

Communicable Disease Report

'Sheep flu'

The period for compulsory sheep dipping for 'scab' began on 22 September and extends until 3 November 1991 in the UK. Inadequately protected workers who experience acute exposure to the organophosphate dip (diazinon, propetamphos and chlorfenvinphos) have been reported to develop symptoms resembling an infectious disease and which may include nausea, vomiting, abdominal pain, diarrhoea, anorexia, sweating, salivation, pyrexia, weakness and constricted pupils. In some parts of the country these effects are known as 'sheep flu'.

In order to determine the risk to health of agricultural workers using sheep dips, the National Poisons Unit at Guy's Hospital, London, is undertaking intensive surveillance to identify cases in close liaison with the Veterinary Medicines Directorate at the Ministry of Agriculture, Fisheries and Food. Once a case has been identified, 10-15ml whole blood (in an EDTA tube) and 25ml urine (in a universal container) are being collected for urgent red cell and plasma cholinesterase analyses at the Unit. Follow up questionnaires are being sent to the notifying doctor. This surveillance is additional to the current Green Card Scheme¹ operating in the West Midlands and Trent Regional Health Authorities.

The National Poisons Unit welcomes information about suspected cases of 'sheep flu' on its 24-hour emergency telephone number, 071 635 9191.

1. Booth C, Morgan D, Lamont T, Vale A. Showing the green card. *BMJ* 1991; 303: 662-3.

Echovirus surveillance

The usual late summer/early autumn increase in enterovirus reports is occurring, with echovirus types 9, 18 and 30 predominating. More than half of the echovirus reports received during weeks 38 to 41 have come from three regions: Northern, Yorkshire and Trent. Echovirus types 9, 18 and 30 are all associated with meningitis, which is rarely serious except in the very young. Outbreaks of echoviral meningitis have occurred in neonatal units and this diagnosis should be considered in sick neonates, especially if community infections are recognised and there is a history of non-specific febrile illness or diarrhoea among patients or nursery staff. CDSC would welcome reports of current outbreaks or specific clinical problems associated with echoviral infection.

Salmonella typhimurium DT 203

S. typhimurium DT 203 has been isolated from 11 people in England and Wales and Scotland who visited Blackpool during September. Many had stayed at hotels where cooked meats, supplied by a single local butcher, were served. CDSC would be grateful for details of similar cases due to this unusual phage type, including any history of visiting Blackpool or staying at local hotels. About 70 microbiologically confirmed cases of *S. typhimurium* DT 203 were recorded in an outbreak in the summer in the Trent region. Investigation of that episode also implicated cooked meats as the likely source of infection.

Virus infections:
weeks 91/38 - 41

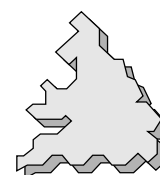
Selected bacterial infections:
weeks 91/38 - 41

Bacteraemia and bacterial meningitis:
weeks 91/38 - 41

Unusual infections

Animal-associated infections:
weeks 91/38 - 41

Notices



Virus infections, England and Wales: laboratory reports, weeks 91/38 – 41

Laboratory reports	Number of reports received				Total reports 91/38-41	Cumulative total 1991
	91/38	91/39	91/40	91/41		
Coxsackie A	1	–	3	2	6	57
Coxsackie B	24	18	13	10	65	382
Echovirus	36	38	34	42	150	517
Measles	2	3	–	1	6	38
Mumps	–	1	–	1	2	39
Parvovirus B19	5	3	16	8	32	651
Rubella	–	7	1	3	11	223

Coxsackie A: A9, 5; A16, 1.

One patient presented with meningitis: F 9y (throat isolate).

Coxsackie B: B1, 4; B2, 5; B3, 20; B4, 6; B5, 21; B6, 2; B untyped 7.

Six patients presented with meningitis (CSF isolate, 5): M 2m, M 16y, M 36y, F 2m, F 32y and female, age not stated.

Two patients presented with myocarditis/pericarditis.

Echovirus: type 2, 1; type 5, 7; type 6, 1; type 7, 3; type 9, 38; type 11, 7; type 14, 2; type 17, 2; type 18, 37; type 19, 2; type 22, 12; type 23, 2; type 25, 1; type 27, 3; type 30, 31; type 31, 1.

Forty-four patients presented with meningitis (CSF isolate,

27): 21 children aged less than 15 years, including 7, 1-5 years and 3 babies aged less than 1 year; 21 adults and 2 age not stated. Meningitis in children was mostly associated with type 9.

