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HEALTH INFORMATION OPERATIONS (HIO) WEEKLY UPDATE

27 March 2002

The HIO Weekly Update provides information regarding global medical and veterinary issues of interest to the United States (US) Army. The weekly update does not attempt to analyze the information regarding potential strategic or tactical impact to the US Army and as such, should not be regarded as a medical intelligence product. Medical intelligence products are available at http://mic.afmic.detrick.army.mil/. The information in the HIO Weekly Update should provide an increased awareness of current and emerging health-related issues.

HOT ISSUES	2
Anthrax Decontamination - Brentwood Facility	2
Anti-malarial Treatment - WHO	2
Influenza Surveillance – DoD	2
Influenza Surveillance - US	3
International Health Security - Conference	3
Kava-Containing Dietary Supplements - FDA Advisory	4
Prions in Skeletal Muscle of Mice - US	4
Radiation Detector - National Laboratories	
Smallpox Treatment - Veterans Affairs San Diego Healthcare System (VASDHS)	5
Yellow Book - CDC	5
USCENTCOM	5
Earthquake - Afghanistan	5
Foot and Mouth Disease (FMD) - Pakistan	6
Leishmaniasis - New Treatments	
Weapons of Mass Destruction (WMD) - al-Qaida	6
USEUCOM	
Antibiotic Resistance Report - Europe	6
Cryptosporidiosis - England and Wales	
Ebola / Viral Hemorrhagic Fever - Gabon and Republic of the Congo	
Glycopeptide Resistant Enterococci (GRE) - Europe	
Influenza Surveillance – Europe	
Marburg Hemorrhagic Fever - Democratic Republic of the Congo (DRC)	9
Measles Outbreaks - Germany	
Meningococcal Disease (MCD) - Burkina Faso	
Right to Die Court Case - England	
Spinal Cord in Polish Beef - UK	
Tick-borne Encephalitis (TBE) - Europe	
USJFCOM	
Feline Immunodeficiency Virus (FIV) Vaccine - USDA	
First Nationwide Survey of Waterways - US	
Health Privacy Regulations - DHHS Proposed Changes	
Homeland Security Advisory System - Office of Homeland Security	
Irradiation Phytosanitary Treatments - Fruits and Vegetables	
Lead Smelter Lawsuit - Missouri	
Potassium Iodide Distribution - Maryland	
Respirator Survey - NIOSH	
Safety of Emergency Responders in Terrorist Events - NIOSH Study	
Tuberculosis (TB) Cases - US	13

USPACOM	. 14
Mass Arsenicosis - Bangladesh	14
Echovirus 11 Epidemic - Japan	
Tuberculosis (TB) - India	
USSOUTHCOM	
Dengue Fever - Brazil	
Venezuelan Equine Encephalitis (VEE) - Honduras	
ACRONYMNS	

HOT ISSUES

Anthrax Decontamination - Brentwood Facility

On 26 March, the New York Times reported that decontamination efforts might soon be underway at the District of Columbia Brentwood mail facility, which along with the decontamination of the Trenton mail facility will cost \$35 million. While the Hart building required decontamination of less than 100,000 cubic feet, the Brentwood facility has 17.5 million cubic feet. The decontamination may be conducted in stages after sectioning off the interior of the building. Chlorine dioxide gas will be used, which requires specific temperature and precise humidity conditions. After 12 hours of contact time, the gas would be suctioned out of the building through scrubbers that render emissions harmless. The <u>USPS</u> has consulted the National Weather Service on spring wind currents to know how any potentially escaping gas might move, and a special <u>EPA</u> van will monitor the area to detect any trace chlorine dioxide. The report is at http://www.msnbc.com/news/729492.asp.

Anti-malarial Treatment - WHO

On 22 March, the WHO announced that it was inviting letters from scientists interested in participating in a collaborative study to assess the impact of rectal artesunate in the emergency management of malaria. This formulation of artesunate reportedly achieves rapid and substantial (99-100%) reduction of parasitemia within 24 hours of administration. It allows emergency treatment of patients who cannot take drugs orally and who do not have immediate access to injectable treatment. The WHO will select five countries based on the endemicity of *Plasmodium falciparum* malaria among other criteria. The report is at http://www.who.int/wer/pdf/2002/wer7712.pdf.

