

Communicable Disease Report

Red whelk poisoning

Six persons from the north of England developed symptoms including diplopia, dizziness and severe pains in the legs about two hours after sharing a meal including edible whelks (*Buccinum undatum*) and red whelks (*Neptunea antiqua*). The whelks had been purchased raw, boiled at home and were the only common food eaten by the affected persons. The symptoms of red whelk poisoning, which may also include tingling of hands and feet, weakness, paralysis and collapse, are due to the ingestion of the toxin tetramine, which is present in the salivary glands of *Neptunea* species. Recovery normally occurs within 24 hours.

Red whelk poisoning has been reported infrequently in the United Kingdom. Four incidents were reported in Scotland: one in 1970, two in 1986¹ and one in 1987, and one incident occurred in northern England in 1979. Red whelks are common in the waters of northern Europe and may be taken with catches of edible whelks. However, they should be easily distinguishable; the red whelk is larger but devoid of ridges on the shell, whereas the smaller edible whelk has ridges running around the long axis of the shell as well as ribs running along its length.

1. Reid TMS, Gould IM, Mackie IM, Ritchie AH, Hobbs G. Food poisoning due to the consumption of red whelks (*Neptunea antiqua*). *Epidemiol Infect* 1988; 101: 419-23.

Suspected food poisoning: airline flights from Los Angeles to Heathrow

Twelve persons were reported to have become ill during flights from Los Angeles (USA) to Heathrow airport on 9 and 10 July. The main symptom was vomiting, with an onset between 2 and 4 hours after the main meal on the flights. A number of the passengers were en route to other European destinations. The Centers for Disease Control in Atlanta also report similar illness affecting 14 persons on a flight from Los Angeles to Tokyo on 8 July. All flights were serviced from the same catering establishment in the United States. *Staphylococcus aureus* has been isolated from a dessert item and the Food Hygiene Laboratory at Colindale has shown that the strain involved produces enterotoxins A and C. The WHO surveillance programme for control of foodborne infections, located in Berlin, has been informed.

Epidemiology and Control of Infectious Diseases and Environmental Hazards

The academic department of public health at St Mary's Hospital Medical School and the Communicable Disease Surveillance Centre have arranged a workshop on the Epidemiology and Control of Infectious Diseases and Environmental Hazards, which will take place from 9-13 December 1991. The programme includes sessions on sexually transmitted diseases, AIDS and HIV infection, environmental protection, communicable disease, communication, protection against travel hazards in warm climate countries, zoonoses, and immunisation. The course fee is £350 (full course) or £100 daily. Further information can be obtained from Mrs A McLoughlin, Course Organiser, 53 Acton Lane, London NW10 8UX (telephone 081 965 3965; fax 081 963 1689).

Hepatitis:

weeks 91/25 - 28

Miscellaneous viruses:

weeks 91/25 - 28

Sexually transmitted diseases:

weeks 91/25 - 28

Bacteraemia and bacterial meningitis:

weeks 91/25 - 28

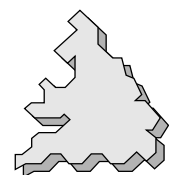
Unusual infections

Imported infections:

weeks 91/25 - 28

Opportunist infections:

weeks 91/25 - 28



Hepatitis, England and Wales: laboratory reports weeks 91/25 – 28

Laboratory reports	Number of reports received				Total for weeks 91/25-28	Cumulative total 1991
	91/25	91/26	91/27	91/28		
Hepatitis A (IgM)	152	95	103	103	453	4127
HBsAg total	43	50	56	45	194	1103
acute hepatitis B	11	15	13	10	49	307
other	32	35	43	35	145	796

Hepatitis A

The total of 453 reports received included F 25y, F 23y 'new age' travellers, M 55y HBsAg carrier, and F 67y with auto-immune hepatitis who died from hepatic failure.

Family outbreaks were reported from the following regions: Northern (1), Trent (2), SE Thames (6), SW Thames (1), and N Western (1). School/nursery outbreaks were reported from W Midlands, Mersey and Wales.

A further 25 reports (13 female, 12 male) were received from the Corby community outbreak and 8 (3 female, 5 male) from

the Durham community outbreak. No new community outbreaks were reported, although increased numbers of reports were received from Birmingham (W Midlands), Orpington (SE Thames) and Teeside (Northern).

A history of travel abroad was recorded in 14/453 (3%) reports: Indian subcontinent 6, Europe/Mediterranean 3, Africa, Central/South America, Far East, Middle East, other, one each.

Laboratory reports	Age (years)					Not stated	Total
	<1	1-14	15-44	45-64	≥65		
Hepatitis A (IgM)	2	155	254	25	5	12	453
HBsAg total	2	10	131	28	8	15	194
acute hepatitis B	–	–	36	7	4	2	49
other	2	10	95	21	4	13	145

Hepatitis B

Forty-nine reports of acute hepatitis B infection were received (13 female, 36 male). Risk factor information was recorded for 32 (65%): homosexual contact 10; heterosexual contact 8

(3 female, 5 male); injecting drug use 2 (male); surgery and/or transfusion 1 (male); other 3 (1 female, 2 male); no reported risk factor 8 (3 female, 5 male).