The upsurge of cases recently reported continues, with types 9, 18 and 30 predominating. Regions producing more than 15 reports were Northern (30), Yorkshire (19) and Trent (40), with type 9 being especially common from Northern and Trent regions.

Notifications to OPCS of measles, mumps and rubella, England and Wales

Notifications					Total 91/38-41	Cumulative total 1991
	91/38	91/39	91/40	91/41		
Measles	159	166	164	166	555	7830
Mumps	51	52	51	60	214	2324
Rubella	124	99	106	108	437	6050

Measles: M 15y presented with subacute sclerosing panencephalitis; 5 adults.

Mumps: one child aged 2 years and one adult.

Parvovirus (B19): 3 regions reported 4 or more cases: SE Thames (4), S Western (6) and N Western (9).

Ages: 5 children aged less than 15 years; 21 adults aged 15-44

years and 4 aged 45-64 years. One stillbirth and one patient, age not stated. Thirteen adults (all female except M 62y) presented with acute arthritis.

Rubella: no region reported more than 2 cases.

Ages: one child aged less than 15 years; 7 adults aged 15-44 years.

Selected bacterial infections, England and Wales: laboratory reports, weeks 91/38 – 41

Arcanobacterium (Corynebacterium) haemolyticum: F 9y (throat isolate).

Bordetella pertussis 31: 4 regions reported 4 or more cases: Trent (4), NE Thames (5), SW Thames (5) and N Western (6). Ages: 7 babies aged less than 6 months, including 1 aged less than 3 months; 3 infants aged 6-11 months; 13 children aged

1-5 years; 4 aged more than 6 years and 4 age not stated.

Corynebacterium sp 6: *C. diphtheriae* var *gravis* (non toxigenic), F 30y with tonsillitis (throat isolate). *C. striatum*, M 73y (blood isolate). **Corynebacterium sp 4:** F 1y and HIV-1 antibody positive M 57y with IV-line (both blood isolates); M 48y with pneumonia (pleural fluid isolate); and M 73y.

Bacteraemia and bacterial meningitis, England and Wales: laboratory reports, weeks 91/38 – 41

Laboratory reports	No of reports received		Age		Total received	Cumulative total 1991
	Blood only	CSF only or CSF & blood	< 1m	≥ 65y		
<i>Neisseria meningitidis</i>	19	29	–	1	48 (9) *	819
group A	–	–	–	–	–	
B	10	18	–	–	28 (7) *	
C	3	5	–	–	8 (2) *	
ungrouped	6	6	–	–	12	
<i>Haemophilus influenzae</i>	31	32	1	3	63 (–) §	830
type b	15	24	–	–	39 (–) §	
<i>Listeria monocytogenes</i>	4	1	–	3	5	66

*sulphonamide-resistant

§β-lactamase producing

Neisseria meningitidis: 6 regions reported more than 10% of cases: Northern (6 cases), Yorkshire (5), NE Thames (7), SE Thames (7), W Midlands (5) and Wales (6).

Nine sulphonamide-resistant strains were reported: **group B**,

7 (Yorkshire, NE Thames, SE Thames, Wessex, S Western 2 and Wales); **group C**, 2 (Yorkshire, N Western). M 60y had acute arthritis, rash and meningitis.

Notifications to OPCS of meningitis and meningococcal infections, England and Wales

Notifications	91/38	91/39	91/40	91/41	Total 91/38-41	Cumulative total 1991
Total meningitis	44	37	39	46	166	2176
Meningococcal meningitis	6	8	14	12	40	914
Meningococcal septicaemia	2	4	6	3	15	220

Age distribution recorded on laboratory reports

Laboratory reports	Age (years)										Not stated
	<1	1	2	3	4	5-9	10-14	15-19	20-24	≥25	
<i>Neisseria meningitidis</i>	14 *	9	5	1	3	3	1	2	4	3	3
<i>Haemophilus influenzae</i>	22 §	9	7	14	2	–	–	–	–	7	2

* includes 4 aged ≤3 months

§ includes 1 aged ≤3 months

Haemophilus influenzae: 4 regions reported more than 10% of cases: Yorkshire (10 cases), NE Thames (6), SW Thames (6) and N Western (7).

