bat, but there are instances when a bite may not be apparent. Bats have very small teeth and a physical inspection cannot be used to establish whether a bite occurred. Exposure may occur if the animal's saliva enters an open cut or mucous membrane (nose, mouth, eyes).

The presence of a bat in a home, or any contact with a bat, represents a possible hazard for rabies and should be reported to a physician or the local health department so that the circumstances can be evaluated. For example, if a person awakens and finds a bat in the bedroom, or sees a bat in the room of an unattended young child, or sees a bat near a mentally impaired or intoxicated person, a physician or local health department should be consulted, and prophylaxis given if the bat cannot be tested negative. **The bat should not be discarded, and the bat's head should not be damaged, so the bat may be tested for rabies immediately.**

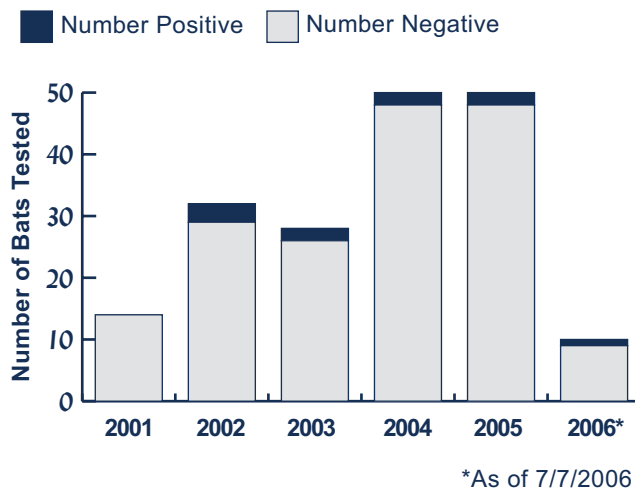
If an animal suspected of having rabies cannot be tested or observed (dogs, cats, or ferrets only), or if it tests positive for rabies, **post-exposure prophylaxis (PEP)** of the individual with (1) **rabies immune globulin** and (2) **the vaccine series** must begin immediately. According to the current recommendations of the Advisory Committee on Immunization Practices (ACIP), PEP consists of a regimen of **one dose of immune globulin and five doses of rabies vaccine over a 28-day period.**³

Rabies immune globulin and the first dose of rabies vaccine should be given by a healthcare provider as soon as possible after exposure. Because animal rabies testing is a priority at the state laboratories, initiation of rabies treatment can await prompt testing of the animal brain. Additional doses of rabies vaccine should be given on days 3, 7, 14, and 28 after the first vaccination. Current vaccines are relatively painless and are given in the arm, like a flu or tetanus vaccine.

References:

1. www.idph.state.il.us/health/infect/reportdis/rabies.htm
2. www.cdc.gov/ncidod/diseases/submenus/sub_rabies.htm
3. www.cdc.gov/mmwr/PDF/rr/tr4801.pdf

Bat Testing in DuPage County, 2001-2006*



Please contact Shaun Nelson, MPH at (630) 682-7979, ext. 7175 or snelson@dupagehealth.org to send suggestions or to be added to the distribution list.

DUPAGE COUNTY HEALTH DEPARTMENT

CASES¹ OF REPORTABLE DISEASES*

Required by the Illinois Department of Public Health (IDPH)