Influenza Surveillance - DoD

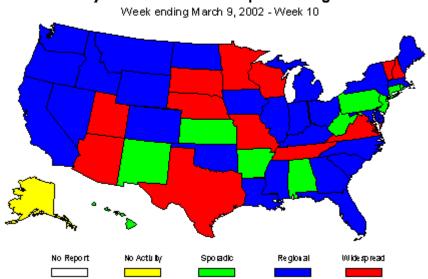
The DoD Worldwide Influenza Surveillance Program is a laboratory-based influenza surveillance program managed by the Air Force. As of 21 March, 491 (19%) of 2,537 submitted specimens have been identified as positive for influenza since the start of the influenza season (29 September): 475 (97%) were influenza A and 16 (3%) were influenza B. Of the 491 influenza A isolates, 101 (21%) have been subtyped, and 95 (94%) were influenza A (H3N2) and 6 (6%) were influenza A (H1N1). Further info, including data from the CDC and international sites, is available at: https://pestilence.brooks.af.mil/Influenza/

Note: Some users may experience difficulty accessing this link directly from this document; if this occurs, copy and paste the hyperlink in your browser address bar.

Influenza Surveillance - US

The <u>CDC</u> report for the week ending 9 March (week 10) indicated that during this week overall national visits to physicians for influenza-like illness were 2.3%, which is above the national baseline of 1.9%. Deaths attributed to pneumonia and influenza were 8.8%, which is above the epidemic threshold of 8.3% for this week. For week ten, laboratory reports indicated 448 (23.5%) of 1,905 respiratory specimens were positive for influenza: 117 influenza A (H3N2), 1 influenza A (H1N1), 20 influenza B, and 310 influenza A viruses with unspecified subtype. The CDC reported that 36% of the reported influenza B isolates this season were identified in the Mid-Atlantic region. Since 30 September, 10,081 (15.4%) of 65,494 submitted specimens were positive for influenza: 9,865 (98%) were influenza A and 216 (2%) were influenza B. Of the 10,081 influenza A viruses, 2,762 (28%) were subtyped with the following results: 2,748 (99%) were influenza A (H3) and 35 (1%) were influenza A (H1) viruses. The <u>CDC</u> classified influenza during week 10 of the 2002 influenza season as in the map below. The report is at http://www.cdc.gov/ncidod/diseases/flu/weeklyarchives/weekly09.htm.

Weekly Influenza Activity Estimates Reported by State & Territorial Epidemiologists



Picture courtesy of the CDC at http://www.cdc.gov/ncidod/diseases/flu/weekly.htm.

International Health Security - Conference

On 14 March, the Eurosurveillance Weekly reported that representatives from the Health Ministries of Canada, the European Union, France, Germany, Italy, Japan, Mexico, the <u>UK</u>, and the US met in London at a follow up meeting to the November 2001 initial meeting to discuss international health security. Officials from WHO

attended as observers. Emphasis was on increasing international collaboration to better prepare for, and respond to, acts of chemical, biological, and radio-nuclear terrorism. An Internet-based Global Health Security Network was set up to allow sharing of information among the group's experts and officials. On 23 March, the BMJ announced that these countries would take part in a major international exercise in the next six months to test how they would cope with a bioterrorist attack, which would likely portray smallpox. The exercise would also be used to develop an incident scale to rate the severity of any attack, similar to that already in place for nuclear incidents. The Eurosurveillance report is at http://www.eurosurv.org/2002/pfp/020321_pfp.htm#4 and the BMJ report is at http://bmj.com/cgi/content/full/324/7339/696/b.

Kava-Containing Dietary Supplements - FDA Advisory

On 25 March, the FDA advised consumers who have liver disease or liver problems or persons who are taking drug products that can affect the liver to consult a health care provider (HCP) prior to using kava-containing supplements. The FDA also advised consumers who use a kava-containing dietary supplement and who experience signs of illness associated with liver diseases to also consult their HCP. Over 25 reports of liver-related injuries - including hepatitis, cirrhosis, and liver failure - have occurred in other countries. Four patients required liver transplants. In the US, the FDA has received a report of a previously healthy young female who required liver transplantation, as well as several reports of liver-related injuries. These reports indicate that this condition appears to be rare, but the FDA believes consumers should be informed of this potential risk. The FDA is urging HCPs to report any cases of liver and other injuries that may be related to the use of kava-containing dietary supplements by calling the FDA MedWatch program at 1-800-332-1088 or through the Internet at http://www.fda.gov/medwatch.

