

The Pump Handle



"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

November 2010 Topics

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Dog Protects Child From Rabid Badger

A family dog was euthanized after it protected a child from being attacked by a badger. A badger charged a child who was playing in the snow in the family's yard. Using a shovel, the child struggled with the badger, and eventually the badger retreated into a nearby field. The mother called the child back to the house after seeing him running after the badger into the field. As the child headed towards the house, the badger turned around and started to pursue the child again. The family dog intercepted the badger and killed it before it reached the child. No one in the family, including the child, was bitten or scratched by the badger. The badger tested positive for rabies at the North Dakota State University Veterinary Diagnostic Laboratory.

Unfortunately, the dog was a 6-month-old puppy that had not been vaccinated for rabies. Because the dog had an exposure to a rabid animal, it needed to be euthanized. According to the National Association of State Public Health Veterinarians, Inc., dogs can be vaccinated against rabies as early as three months of age. Animals appropriately vaccinated can be given a booster dose of vaccine and observed for 45 days.

More information about rabies can be found on the NDDoH rabies website at www.ndhealth.gov/disease/Rabies/.



2010-2011 Influenza Antiviral Treatment Recommendations

Oseltamivir (Tamiflu®) and zanamivir (Relenza®) are the influenza antiviral medications recommended to treat and prevent influenza in the United States during the 2010-2011 influenza season. These interim recommendations are provided in conjunction with vaccination recommendations to reduce the impact of influenza on people at high risk for developing severe complications secondary to infection.

Early antiviral treatment can reduce the risk of complications from influenza, such as pneumonia, respiratory failure and death. Antiviral treatment is recommended for any patient with confirmed or suspected influenza who is hospitalized; has severe, complicated or progressive illness; or is at high risk for developing influenza complications.

Clinical judgment based on the patient's disease severity and progression, age, underlying medical conditions, likelihood of influenza and time since onset of symptoms is important to consider when making antiviral treatment decisions for high-risk outpatients. When indicated, antiviral treatment should be started as soon as possible after illness onset, preferably within 48 hours of influenza illness onset.

Antiviral treatment still may be beneficial in patients with severe, complicated or progressive illness and in hospitalized patients when administered within 48 hours of illness onset. Antiviral treatment also can be considered for any previously healthy, non-high-risk, symptomatic outpatient with confirmed or suspected influenza based upon clinical judgment if treatment can be initiated within 48 hours of illness onset.

To review the recommendation in its entirety, please visit:
www.cdc.gov/flu/professionals/antivirals/guidance/

As of Dec. 10, 2010, a total of 11 laboratory-identified influenza cases had been reported to the North Dakota Department of Health (NDDoH) from six counties. All reported cases were identified as influenza A viruses. Two of the influenza A viruses have been further subtyped and identified as influenza A H3 viruses. The NDDoH influenza website is updated weekly with the latest influenza data at www.ndflu.com.



Acute Viral Gastroenteritis Activity Update

Since Oct. 1, 2010, there have been two viral gastroenteritis outbreaks reported to the NDDoH. These outbreaks occurred in long-term care facilities, and one was confirmed norovirus. These outbreaks resulted in a total of 65 residents and 49 staff ill with vomiting and diarrhea.

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 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. Institutions- such as long-term care facilities, assisted living facilities and hospitals-are encouraged to submit an online report form at www.ndhealth.gov/disease/GI/.



Sleep Tight – Don’t Let the Bedbugs Bite

The numbers of reports of bedbugs on the news, in the paper, and in calls to the health department are on the rise. The Division of Disease Control has a fact sheet located at www.ndhealth.gov/Disease/Documents/faqs/Bed%20Bugs.pdf that provides basic information about bedbugs.

The holidays are approaching, with many people traveling both in and out of state. To help reduce your chances of bringing bedbugs home with you, this site from the Central Ohio Bed Bug Task Force contains helpful information about how to check for bedbugs and prevent moving them from the hotel to your home via your luggage and clothing: www.centralohiobedbugs.org/index.html.

Bedbugs are not restricted to only low budget lodging facilities or apartment complexes. North Dakota has seen an increase in bedbugs as well. According to the Division of Food and Lodging, most of the increase is occurring in the eastern part of the state.

Below you will find some additional links regarding bedbugs.

- [EPA Bedbug Website](#): Provides general information about bedbugs, such as preventing infestations; managing bedbugs; and common myths, questions and answers; also has links to other trusted resources.
- [EPA Bedbug Consumer Alert](#): Warning residents about proper pesticide selection and use when used for bedbugs.
- [National Pesticide Information Center](#): Provides links to many additional resources and a few videos.
- [EPA Online Search for Pesticides Registered for Bedbugs](#).
- Joint U.S. Centers for Disease Control and Prevention (CDC) and the U.S. Environmental Protection Agency (EPA) [Statement on Bedbug Control](#).
- [CDC Bedbug Website](#): Provides links to many governmental and non-governmental bedbug resources.



New Disease Control Employees!

Please help us in welcoming Shannon Jahner, Jennifer Schmidt and Craig Steffens as new employees to the Division of Disease Control!

Name: Shannon Jahner

Title: HIV Prevention/ADAP Coordinator

Education Background: I graduated from University of Mary with a degree in social work.

Past Experience: Prior to working at the NDDoH, I was the HIV Capacity Building coordinator with the American Red Cross in Bismarck.

Family/Hobbies: In my spare time, I enjoy playing pool, shopping, and gardening when the weather permits.

Name: Jennifer Schmidt

Title: Field Epidemiologist, Jamestown

Education Background: Bachelor's degree in radiologic science from University of Mary and master's degree in community health from University of Minnesota, Mankato.

Past Experience: I was a radiologic technologist for four years. I also taught for Presentation College in the Radiology Technology Program for three years during this time. I was also a graduate assistant for the University of Minnesota, Mankato in the Community Health department.

Family/Hobbies: I am married to Gary, and we have two beautiful girls, Lily (11) and Corinne (3). Lily is with us only in the summer as she lives in San Antonio, Texas, with her mom and stepdad. Corinne loves preschool and is in Just 4 Kix. We are huge Chicago Bears fans and love watching football all day on Sundays! In the summer, we love to do just about anything outside, and I especially love to garden vegetables and flowers.

Name: Craig Steffens

Title: HIV/AIDS Surveillance Coordinator – TB Consultant

Education Background: A master's degree in public health, epidemiology, with an interdisciplinary concentration in global health from the University of Minnesota, Twin Cities in 2010 and a bachelor's degree in French and physiology from the University of Minnesota, Twin Cities in 2006.

Past Experience: For my field experience in the summer of 2009, I worked with a World Health Organization Office in Kobe, Japan, studying climate change.

Family/Hobbies: My parents live in Neenah, Wisconsin, where I was born and raised. My sister, Kimberly, works as a physical therapist in Grants Pass, Oregon, and specializes in women's health. In my free time, I like running; last summer I ran Grandma's Marathon in Duluth, Minnesota. I also enjoy swimming and playing hockey, basketball and other sports. I like traveling and have seen quite a few European countries. Between undergrad and graduate school, I spent one year in rural France, in a village called Egletons, teaching English.

Contributing authors of The Pump Handle include, Michelle Feist, Sarah Weninger, Julie Wagendorf, Kirby Kruger and Tracy Miller. 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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