Two ampicillin-resistant strains were reported: F 9m (CSF isolate, NE Thames) and F 7m with facial abscess (blood isolate, E Anglia). F 25y had post partum bacteraemia; F 1y had endocarditis; F 5m had skin infection (blood isolate); F 54y had biliary tract disease and IV-line (blood isolate).

Also reported: F 28y with chorio-amnionitis and spontaneous abortion (placental isolate).

H. parainfluenzae: F 19y with urinary tract infection (blood isolate).

Listeria monocytogenes: meningitis: F 58y. Bacteraemia: M 69y on haemodialysis; immunocompromised M 71y on steroids; F 35y who miscarried at 17th week of pregnancy; M 81y with prosthetic valve.

***H. influenzae*: clinical features recorded on laboratory reports**

Clinical features	Age in years				Not stated
	≤3	4-14	15-64	≥65	
Meningitis (blood isolate only)	1 (1)	1 (1)	–	–	–
Epiglottitis	8	1	–	–	1
Pneumonia	2	–	–	2	–
Septic arthritis/osteomyelitis	–	–	–	–	–
Facial cellulitis	3	–	–	–	–

Unusual infections

Actinobacillus sp: F 74y with dental abscess (mouth isolate).
Aerococcus viridans: M 59y (blood isolate).
Corynebacterium jeikeium 2: M 68y with myelodysplasia and M 64y with leukaemia (both blood isolates).

Diphtheroids: F 67y had IV-line (blood isolate).
Flavobacterium sp: M 61y had IV-line (blood isolate).
Moraxella urethralis: M 3m (blood isolate).

Animal-associated infections, England and Wales: laboratory reports, weeks 91/38 – 41

Borrelia burgdorferi 2: M 13y who is presently living in Germany (serology); M 47y (serology, CSF also).
Brucella sp 3: M 50y; M 52y who had contact with cattle; and a patient from Kuwait with fever (all serology).
Pasteurella 36: *P. multocida* 32 : 19 patients had dog bites, 5 had cat bites/scratches and 2 had infected wounds; 3 patients aged 68-81 years had respiratory tract infections (all sputum); F 68y and M 74y with septicaemia (both blood); F 77y with

peritonitis (peritoneum). *Pasteurella sp* 4: 2 patients had dog bites and one a wound; M 73y with urinary tract infection (blood).

Toxocara: M 39y with choroiditis.

Toxoplasma 51: 16 patients had lymphadenopathy; 10 patients had eye lesions, including one of seven known to be HIV-1 antibody positive; one patient had a heart transplant; and one with hepatosplenomegaly.

PCR and viral diagnosis

There will be a one day symposium on the application of the polymerase chain reaction to viral diagnosis on Friday 15 November 1991 at the Central Public Health Laboratory, Colindale. The registration fee of £30 will include lunch and refreshments. Further details can be obtained from Dr J P Clewley, Virus Reference Laboratory, 61 Colindale Avenue, London NW9 5HT.

Third module for Consultants in Communicable Disease Control – late places available

Due to last minute cancellations, three places are available on a residential course for CCDCs to be held at the Hendon Hall Hotel, London NW4 from 18-27 November. The course covers the practical aspects of CCDC work and associated computer, media and other skills. Applications are invited from CCDCs in post or senior registrars who are waiting to take up a CCDC appointment. The cost of the course is £750 (excluding VAT) and covers accommodation and other expenses. A course programme and application details can be obtained from Dr Mary O'Mahony or Ms Pip Lamont (telephone 081 200 6868).

Automation in medical microbiology

An update course is to be held on Thursday 28 November 1991 at the Central Public Health Laboratory, Colindale, under the auspices of the Association of Clinical Microbiologists. The programme includes: instrumentation development and automated aspects of liquid dispensing, ELISA systems, blood culture, identification of organisms, antibiotic measurement and sensitivity testing.

The course fee is £10 for ACM members and £20 for non-members. Further information can be obtained from Dr Moyra McConnell, Division of Enteric Pathogens, Central Public Health Laboratory, 61 Colindale Avenue, London NW9 5HT (telephone 081 200 4400 ext 3146).

Diagnostic medical mycology

A one week lecture and practical course on the laboratory diagnosis of fungal infections is to be held in Leeds, commencing on 30 March 1992. It is intended for MLSOs and medical graduates working in diagnostic laboratories and is organised by the British Society for Mycopathology. Further details may be obtained from Dr E G V Evans, Regional Mycology Laboratory, Department of Microbiology, University of Leeds, Leeds LS2 9JT.

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