Prions in Skeletal Muscle of Mice - US

A study published in the 19 March edition of the *Proceedings of the National Academies of the Sciences* found that mouse skeletal muscle can propagate prions and accumulate substantial titers of these pathogens, particularly in the muscles of the hind limb. The authors recommended that new studies be conducted with skeletal muscle of BSE-infected cattle, scrapie-infected sheep, or CWD-infected deer and elk to determine if prions accumulate in a similar manner. Previous studies generally reported low prion titers in muscle tissue. According to a *New York Times* (NYT) report, a leading BSE expert announced that France is testing cattle muscle for the BSE agent. The study is at http://www.pnas.org/cgi/content/full/99/6/3812 and a copy of the NYT report is at http://www.nytimes.com/2002/03/19/science/life/19MICE.html (requires registration).

Radiation Detector - National Laboratories

On 19 March, the Lawrence Livermore and Lawrence Berkley National Laboratories announced the development of a mobile, handheld mechanically cooled germanium radiation spectrometer that detects signature gamma rays from radioactive materials. The product also provides information on the quantity of gamma rays emitted. The

product's likely application will be in homeland security to detect radioactive materials at border crossings, in an airport, or even on a person. Other applications include remote area operation, portal monitoring, cargo inspections, unobtrusive operations, and general applications where high-resolution gamma-ray spectroscopy is required and large-volume radiation detectors using liquid nitrogen are not feasible. The report is at http://www.llnl.gov/llnl/06news/NewsReleases/2002/NR-02-03-06.html.

Smallpox Treatment - Veterans Affairs San Diego Healthcare System (VASDHS)

On 20 March, the University of California, San Diego, announced that a researcher at VASDHS had found that the oral antiviral hexadecyloxypropyl-cidofovir (HDP-CDV) was 100 times more potent than cidofovir in blocking replication of *Variola* virus because it was absorbed more readily. This study was presented at the 15th International Conference on Antiviral Research in Prague along with another study by <u>USAMRIID</u>, which looked at administering HDP-CDV for five days to mice infected with cowpox virus. The study found that when the drug was started within the first four days after exposure, all animals lived. Untreated, the mice died of the infection within eight to nine days after exposure. Tests still need to be conducted to determine the toxicity of HDP-CDV in humans. The clinical course of smallpox in humans is longer than the course of cowpox in mice with a rash appearing about 14 days after infection, and death, if it occurs, is in an additional 14 days. Death is generally expected in up to 30% of cases. The reports are at http://health.ucsd.edu/news/2002/03_11_Smallpox.html and http://www.washingtonpost.com/wp-dyn/articles/A52959-2002Mar19.html.

Yellow Book - CDC

On 18 March, the CDC announced the release of the updated *Health Information for International Travel* (*The Yellow Book*) and a re-designed interactive website. The CDC publishes *The Yellow Book* biennially as a reference for those who advise international travelers of health risks. The interactive website is at http://www.cdc.gov/travel/yb or contact the Public Health Foundation at (toll-free) 1-877-252-1200 or http://bookstore.phf.org to purchase a hard copy of the Yellow Book.

USCENTCOM

Earthquake - Afghanistan

On 25 March, the <u>USGS</u> reported a moderate (6.0) earthquake in the Hindu Kush mountainous region of Afghanistan at 1926 local time. The area is about 100 miles north of Kabul. Approximately seven hours later, an aftershock measuring 5.0 occurred in the same vicinity. This is the second major earthquake to hit Afghanistan this month. On 26 March, the *Washington Post* reported that casualty estimates have ranged from 2,000 up to 4,800, with an estimated 3,000 injured, 30,000 displaced from their homes, and over 90% of the city of Nahrin destroyed. The destruction of infrastructure will likely increase the threat of disease. The report is at http://www.washingtonpost.com/wp-dyn/articles/A18380-2002Mar26.html.

Foot and Mouth Disease (FMD) - Pakistan

On 27 March, ProMED reported a suspected outbreak of FMD in the areas of Nasar Pur, Khushmaqam, and Chamkani in the districts of Nowshera and Peshawar. During March, hundreds of thousands of sacrificial cattle are herded together in Pakistan for a major Muslim festival, which could contribute to the spread of the disease. Concern was expressed about the reported inability to provide ring vaccination and the existence of fake vaccine that is common on the open market. The report is at http://www.promedmail.org/pls/askus/f?p=2400:1001:156303::NO::F2400_P1001_BACK_PAGE,F2400_P1001_PUB_MAIL_ID:1000,17826.

