"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

April 2009 Topics

- H1N1 Influenza
- Seasonal Influenza Update
- Disease Control Flood Surveillance
- Rapid HIV Testing Is Now Available in North Dakota
- National Recreational Water Illness Prevention Week Is May 19-25, 2009
- 2009 Vaccination Expedition

**H1N1 Influenza**

As of May 4, 2009, there have been no cases of H1N1 flu reported to the North Dakota Department of Health (NDDoH). H1N1 (formerly referred to as “swine flu”) is a new influenza virus causing illness in people. This virus was originally referred to as “swine flu” because laboratory testing showed that many of the genes in this new virus were very similar to influenza viruses that normally occur in pigs in North America. Further study has indicated that this new virus is actually very different from what normally circulates in North American pigs. The U.S. Centers for Disease Control and Prevention (CDC) has determined that this new H1N1 virus is communicable and is spreading from human to human. Transmission appears to be similar as that of seasonal influenza.

The symptoms of this new influenza A H1N1 virus in people are similar to the symptoms of seasonal influenza and include fever, cough, sore throat, body aches, headache, chills and fatigue. Individuals with fever and other symptoms of H1N1 and who have history of contact with a confirmed case or travel to a community with a confirmed case in the past seven days should seek further follow-up with a physician. Each of these criteria are necessary for further follow-up on H1N1 flu with the North Dakota Division of Laboratory Services.
For more information regarding H1N1 flu, including travel restrictions and antivirals, visit the NDDoH H1N1 influenza website at [www.ndflu.com/swineflu](http://www.ndflu.com/swineflu). The website is updated daily with the most current information.

### Seasonal Influenza Update

As of Apr. 29, 2009, a total of 1,484 laboratory-identified influenza cases have been reported to the NDDoH from 49 counties. Of the 1,484 reported cases, 75 percent were identified as type A (n=1,120), 24 percent as type B (n=349) and one percent unknown type (n=15). Of the 1,120 influenza A cases, 88 have been subtyped, with 79 identified as type A H1 and 9 as type A H3.

Since Oct. 1, 2008, 21 influenza viruses have been submitted to the CDC for resistance testing. Results have been received on one influenza type A H1 and one influenza type A H3 virus. The influenza A H1 virus was found to be resistant to oseltamivir (tamiflu) and sensitive to zanamivir (relenza) and adamantanes. The influenza type A H3 virus as found to be resistant to adamanatanes and sensitive to oseltamivir and zanamivir. These antiviral resistance patterns are consistent with current national influenza resistant-virus trends.

For more information about influenza, antiviral resistance, influenza activity or to order educational materials free-of-charge, visit the NDDoH influenza website at [www.ndflu.com](http://www.ndflu.com).

### Disease Control Flood Surveillance

The NDDoH Division of Disease Control started surveillance of North Dakota emergency rooms Mar. 23, 2009, to monitor the extent to which flooding in the state medically affected the lives of those fighting the flood. Emergency rooms have been reporting weekly the total number of visits to their facilities along with information about those who came in with injuries and illnesses related to flooding. Some of the injuries that the facilities were asked to look for ranged from sore wrists and ankles to motor vehicle accidents and other serious traumas. Illnesses could include carbon monoxide poisoning, exhaustion, hypothermia and cardiac-related events.

As of May 1, 2009, there have been 249 injuries, 70 illnesses and two deaths related to the flood reported to NDDoH. The efforts of the reporting facilities have been greatly appreciated. The NDDoH will continue surveillance in areas that continue to be affected by flooding.

For additional information about flood cleanup health and safety information, please visit [www.ndhealth.gov/flood](http://www.ndhealth.gov/flood).

### Rapid HIV Testing Is Now Available in North Dakota

The NDDoH announced the launch of rapid HIV testing April 27, 2009. Rapid HIV testing will be available free-of-charge at HIV counseling and test sites across the state.

Rapid testing will expand the reach of HIV testing and provide new opportunities to reach people who are at risk of becoming infected with HIV. Risky behavior includes unprotected sex, needle-sharing for drug use, or tattooing and body piercing. HIV testing is available at test sites throughout the state. The test sites are staffed by trained personnel who offer free and confidential HIV testing, counseling and referrals to those at risk. HIV can be prevented by avoiding or not engaging in risky behaviors.
More than one million people in the United States are HIV positive, and approximately 56,300 new infections occur every year. As of Dec. 31, 2008, 441 cases of HIV/AIDS have been reported in North Dakota since HIV/AIDS surveillance began in 1984. About one-fourth of the people estimated to be HIV positive are believed to be unaware of their infections, underscoring the need for increased efforts to reach at-risk populations with HIV testing and prevention services.

For information about HIV testing and other HIV/AIDS services, call the NDDoH HIV/AIDS Program hotline at 800.70.NDHIV or visit the website at www.ndhealth.gov/hiv.

**National Recreational Water Illness Prevention Week Is May 19-25, 2009**

May 19-25, 2009, is the fifth annual National Recreational Water Illness Prevention Week. This observance provides an opportunity for public health agencies to increase awareness of recreational water illness and promote healthy water experiences.

Recreational water illness (RWI) is spread by swallowing, breathing or having contact with contaminated water from swimming pools, water parks, interactive fountains, spas, lakes, rivers or oceans. The most commonly reported RWI is diarrhea caused by pathogens such as Cryptosporidium, Norovirus, Shigella, Escherichia coli O157:H7 and Giardia. Children, pregnant women and people with compromised immune systems are at greatest risk for RWIs.

The following tips can help protect you from RWI:

- Refrain from swimming while experiencing diarrhea.
- Avoid swallowing pool water or even getting it in your mouth.
- Shower before swimming and wash your hands after using the toilet or changing diapers.
- Take children on bathroom breaks or check diapers often.
- Change diapers in a bathroom and not at poolside and thoroughly clean the diaper-changing area.

For more information regarding healthy swimming or to report a waterborne illness, call the NDDoH at 701.328.2378 or 800.472.2180 or visit www.ndhealth.gov/disease/GI.

**Vaccination Expedition May 2009**

The Greater Grand Forks Immunization Coalition is hosting the 2009 Vaccination Expedition May 28-29, 2009, at the Alerus Center in Grand Forks, N.D. The featured speaker is William Atkinson, MD, MPH, medical epidemiologist with the National Immunization Program at CDC. The conference agenda and registration is available online at www.grandforksgov.com/publichealth.

Contributing authors of The Pump Handle include Krissie Guerard, Denise Larson, Michelle Feist, Julie Wagendorf, Kirby Kruger, Tracy Miller, Lindsey VanderBusch and Sarah Weninger. For questions, suggestions or inquiries, or to be removed from the mailing list, please contact Sarah Weninger of the Division of Disease Control at 701.328.2366 or by email at sweninger@nd.gov.
The pump handle picture in the title was obtained from the website www.ph.ucla.edu/epi/snow.html.

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