"I had an interview with the Board of Guardians of St. James's parish, on the evening of Thursday, 7th September, and represented the above circumstances to them. In consequence of what I said, the handle of the pump was removed on the following day."

John Snow, 1855

March 2015 Topics

- **Infant Botulism Case in North Dakota**, by Alicia Lepp
- **Haemophilus influenzae Type B Confirmed in Child**, by Amy Schwartz
- **Bean Town Here We Come!** by Tracy Miller
- **Spring is Around the Corner—Time to Watch Out for Rabies and Babies (Animals)!** Alicia Lepp

**Infant Botulism Case in North Dakota**
The North Dakota Department of Health (NDDoH) was notified of a suspected infant botulism case in an infant under the age of one year. NDDoH consulted with the California Department of Health infant botulism program and arranged for the infant to be tested and to receive Baby BIG, the antitoxin for infants with botulism. Tests confirmed botulism and the infant responded positively to treatment. NDDoH arranged for testing of infant formula and Karo syrup, which the infant was reported to have ingested, but both tested negative for botulism.

Botulism is rare in the United States, with an average of 145 cases reported each year. Sixty-five percent of botulism cases are infant botulism. The bacteria that causes infant botulism is found in the soil and dust and can be found inside homes on floors, carpet and countertops. Honey can contain the bacteria, so children less than 12 months old should not be fed honey. The last case of infant botulism in North Dakota was reported in 1999.


**Haemophilus influenzae Type B Confirmed in Child**
The NDDoH has confirmed a case of invasive Haemophilus influenzae, type b (Hib) disease in a child. This is only the third confirmed case of HIB disease in a pediatric patient reported in North Dakota since 1991. The last case was reported in 2013 in an unvaccinated child. Prior to the availability of Hib vaccine, Hib was one of the most common causes of meningitis and invasive infections in young children.

Symptoms of Hib depend upon the part of the body affected. Fever is present in all forms of Hib disease. Meningitis can cause stiff neck, headache and vomiting. Pneumonia may cause a cough that produces mucus and rapid breathing, and patients with epiglottitis usually have noisy breathing and a very sore throat. Swelling and purple-red discoloration of the skin is a symptom of cellulitis.

North Dakota providers should take steps to prevent Hib disease by vaccinating children according to the recommended immunization schedule. According to the 2013 National Immunization Survey (NIS) only 76.4 percent of North Dakota children ages 19 to 35 months were fully vaccinated against HIB. Hib conjugate vaccine should be given to all children between 2 months and 5 years of age. Depending on the type of vaccine, children should receive three doses at 2, 4 and 6 months of age or two doses at 2 and 4 months of age. A booster dose should be given at 12 to 15 months of age, regardless of what type of Hib vaccine they previously received. Some older children and adults who are at high risk for complications also are recommended to receive this vaccine. Thirty cases of invasive Hib disease in children under 5 were reported in the United States in 2014 and four cases have been reported so far in 2015. Hib disease is still a threat and this case underlines the importance of vaccination. Vaccination not only protects the individual being vaccinated, but also those who cannot be vaccinated or are too young to receive the vaccine.

Suspected and confirmed cases of Hib should be reported to the NDDoH immediately. For more information, please contact the NDDoH Immunization Program at 701.328.2378 or toll-free at 800.472.2180.

**Bean Town Here We Come!**

This year the Council of State and Territorial Epidemiologist (CSTE) conference will be held in Boston, MA (www.cste.org). This conference is the largest annual event of applied public health epidemiology and has speakers and presentations from around the world. Typically more than 1,000 epidemiologists from participate in this conference, so it is a great way to share ideas, network, and showcase the work being done to improve public health.

Congratulations go out to the following people from Disease Control:

Amy Schwartz
Alicia Lepp
Dee Pritschet
Shawn McBride
Jennifer Schmidt

Molly Howell
Michelle Feist
Lindsey VanderBusch
Kirby Kruger

This year three abstracts submitted by the North Dakota Department of Health’s Division of Disease Control were accepted as oral presentations at CSTE, highlighting the public health work being done in North Dakota!
This year’s accepted abstracts were:
- Barriers to Enforcing School Immunization Requirements in North Dakota
- We Herd you had TB
- Cluster of Pneumonic Tularemia Following a Community Clean-up Event

Congratulations to all!

**Spring is Around the Corner-Time to Watch Out for Rabies and Babies (Animals)!**

Springs means that wild animals are becoming more active and babies are being born! While enjoying the nice weather and the outdoors, it is important to remember that animals may carry diseases, and appropriate prevention steps should be taken to avoid illness.

Bites from any animal could present a potential exposure to rabies. If you are bitten by an animal, immediately wash the wound with soap and water and contact your health care provider.

You can prevent the spread of rabies by:

- Avoiding wild animals; DO NOT feed or handle them
- Vaccinating pets and keeping them from contact with wild animals
- Preventing wild animals from take up residence around your home, farmstead or livestock
- Not keeping wild animals as pets, which is often illegal as well as dangerous

Springs also brings baby animals. While baby animals may appear very cute and cuddly, they can carry diseases. Chicks and ducklings can carry Salmonella, a bacteria that can cause diarrhea, fever and abdominal cramps. Holding, cuddling or kissing chicks and ducklings can expose a person to the bacteria. People should immediately wash their hands after touching birds or being exposed to their environment.

Ranchers who are calving during the spring, are at an increased risk for diarrheal illnesses, such as campylobacteriosis and cryptosporidiosis. Proper hand washing after contact with cows and calves will reduce the risk of illness.

Take time this spring to think about your health. Avoid wild animals and wash your hands after handling domestic animals. Visit [www.ndhealth.gov/disease](http://www.ndhealth.gov/disease) for additional information.

Terry Dwelle, MD, MPHTM, State Health Officer
Kirby Kruger, Director, Division of Disease Control; Chief Medical Services Section
Tracy K. Miller, PhD, MPH, State Epidemiologist
Julie Dearth, Managing Editor