Leishmaniasis - New Treatments

On 21 March, the <u>VOA</u> reported that researchers had announced in the *New England Journal of Medicine* the discovery of an oral treatment for cutaneous leishmaniasis (CL). Over 100 participants took either fluconazole or placebo daily for six weeks in the Al-Ahsaa and Riyadh regions of Saudi Arabia. Three months after the treatment ended, 79% of participants that used fluconazole (63/80) had resolution compared to only 34% of the placebo group (22/65). The relative risk of complete healing was 2.33 (95% C.I. 1.63 to 3.33). Although effective against the most common CL parasite in the Middle East and parts of Africa, fluconazole works poorly on other local species of the organism and on those in South Asia and South America. The report also noted that India would likely become the first government to approve a cancer drug, miltefosine, for visceral leishmaniasis, which is endemic in South Asia. The VOA report is at http://www.voanews.com/article.cfm?objectID=44B4E4EB-A4F2-46D5-A4A74C552613DEB2&Title=Drug%20Speeds%20Healing%20of%20Leishmaniasis%20Lesions and the abstract is at http://content.nejm.org/cgi/content/abstract/346/12/891.

Weapons of Mass Destruction (WMD) - al-Qaida

On 24 March, the <u>VOA</u> reported that between 50 and 60 sites had been identified in Afghanistan where the al-Qaida network had attempted to make WMD. General Franks commented after visiting one of these sites near Kandahar that there were no indications that anything ever got mixed in the right way to create a WMD. The comments came after news reports that a Florida doctor believed he had treated one of the hijackers for cutaneous anthrax three months before the 11 September terrorist attacks. The US Attorney General said the focus of the anthrax investigation remains on domestic suspects as the evidence indicates someone with professional laboratory experience sent the anthrax-laced letters.

USEUCOM

Antibiotic Resistance Report - Europe

In the latest edition of the European Antimicrobial Resistance Surveillance System newsletter, antibiotic resistance patterns were reported for 25 participating countries.

The table below indicates susceptibility patterns for vancomycin-resistant enterococci (VRE), penicillin-resistant Streptococcus pneumoniae (PRSP), and methicillin-resistant Staphylococcus aureus (MRSA).

Rating	VRE	PRSP	MRSA
Highest proportion of non- susceptibility	Greece (23.8%)	Greece (37.5%)	UK (46.1%)
	Israel (15.4%)	Israel (35%)	Israel (44.1%)
		Spain (33.7%)	Greece (38.6%)
Lowest proportion of non- susceptibility	Bulgaria	Austria	Denmark
	Hungary	Bulgaria	Iceland
	Slovenia	Germany	Netherlands
	Spain	Malta	Sweden
	Sweden	Netherlands	
		Sweden	

Cryptosporidiosis - England and Wales

On 21 March, the <u>CDR</u> Weekly reported a substantial decrease in reported cases of human cryptosporidiosis coincident with the <u>FMD</u> epidemic in animals during Spring 2001 in England and Wales. Spring and autumn peaks of cryptosporidiosis are common, with the spring peak generally associated with run off from agricultural lands due to spring rains, livestock farming, and use of animal slurry. The attenuated spring peak of 2001 was observed between weeks 11 and 25. The first case of FMD occurred in week 8 and the last case in week 39 during 2001. The authors contribute the decrease in reported cryptosporidiosis cases, at least partially, to FMD controls that decreased population exposure to livestock and the rural environment. The report is at http://www.phls.co.uk/publications/CDR%20Weekly/PDF%20files/2002/cdr1202.pdf.

Ebola / Viral Hemorrhagic Fever - Gabon and Republic of the Congo

On 22 March, the <u>WHO</u> reported the following update as of 20 March in the ongoing Ebola outbreak in Gabon and the Republic of the Congo. Suspect cases continue to be investigated in Gabon. The outbreak in the Republic of the Congo now involves three remote villages about 40 miles northwest of Kelle, with the majority of cases occurring in Ambomi. International aid organizations are providing medical assistance. The report is at http://www.who.int/disease-outbreak-news/n2002/march/22march2002.html.

Comment	This report 4 March (Gabon) or 15 February (Republic of the Congo) thru 22 March 2002		Totals (11 December 2001 thru 22 March 2002)		
Country	New Confirmed Cases This Report Period	Deaths This Report Period	Confirmed Cases	Deaths	Case Fatality Rate
Gabon	0	1*	60	50	83%
Republic of	11	6	32	19	59%

the Congo					
Totals	11	7	92	69	75%

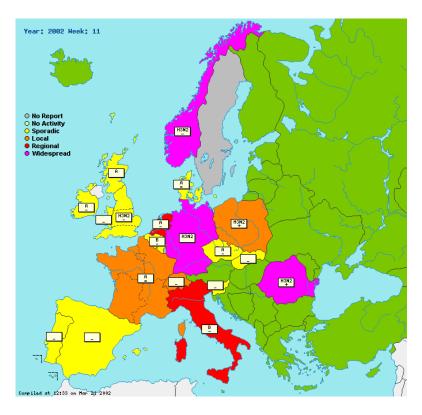
^{*}Previously confirmed case died during this report period