Miscellaneous viruses, England and Wales: laboratory reports weeks 91/25 – 28

Laboratory reports	Number of reports received				Total for weeks 91/25-28	Cumulative total 1991
	91/25	91/26	91/27	91/28		
Cytomegalovirus	20	23	28	18	89	629
Molluscum contagiosum	–	–	–	–	–	22
Varicella zoster	3	4	3	5	15	104
HTLV-1	–	–	1	–	1	10

Cytomegalovirus: 3 regions reported more than 10% of cases: Yorkshire (10 cases), NW Thames (16) and N Western (12). Ages: 17 babies aged less than 1 year, including 2 neonates; 7 children aged 1-4 years and 3, 5-14 years; 30 adults aged 15-44 years; 22, 45-64 years and 7, 65 years or more; 3 age not stated.

26 patients had organ transplants; 2 had leukaemia/lymphoma; 3 were known to be HIV-1 antibody positive; 5 patients had glandular fever-like illness and 7 patients had hepatitis. Fourteen had respiratory tract infections.

Epstein-Barr virus: M 14y with encephalitis; M 30y with idiopathic thrombocytopenic purpura; M 38y had erythema nodosum.

Herpes simplex: M 5m had eczema herpeticum; F 21y (serol), pregnant F 27y (CSF PCR), F 33y (serol), and M 63y (brain) had encephalitis; F 85y with Bell's palsy (serol).

Varicella zoster: M 29y and M 33y with pneumonitis; F 2y, F 10y, M 61y, male, age not stated, with encephalitis.

HTLV-1: West Indian F 65y with chronic polymyositis.

Papovavirus: F 53y.

Sexually transmitted diseases, England and Wales: laboratory reports weeks 91/25 – 28

Laboratory reports	Male	Female	Not stated	Total for weeks 91/25-28	Cumulative total 1991
<i>Neisseria gonorrhoeae</i>					
β-lactamase producing	43	29	3	75	114
other penicillin-resistant strains	23	8	–	31	65
extra-genital isolates	31	12	–	43	141
<i>Ophthalmia neonatorum</i> (<6 weeks)					
gonococcal	–	–	–	–	9
chlamydia	17	24	2	43	253
<i>Chlamydia trachomatis</i>	1194	1251	48	2493	15957
Herpes simplex	374	357	28	759	5297

Comment

***Neisseria gonorrhoeae*, β-lactamase producing strains.**

Country of infection: West Indies 6, Nigeria 3, Thailand 3, Africa, Cameroun, Gambia, Holland, Indonesia, Middle East, Seychelles, Singapore, Surinam, United Kingdom, USA, one each.

Extra-genital isolates: 23 from throat (16 male, 7 female), of which 4 were β-lactamase producing, 26 from rectum (19 male, 7 female), of which one was penicillin-resistant, and one

from joint (male, β-lactamase producing).

***Chlamydia trachomatis*, genital tract infections:** 2454 (1173 male, 1254 female).

Eye infections: 43 babies aged less than 6 weeks; 8 children aged 6 weeks or more; 21 adults and 2 patients age not stated. Three women with pelvic inflammatory disease and one with infertility.

Bacteraemia and bacterial meningitis, England and Wales: laboratory reports 91/25 – 28

Laboratory reports	No. of reports received		Age		Total for weeks 91/25-28	Cumulative total 1991
	Blood only	CSF only or CSF & blood	<1m	≥65y		
<i>Bacteroides sp</i>	88	–	2	44	88	508
<i>Clostridium sp</i>	19	–	–	8	19	172
Anaerobic cocci	17	–	1	7	17	94
<i>Acinetobacter sp</i>	25	1	1	5	26	126
<i>Aeromonas sp</i>	3	–	–	1	3	16
<i>Pseudomonas sp</i>	110	–	1	52	110	673
<i>Serratia sp</i>	17	–	1	10	17	91

Bacteraemia

Bacteroides sp: *B. bivius* 1; *B. distasonis* 3; *B. fragilis* 58; *B. melaninogenicus* 1; *B. thetaiotaomicron* 2; *B. uniformis* 1; *B. vulgatus* 2. *B. fragilis*, F 78y, F 79y and M 64y with leukaemia, F 77y with myeloma, F 76y on cytotoxic drugs, F 14y with spina bifida and F 14y with liver transplant (all blood isolates).

Fusobacterium sp 2: *F. necrophorum*, M 20y; *F. nucleatum*, M 23y with liver abscess (liver isolate).

