"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

February 2010 Topics
- Influenza H1N1 Update
- April Is STD Awareness Month
- Stop the Spread of Salmonella
- Klebsiella pneumoniae Carbapenemase Producing Organisms Identified in N.D.
- Acute Viral Gastroenteritis Activity Update
- New Disease Control Employee!
- HIV/STD/TB/Hepatitis Symposium May 2010

**Influenza H1N1 Update**
Influenza activity remains low in the state. As of March 3, 2010, 3,244 laboratory-identified influenza cases had been reported from 51 counties. Only 20 cases have been reported to the North Dakota Department of Health (NDDoH) since Jan. 1, 2010. Of the 3,244 cases, 543 have been confirmed as 2009 H1N1 influenza cases. Not every influenza case is subtyped. Of those cases that were subtyped, most were identified as 2009 H1N1; therefore H1N1 is the predominant influenza strain circulating in North Dakota. Four influenza-related deaths have been reported in North Dakota. One was male and three were female. All were older than 60 with underlying health conditions.

For more information, visit the NDDoH website at [www.ndflu.com](http://www.ndflu.com).

**April Is STD Awareness Month**
April is National Sexually Transmitted Diseases (STDs) Awareness Month, an observance created to increase awareness about STDs, including their transmission, prevention and treatment. STDs continue to be a major health threat in the United States, especially among adolescents and young adults. One in four young women between the...
ages of 14 and 19 in the United States, or 3.2 million teenage girls, are infected with at least one of the most common STDs: human papillomavirus (HPV), chlamydia, herpes or trichomoniasis. If undetected and left untreated, STDs can lead to potentially severe health consequences, including ectopic pregnancy or infertility in females. These severe health consequences underscore the importance of annual chlamydia screening and vaccination for HPV as part of a comprehensive approach to sexual health in young women.

In North Dakota, preliminary data indicate 1,921 cases of chlamydia and 118 cases of gonorrhea were reported to the NDDoH in 2009. Of these totals, 72 percent of chlamydia cases and 66 percent of gonorrhea cases occurred among people ages 15 to 24.

The NDDoH, partnering with MTV, the Kaiser Family Foundation, Planned Parenthood Federation of America and the Centers for Disease Control and Prevention (CDC), is supporting the GYT: Get Yourself Tested campaign to inform young people about STDs, encourage and normalize testing for STDs, and connect young people to testing centers. Visit CDC’s updated www.cdcnpin.org/stdawareness for tools, resources and information that can help support your STD Awareness Month activities. Website highlights include:

- **STD & HIV testing locator widgets**: Give visitors to your website instant access to a list of their nearest HIV and STD testing locations. When a ZIP code is entered, it will return the nearest testing locations from the extensive database available at www.findSTDtest.org, a national online tool for locating local STD and HIV testing centers by ZIP code.
- **Media relations kit**: Disseminate news and information about STD Awareness Month activities to the media to reach your target audiences. Access tips on working with the media and promoting your event on the web, as well as a sample press release and media advisory.
- **The Facts brochures**: Order free STD brochures for your clinics and health centers.
- **GYT: Get Yourself Tested campaign information and evaluation tools**: Keep returning to the site for the latest GYT campaign information and tools for evaluating GYT in your clinic or area.

Contact the NDDoH STD Program for more information about GYT campaign materials. Additional information about STDs and North Dakota STD statistics can be found at www.ndhealth.gov/STD/default.htm.

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**Stop the Spread of Salmonella**

Easter brings to mind brightly colored eggs, baskets full of toys, candy bunnies and many family traditions. However, some Easter traditions can place children at risk for serious illness. Baby animals, including baby chicks and ducks, can be potentially dangerous to small children. Baby chicks and ducklings often carry the harmful bacteria *Salmonella*. North Dakota has had several cases of *Salmonella* that were associated with exposure to baby chicks or ducklings.

The risk of acquiring *Salmonella* infections from baby chickens can be reduced by following these guidelines:

- Do not purchase chicks as gifts.
• Do not let children younger than 5 touch or handle chicks or the packaging and cages in which the chicks are being held.
• Wash hands thoroughly with soap and water after handling chicks or touching objects in contact with the chicks.
• If objects such as toys, pacifiers or bottles come into contact with the chick environment, wash them with warm soapy water.
• Do not allow anyone to eat or drink while interacting with the chicks or their environment.
• Keep chicks away from areas where food is prepared or consumed.
• Talk to your veterinarian, nurse or doctor about health risks associated with chicks.

Symptoms of infection with *Salmonella* include diarrhea, abdominal cramps and fever, usually within eight to 72 hours after exposure. The illness usually lasts four to seven days, and most healthy people recover without antibiotic treatment. Infants, young children, the elderly and those who have impaired immune systems are at greater risk for severe infections.

For additional information about proper handling of chicks and ducklings to prevent *Salmonella* infection, visit [www.cdc.gov/healthypets/animals/birds.htm](http://www.cdc.gov/healthypets/animals/birds.htm). To report a case of *Salmonella* to the NDDoH, call 800.472.2180 or 701.328.2378.