Glycopeptide Resistant Enterococci (GRE) - Europe

On 21 March, the Eurosurveillance Weekly reported on an outbreak of vancomycin resistant enterococci, now more usually termed GRE, in a Dutch hospital, which was initially reported in last week's BMJ. The outbreak affected the renal and intensive care units, which is typical of many other outbreaks. Hospitals and nursing homes local to the Dutch outbreak refused to accept GRE patients because of a reported inability to implement full infection control measures and a fear of GRE infection spreading in their own units. GRE infections often have low virulence but can be difficult to treat as therapeutic options are few and resistance is increasing. Infection (or more often colonization) is endemic in US hospitals, but is more rare in European hospitals. Different from the US, however, GRE has been found in 5% of the general population in some EU countries. The authors attributed this to the use of avoparcin, a glycopeptide used as an animal growth promoter in the livestock industry until a ban was imposed in 1997. Two reports since the ban have indicated that GRE rates in the general population are decreasing in EU countries. The report is at https://www.eurosurv.org/2002/pfp/020321_pfp.htm.

Influenza Surveillance - Europe

For week 11, 11-17 March, the <u>EISS</u> reported widespread influenza activity and increasing or high levels or clinical morbidity in three countries: Germany, Norway, and Romania. Influenza A was the dominant type across Europe. Influenza B was dominant in four countries: Belgium, Italy, Spain, and Switzerland. For week 11, two new cases of influenza B/Victoria/2/87-like viruses were reported: one in a four-year old boy in Norway and one in a seven-year old in Switzerland, bringing the total cases to seven. These results suggest that this virus is rare in Europe. The EISS also reported an additional case of influenza A (H1N2) in Scotland (source unknown). The H1N2 subtype seems to be most common in the 5-18 year age range. The report is at http://www.eiss.org/cgi-files/bulletin_v2.cgi?display=1&code=60&bulletin=60.



Picture Courtesy of EISS at http://www.eiss.org/cgi-files/bulletin_v2.cgi?display=1&code=55&bulletin=55.

Marburg Hemorrhagic Fever - Democratic Republic of the Congo (DRC)

On 22 March, ProMED reported two confirmed cases (one acute and one convalescent) of Marburg hemorrhagic fever in the Watsa area of the DRC. The report is at http://www.promedmail.org/pls/askus/f?p=2400:1001:155194::NO::F2400_P1001_BAC_K_PAGE,F2400_P1001_PUB_MAIL_ID:1010,17800.

Measles Outbreaks - Germany

On 21 March, the Eurosurveillance Weekly reported that since November 2001, as in the previous year, several outbreaks of measles were reported from the states of Bavaria, Lower Saxony, and North Rhine Westphalia. An outbreak that began in an anthroposophical school in November 2001 remains ongoing and has resulted in 910 cases and 37 hospital admissions but no deaths. The vaccination status of 745 of the 910 cases was known and 713 (96%) were unvaccinated. Anthroposophical beliefs discourage vaccinations, holding that natural childhood infections are more important in child development. These outbreaks demonstrate that vaccine coverage in some regions of Germany remains too low for the prevention of measles outbreaks. The report is at http://www.eurosurv.org/2002/pfp/020321_pfp.htm.

Meningococcal Disease (MCD) - Burkina Faso

On 21 March, the <u>WHO</u> reported that as of 20 March, a total of 3,579 cases including 544 deaths (case fatality rate = 15%) had occurred in Burkina Faso. This is an increase of 1,705 cases and 215 deaths since the last report of 8 March. Epidemic threshold has been reached in 12 districts and 13 other districts are on alert for reaching threshold. *Neisseria meningitidis* serogroup W135 has been laboratory confirmed in cases from five districts. Vaccination campaigns were carried out in 2001 and recently in 2002 (no mention of specific serogroups included in the vaccine). A Crisis Committee has been set up by the Ministry of Health to consider the most appropriate strategy to control the outbreak. The report is at http://www.who.int/disease-outbreak-news/n2002/march/21amarch2002.html.