* Last updated July 2002

CD REVIEW

Volume 2, No. 7 July 2006

Vaccine Preventable Diseases	Report Within	2006		2005		2004		2003		2002		Median	
		June 2006	Jan-June	Jan-June	Total	Jan-June	Total	Jan-June	Total	Jan-June	Total	Jan-June	Total ('02-'05)
Chickenpox in those < 20 yrs old	7 days	0	133	152	225	190	273	247	342	752	939	190	308
Chickenpox in those ≥ 20 yrs old	24 hrs	0	6	7	7	9	13	8	10	22	28	8	12
Diphtheria	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
<i>Haemophilus influenzae</i> , invasive disease	24 hrs	0	4	6	10	3	6	3	4	6	11	4	8
Hepatitis A	24 hrs	0	5	1	9	11	27	6	20	4	11	5	16
Hepatitis B	7 days	0	2	4	6	6	8	8	12	5	7	5	8
Hepatitis B (carriers)	7 days	4	65	67	147	77	146	77	136	102	199	77	147
Measles	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Mumps	7 days	4	18	0	0	1	1	1	3	3	3	1	2
<i>Neisseria meningitidis</i>	24 hrs	0	2	3	4	1	1	0	1	4	5	2	3
Pertussis	24 hrs	0	13	12	29	18	127	8	13	7	12	12	21
Poliomyelitis	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Rubella	7 days	0	0	0	0	0	0	0	0	0	1	0	0
<i>Streptococcus pneumoniae</i> , invasive disease	7 days	7	45	46	64	33	62	45	97	35	65	45	64
Tetanus	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Other Communicable Diseases													
Amebiasis	7 days	0	1	0	0	3	3	2	2	1	5	1	3
Anthrax	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Blastomycosis	7 days	1	3	4	5	1	5	5	8	4	5	4	5
Botulism, foodborne	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Botulism, other	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Brucellosis	7 days	0	0	0	0	0	0	0	0	1	1	0	0
Campylobacteriosis	7 days	6	38	75	151	62	143	56	136	67	146	62	145
Cholera	24 hrs	0	0	0	0	0	0	0	1	0	0	0	0
Cryptosporidiosis	7 days	1	1	0	3	2	2	2	4	0	4	1	4
Cyclosporiasis	7 days	0	0	1	2	23	23	0	0	0	0	0	1
Diarrhea of the newborn	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Ehrlichiosis	7 days	0	0	0	0	0	0	0	1	0	0	0	0
Encephalitis ²	7 days	0	3	3	7	0	0	0	1	1	2	1	2
Enteric <i>E. coli</i> infections ³	24 hrs	0	1	9	17	0	11	0	4	17	25	1	14
Giardiasis	7 days	3	15	26	47	22	64	42	88	36	79	26	72
Glomerulonephritis	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Hantavirus pulmonary syndrome	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Hemolytic uremic syndrome	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Hepatitis C (cases & carriers)	7 days	1	117	126	238	104	189	109	193	110	223	110	208
Hepatitis, viral, other ⁴	7 days	0	0	0	0	1	1	0	0	0	0	0	0
Histoplasmosis	7 days	0	0	0	0	3	6	1	2	1	4	1	3
Legionnaires' disease	7 days	1	5	3	4	3	5	1	8	1	5	3	5
Leprosy	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Leptospirosis	7 days	0	0	1	1	0	0	0	0	0	1	0	1
Listeriosis	7 days	0	1	0	2	0	2	0	2	0	0	0	2
Lyme disease	7 days	0	0	4	12	3	9	0	8	0	6	0	9
Malaria	7 days	0	2	3	5	1	8	2	4	2	3	2	5
Meningitis, aseptic ²	7 days	7	36	36	123	33	116	28	174	26	122	33	123
Ophthalmia neonatorum	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Plague	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Psittacosis	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Q fever ⁵	3 hrs	0	0	0	0	0	1	0	0	1	1	0	1
Rabies, human case	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Rabies, potential exposure	24 hrs	1	15	12	24	6	18	6	10	8	26	8	21
Reye syndrome	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Rheumatic fever	24 hrs	0	1	1	1	0	0	0	0	0	0	0	0
Rocky Mountain spotted fever	7 days	0	1	0	0	0	1	0	0	0	0	0	0
Salmonellosis	7 days	4	33	49	119	39	107	41	99	36	111	39	109
Shigellosis	7 days	0	6	5	29	2	15	27	44	12	44	6	37
Smallpox	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
<i>Staphylococcus aureus</i> (in those < 28 days old)	7 days	0	1	0	3	2	4	2	2	1	1	1	3
<i>Staphylococcus aureus</i> (vancomycin-resistant)	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Streptococcal infections, group A invasive	24 hrs	0	14	3	10	11	15	16	23	9	12	11	14
Streptococcal infections, group B invasive (in those < 3 mos old)	7 days	0	1	2	5	1	3	0	3	1	1	1	3
Toxic shock syndrome ⁶	24 hrs	0	0	1	3	3	6	3	4	2	2	2	4
Trichinosis	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis	7 days	3	22	18	33	25	46	18	62	11	32	18	40
Tularemia	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Typhoid fever	24 hrs	0	1	1	2	2	2	0	1	0	3	1	2
Typhus	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
West Nile disease	7 days	0	0	0	47	0	5	0	4	0	44	0	25
Yersiniosis	7 days	0	0	2	2	0	2	0	0	0	1	0	2
STDs, HIV and AIDS													
AIDS (Jan-Mar) ⁷	7 days	---	2	10	29	7	21	10	21	11	28	10	25
Chancroid	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Chlamydia	7 days	41	610	574	1215	490	948	441	939	448	904	490	944
Gonorrhea	7 days	5	87	94	205	105	210	105	209	115	234	105	210
HIV infection (Jan-Mar) ⁷	7 days	---	5	6	33	9	26	8	31	9	22	8	29
Syphilis	7 days	7	14	2	15	1	9	12	18	5	10	5	13

DuPage County healthcare providers and hospitals **must report any suspected or confirmed case of these diseases** to the local health authorities within the number of hours or days indicated.

REPORTING NUMBERS:

Communicable Diseases
(630) 682-7979, ext. 7553
24 hours: (630) 682-7400

Tuberculosis
(630) 682-7522

STDs
(630) 682-7979, ext. 7575

HIV/AIDS:
(630) 682-7979, ext. 7310

- ¹ Provisional cases, based on date of onset
- ² Excludes West Nile disease
- ³ O157:H7, STEC, EHEC, ETEC, EPEC
- ⁴ Includes hepatitis D and E
- ⁵ Q fever cases in 2002 and 2004 not related to any suspected bioterrorism threat or event
- ⁶ Includes streptococcal (reportable within 24 hours) and presumed staphylococcal (reportable within 7 days)
- ⁷ HIV/AIDS data are provided quarterly by IDPH and are provisional, based on date of diagnosis

Websites

CDC:
www.cdc.gov

IDPH:
www.idph.state.il.us

DuPage:
www.dupagehealth.org