**Klebsiella pneumoniae Carbapenemase Producing Organisms Identified in N.D.**

Three cases of *Klebsiella pneumoniae Carbapenemase* (KPC) producing organisms have been identified in several North Dakota health-care facilities. Two cases were non-residents who were cared for in North Dakota medical facilities, while the third is a North Dakota resident. Strict infection-control measures and active surveillance cultures have been recommended to these facilities in order to control the spread and gain a better understanding of how widespread this organism is.

KPC organisms, also known as Carbapenem-Resistant or Carbapenemase-Producing *Enterobacteriaceae* (CRE), produce an enzyme that confers resistance to the carbapenem class of antibiotics, as well as other beta-lactam agents including penicillins, cephalosporins and aztreonam. While first identified in *Klebsiella pneumoniae*, other organisms of the *Enterobacteriaceae* family such as *Enterobacter* spp. and *E. coli* have been found to produce this enzyme. Patients at high risk for morbidity and mortality related to these organisms include those with prolonged hospitalization, those who are critically ill and those exposed to invasive devices (e.g. ventilators or central venous catheters).

Although KPC organisms are not reportable in North Dakota, the NDDoH is asking that cases of KPC colonization or infection be reported to the Division of Disease Control. In addition, a specimen should be sent to the Division of Laboratory Services. For additional information, please contact the Division of Disease Control at 701.328.2378.
Acute Viral Gastroenteritis Activity Update

Since Dec. 1, 2009, five viral gastroenteritis outbreaks (with two confirmed as norovirus outbreaks) have been reported to the NDDoH by long-term-care facilities. Additionally, five community events have resulted in acute gastroenteritis symptoms, and four have been confirmed as norovirus outbreaks. A total of 10 viral gastroenteritis outbreaks, six confirmed norovirus, have occurred in Cass, Grand Forks, Pierce, Ransom, Renville, Walsh, Ward and Williams counties.

Outbreaks of gastroenteritis most often occur in the winter and early spring. Norovirus is the most common cause of viral gastroenteritis outbreaks and is often called the “winter vomiting disease” or “stomach flu.” Although it is commonly referred to as the stomach flu, it has no relationship to the influenza virus that causes respiratory infections. The Centers for Disease Control and Prevention (CDC) estimates noroviruses cause 23 million cases of acute gastroenteritis each year and about 50 percent of all foodborne outbreaks.

Practice good hand hygiene, disinfect contaminated surfaces and do not return to work or school until 24 to 72 hours after symptoms resolve are recommended measures for the prevention and control of norovirus infections. Please visit www.cdc.gov/mmwr/preview/mmwrhtml/mm5633a2.htm for more information about the prevention of norovirus.

To report an acute viral gastroenteritis outbreak, please contact the NDDoH at 800.472.2180 or 701.328.2378 or submit an online report form at www.ndhealth.gov/disease/GI/.

New Disease Control Employee!

Please help us in welcoming Julie Dearth as a new employee to the Division of Disease Control!

Name: Julie Dearth
Title: Administrative assistant I-ELC Program
Education Background: I took my generals at Bismarck State College, and then attended Rasmussen College, where I earned an associate’s degree in medical administration.
Past Experience: My experience within the health field includes working as a certified nursing assistant, as well as a ward clerk, at Medcenter One Care Center and St. Alexius Medical Center.
Family/Hobbies: I live in Bismarck with my husband Jason, who is employed with RDO Equipment, and our three children. I have one son and two daughters. Anthony is 10 and a fifth grader at Northridge Elementary, Jordyn is 6 and a first grader at Northridge, and my baby Alexis is 2. I enjoy spending time with my family and friends, riding motorcycle, boating in the summer and doing photography.

HIV/STD/TB/Hepatitis Symposium May 2010

The 2010 HIV/STD/TB/Hepatitis Symposium will be held May 19 and 20, 2010, at the Radisson Inn, 201 North Fifth Street, Fargo, N.D.
The symposium will include both plenary and breakout sessions, and the following topics will be presented:

- HIV/STDs/TB/Viral hepatitis in North Dakota
- HIV/STDs and alcohol
- Occupational exposure and hepatitis testimonial
- Culturally sensitive counseling
- HIV/HCV nutrition
- STD screening and sexual history taking
- Pediatric TB
- Hepatitis protocol at the state penitentiary
- HPV male screening process
- HCV counseling and testing

The audience for the symposium includes all health-care and substance abuse professionals who provide services to individuals with HIV, sexually transmitted diseases, tuberculosis or viral hepatitis. The symposium will provide an opportunity to receive education and resources to improve the capacity to provide these services. Continuing education credits are being requested from the North Dakota Board of Nursing, North Dakota Board of Addiction Counseling Examiners and the North Dakota Board of Social Workers. Additional information about continuing education credits will be posted to the website as it becomes available.

The registration form is available on the NDDoH website at www.ndhealth.gov/disease/hepatitis. The registration deadline has been extended to April 23, 2010. Additional information about the symposium will be posted on the website as it becomes available. For more information about the symposium, please contact Julie Wagendorf or Krissie Guerard, at 701.328.2378 or 800.472.2180.

Contributing authors of The Pump Handle include Dr. Jennifer Cope, Michelle Feist, Julie Wagendorf, Kirby Kruger, Tracy Miller 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.

Terry Dwelle, MD, MPHTM, State Health Officer
Kirby Kruger, Director of the Division of Disease Control and Chief of the Medical Services Section