Right to Die Court Case - England

On 22 March, *Reuters* reported that a British woman paralyzed from the neck down won the right to die "peacefully and with dignity" in a landmark case decision. The doctors responsible for the woman's care defended their position by the fact that discontinuation of ventilatory support was unethical. However, the British Medical Association released the following statement: "The court ruling reinforces well-established legal and ethical guidelines that every competent adult has the right to refuse medical treatment, even when this may lead to their death." The report is at http://www.reuters.com/news_article.jhtml?type=search&StoryID=732211.

Spinal Cord in Polish Beef - UK

On 21 March, the UK's Food Standards Agency reported that spinal cord was found in two forequarters, one each from two separate consignments of beef imported from Poland. Bovine spinal cord is most likely to contain <u>BSE</u> infectivity and is therefore classified as specified risk material (SRM). These finds of SRM in imported beef are the 25th and 26th instances since 1 January 2001. They are the first ones to involve carcass beef from a non-<u>EU</u> country. There is no risk to public health as the affected meat has been removed from the food chain. Polish authorities suspended export beef permits for both meat plants involved and are conducting an urgent review of controls in those plants. The report is at http://www.food.gov.uk/news/pressreleases/52581.

Tick-borne Encephalitis (TBE) - Europe

On 25 March, the Oxford Tick Research Group relocated their website, which contains a predictive risk map for TBE in Europe. A German Ministry of Health representative said earlier this month that TBE virus is much more widespread than was previously thought as predicted by this map. The map was generated by matching the recorded TBE distribution to information on environmental conditions remotely sensed by satellite sensors. The predictions matched the observations with 82% accuracy. Areas that were initially identified as false positive by the predictive risk map have since seen new

or reactivated foci, such as in southern Sweden and Norway. The website is at http://users.ox.ac.uk/~zool0048/index2.htm.

USJFCOM

Feline Immunodeficiency Virus (FIV) Vaccine - USDA

On 22 March, the USDA announced that it issued a license for the first FIV vaccine. FIV affects 2-25% of the domestic cat population worldwide and produces symptoms very similar to that of HIV: diarrhea, weight loss, fever, swollen lymph nodes, and chronic infections. FIV occurs more often in cats over five years of age and is transmitted mainly by biting. Outdoor male cats are at greater risk of infection. The report is at http://www.aphis.usda.gov/lpa/press/2002/03/catvac.txt.

First Nationwide Survey of Waterways - US

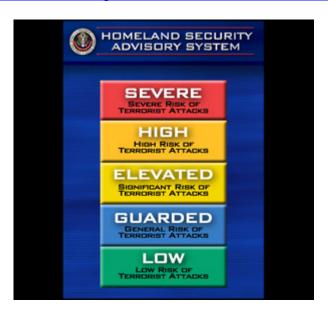
On 13 March, the <u>USGS</u> announced in the journal, *Environmental Science & Technology*, the results of the first-ever study of pharmaceuticals, hormones, and other organic waste water-related chemicals in streams across the nation. The 30-state study conducted during 1999-2000 revealed that very low concentrations of these substances are present in the 139 streams sampled for 95 organic contaminants. Steroids, non-prescription drugs, and a chemical found in insect repellants were the chemical groups most frequently detected. Detergent metabolites, steroids, and plasticizers were generally measured at higher concentrations than the other chemical groups, but concentrations measured in this study generally were very low (less than 1 ppb). Of the 95 chemicals examined, 81 do not have drinking-water standards or health advisories. Measured concentrations of compounds that do have standards or criteria rarely exceeded established limits. Limited information is available on the potential health effects to human and aquatic ecosystems from low-level, long-term exposure or exposure to combinations of these chemicals. The report is at http://www.usgs.gov/public/press/public_affairs/press_releases/pr1569m.html.

Health Privacy Regulations - **DHHS** Proposed Changes

On 21 March, the DHHS announced proposed changes to federal health privacy regulations that were due to take effect 14 April 2003-04. The proposed changes were published in the Federal Register on 27 March, with a 30-day comment period. The DHHS will consider comments prior to formulating a final rule. The federal privacy regulations guarantee patients full access to their medical records, give them more control over how their personal information is used and disclosed, and provide a clear avenue of recourse if their medical privacy is compromised. The proposed modifications are at http://www.hhs.gov/news/press/2002pres/20020321.html.

Homeland Security Advisory System - Office of Homeland Security

Earlier this month, the Office of Homeland Security unveiled the Homeland Security Advisory System as part of a series of initiatives to improve coordination and communication among all levels of government and the American public in the fight against terrorism. The visual tool is provided below and details of each category are available at http://www.whitehouse.gov/news/releases/2002/03/20020312-1.html.