Clostridium sp: *C. bifermentans* 1; *C. paraputrificum* 1; *C. perfringens* 12; *C. septicum* 4. *C. paraputrificum*, M 18m with leukaemia and IV-line. *C. perfringens*, M 15y with septic arthritis. *C. septicum*, F 15y with leukaemia.

Eikenella corrodens: M 50y.

Peptostreptococcus magnus: male, age not stated, on haemodialysis had *Staphylococcus aureus* also (blood isolate).

Laboratory reports	Total bacteraemia	Gastrointestinal tract	Biliary tract (ERCP)	UTI/GU (pregnant)	Ischaemic/pressure sores
<i>Bacteroides sp</i>	88	33	7 (–)	5 (3)	9
<i>Clostridium sp</i>	19	4	1 (–)	2 (–)	1
Anaerobic cocci	17	1	1 (–)	3 (1)	1

Acinetobacter sp: *A. calcoaceticus (anitratu)* 9; *A. haemolyticus* 2; *A. lwoffii* 2. M 48y with leukaemia and IV-line had both *A. calcoaceticus* and *A. lwoffii* (blood isolates).

Alcaligenes sp: M 35y with leukaemia and diabetic M 58y on haemodialysis (both blood isolates).

Pseudomonas sp: *P. acidovorans* 1; *P. aeruginosa* 79; *P. cepacia*

2; *P. fluorescens* 9; *P. maltophilia* 5. Four patients had biliary tract disease (ERCP, 1). *P. aeruginosa*, M 31y with HIV infection and F 74y with septic arthritis. *Pseudomonas sp*, F 76y with vertebral osteomyelitis and M 81y with septic arthritis.

Serratia sp: *S. fonticola* 1; *S. liquefaciens* 6; *S. marcescens* 8. Three patients had biliary tract disease (ERCP, 1).

Laboratory reports	Total bacteraemia	UTI/GU (pregnant)	Burns	Intravascular lines	Leukaemia/bone marrow suppression (IV-lines)
<i>Acinetobacter sp</i>	26	–	1	5	11 (2)
<i>Aeromonas sp</i>	3	–	–	–	–
<i>Pseudomonas sp</i>	110	18 (–)	2	8	26 (6)
<i>Serratia sp</i>	17	2 (–)	–	1	3 (2)

Meningitis

Acinetobacter calcoaceticus (anitratu): F 4y with lumbar drain after cranio-facial surgery.

Unusual infections

Capnocytophaga sp: M 71y (blood isolate).

Corynebacterium jeikeium: M 37y with leukaemia and frequent lumbar punctures (blood and CSF isolates).

Diphtheroids 1: F 2y with leukaemia (blood isolate).

Moraxella osloensis 1: M 50y with vertebral osteomyelitis (bone isolate).

Neisseria lactamica 1: F 8y with leukaemia (blood isolate).

Imported infections, England and Wales: laboratory reports 91/25 – 28

Clonorchis sinensis 1: male, age not stated, recently visited India.

Dengue 1: M 30y with fever and erythematous rash after visit to South East Asia.

Dipetalonema perstans 1: male, age not stated.

Hookworms 27 (Bangladesh, India, Pakistan, Uganda,

Zambia, Far East, W Africa, one each).

Plasmodium sp 30: *P. falciparum* 5 (Kenya 3, Nigeria 1, Togo 1). *P. vivax* 25 (India 5, Pakistan 7).

Schistosoma sp 7: *S. haematobium* 2 (Malawi 1); *S. intercolatum* 1 (Zaire); *S. mansoni* 3 (Uganda 1, W Africa 1); *Schistosoma sp* 1.

Strongyloides sp 7 (India 1, Malawi 1 and HIV-1 antibody positive, Africa 1).

Opportunist infections, England and Wales: laboratory reports 91/25 – 28

Actinomyces sp 7: *A. israelii* 6; *A. meyeri* 1. *A. israelii*, F 29y and F 36y with IUCD; M 52y with lung abscess; F 40y with oro-facial infection had *A. israelii*, *Eikenella corrodens* and anaerobic cocci. *A. meyeri*, M 41y with submandibular abscess.

Aspergillus sp 3: *A. fumigatus*, M 2y with osteomyelitis on cytotoxic therapy. *Aspergillus sp* 2: M 46y with leukaemia and

male, age not stated, with Waldenström's macroglobulinaemia.

Candida sp 21 (17 blood isolates): *C. albicans* 19; *C. parapsilosis* 1. Seven patients had IV-lines; 4 were immunocompromised; 4 were premature births; one was HIV-1 antibody positive.

Pneumocystis carinii 7: including 6 known HIV-1 antibody positive males (all sputum isolates).

Torulopsis glabrata 1: patient with extradural spinal abscess (blood isolate).

From week 91/01, data in CDR will be from England and Wales only, unless otherwise stated.

Weekly numbers are provisional and should not be used to indicate trends