Irradiation Phytosanitary Treatments - Fruits and Vegetables

On 15 March, the <u>USDA</u> published additional changes to a proposed rule that will allow irradiation of fruits and vegetables imported into the US. Irradiation will allow an alternative to current control methods, such as fumigation and cold/heat treatments. The regulations are designed to control introduction of fruit flies species and the mango seed weevil. The proposed rule will also require the use of irradiation indicators on packaging and require additional inspection and monitoring of foreign irradiation facilities. The report is at http://www.aphis.usda.gov/lpa/press/2002/03/phytosan.txt.

Lead Smelter Lawsuit - Missouri

On 22 March, MSNBC reported that Doe Run Company, the nation's largest lead smelter, agreed to buy 160 Herculaneum homes to protect the community's children from overexposure to lead. The settlement came after a report by the Missouri Department of Health and Senior Services that found 28% (33/118) of children under the age of 72 months who were tested in Herculaneum had blood lead levels (BLLs) high enough to cause adverse health effects. BLLs ranged from non-detectable to 31 μ g/dL. Of 655 adults tested, two had BLLs of 25 μ g/dL or higher. The men ranged from 10 to 31 μ g/dL, and women ranged from 10 to 55 μ g/dL. The Missouri report is at http://www.health.state.mo.us/NewsReleases/hercul.htm and the MSNBC report is at http://www.msnbc.com/news/728136.asp?cp1=1.

Potassium Iodide Distribution - Maryland

On 23 March, the *Washington Post* reported that Maryland health officials are scheduled to meet with five county officials to develop a distribution plan for delivery of potassium iodide tablets to about 80,000 people who live within 10 miles of a nuclear power plant. The potassium iodide tablets must be taken within a few hours of a nuclear disaster to protect the thyroid, which complicates any distribution efforts. Maryland is one of nine states that have thus far accepted the NRC's offer to provide the pills. Other states, such as Virginia, advocate working out distribution plans prior to requesting any medication. The report is at http://www.washingtonpost.com/wp-dyn/articles/A5444-2002Mar22.html.

Respirator Survey - NIOSH

On 22 March, the NIOSH released the results of a new survey of employers that was coordinated with the Bureau of Labor Statistics. The findings of the survey will likely provide data for future focus and/or policy. Highlights of the findings include: (1) dust masks were the most commonly used respirator (71%), (2) paint vapors and dust were the most common agents that air-purifying respirators were worn to protect against, while paints vapors and solvents were the most common agents air-supplied respirators were worn to protect against, (3) only 59% of establishments trained employees to understand the use and limitations of the respirators they wear, and (4) 57% of the establishments used material safety data sheets to determine the appropriate type of respirator. The report is at http://www.cdc.gov/niosh/survey-resp.html.

Safety of Emergency Responders in Terrorist Events - NIOSH Study

On 21 March, the NIOSH announced the release of a report that offers guidance and recommendations on the safety of emergency responders during terrorist events. Recommendations in the report included: (1) development of guidelines for selection of and enforcement in the use of appropriate PPE during long-duration disaster response and bioterrorism response, (2) initiate planning to effectively outfit all responders at sites of large-scale incidents with appropriate PPE, (3) standardization and inter-operability of protective equipment among emergency responder organizations, and (4) identification of ways to provide useful, real-time safety and health information to responders at incident sites, and to ensure appropriate training on the use of PPE. The report is at http://www.cdc.gov/niosh/emrandrpt.html.

Tuberculosis (TB) Cases - US

On 22 March, the <u>VOA</u> reported that the <u>CDC</u> had announced that cases of TB in the US fell to an all-time low last year at just under 16,000 cases. Although this is the ninth year in a row that cases have dropped, experts believe the decline is leveling off. The report came just prior to the <u>WHO</u> kickoff of a one-year campaign to stop the spread of TB, which kills two million people annually. The theme "Stop TB, Fight Poverty"

supports the WHO's position that tackling this disease will lead to greater global prosperity. TB will likely be highlighted in media reports during the coming year.

USPACOM

Mass Arsenicosis - Bangladesh

On 22 March, the WHO reported that up to 77 million, more than half the population of Bangladesh, are exposed to excessive levels of arsenic in drinking water, some areas frequently exceeding 50 parts per billion (ppb). Since 1993, the WHO's guideline for the maximum amount of arsenic in drinking water has been 10 parts per billion (ppb). The previous guideline was 50 ppb. A new guideline is anticipated in 2003. The problem stems from 7-11 million deep tube wells that were dug throughout Bangladesh by health and development experts three decades ago to successfully reduce water-borne diseases. Arsenicosis can cause a variety of cancers (skin, bladder, kidney, and lung), diseases of the blood vessels of the legs and feet, and possibly diabetes, high blood pressure, and reproductive disorders. According to the report arsenicosis generally takes from seven to 10 years or more to be recognized. Some NGOs in the area are using the Stevens Technology for Arsenic Removal (STAR) for safe drinking water and to "treat" poisonings. The report is at http://www.who.int/inf-fs/en/feature206.html.

Echovirus 11 Epidemic - Japan

The Japanese Infectious Agents Surveillance Report for March 2002 reported an epidemic of respiratory disease due to echovirus 11 occurred in Kagawa from late November 2001 through January 2002. The report is at http://idsc.nih.go.jp/iasr/23/265/inx265.html.

Tuberculosis (TB) - India

On 22 March, the <u>CDC</u> reported that about two million people develop TB annually in India, accounting for 1/4 of the world's new TB cases. TB causes more deaths per year in India (421,000) than malaria, hepatitis, meningitis, nutritional deficiencies, <u>STDs</u>, leprosy, and tropical diseases (e.g., dengue fever, trypanosomiasis, schistosomiasis, leishmaniasis, lymphatic filariasis, and onchocerciasis) combined (258,000). The TB control program in India, already one of the largest public health programs in the world, continues to expand, with plans to cover 80% of the country by 2004 and 100% by 2005. The increasing prevalence of <u>HIV</u> in India represents a serious threat to TB control efforts. Progress toward TB control in India is critical to global TB control and has direct implications for TB elimination efforts in the US because nearly 1/2 of all TB cases in the US occur among foreign-born persons, a substantial proportion of whom (nearly 10%) are immigrants from India. With immigration from India to the US rising, India's proportionate contribution to US domestic TB will probably increase. The report is at http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5111a2.htm.

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Dengue Fever - Brazil

On 21 March, the WHO reported that as of 19 March, 104,469 cases of dengue fever with 40 deaths have occurred in the Rio de Janeiro State. This is an increase of over 29,000 cases and 15 deaths since the last report on 4 March. The City of Rio de Janeiro has reported a total of 49,149 cases of dengue fever, 435 cases of dengue hemorrhagic fever, and 29 deaths. This dengue outbreak is the largest in the state's history. Authorities have implemented an aggressive, ongoing campaign to control the epidemic through social mobilization activities to involve the community in eliminating mosquito-breeding sites and in taking measures to avoid mosquito bites. The report is at http://www.who.int/disease-outbreak/news/n2002/march/21march2002.html.

Venezuelan Equine Encephalitis (VEE) - Honduras

On 19 March, a posting in ProMED reported that VEE was detected in the departments of Copan, Ocotepeque, El Paraiso, and Comayagua in Honduras. The Department of Agriculture reportedly lacks the resources to establish a sanitary security zone, but has administered 16,000 vaccinations to susceptible animals in the affected areas. The Health Department has issued an epidemiological alert to detect any person affected by this disease. Horses are generally considered a sentinel species for increased disease risk in humans. The report is at

http://www.promedmail.org/pls/askus/f?p=2400:1001:154948::NO::F2400_P1001_BAC K PAGE,F2400_P1001_PUB_MAIL_ID:1010,17776.

Please contact the below-listed POC for suggested improvements and/or comments regarding this report. This report is also available on the USACHPPM website at http://chppm-www.apgea.army.mil/Hioupdate/.

POC: Barbara E. Davis, DVM, MPH/MCHB-CS-OHD/584-7663 mailto:Barbara.Davis1@APG.amedd.army.mil

ACRONYMNS

ACIP - Advisory Committee on Immunization Practices

AFMIC - Armed Forces Medical Intelligence Center

AFPS - American Forces Press Service

AIDS - Acquired Immunodeficiency Syndrome

APHIS – Animal and Plant Health Inspection Service

BMJ - British Medical Journal

BSE – Bovine Spongiform Encephalopathy

CBRN - Chemical, Biological, Radiological, and Nuclear

CDC - Centers for Disease Control and Prevention

CDR – Communicable Disease Report (England)

CHCS - Composite Health Care System

CIA - Central Intelligence Agency

CME - Continuing Medical Education

CONUS - Continental United States

CWD - Chronic Wasting Disease

DARPA – Defense Advanced Research Projects Agency, the central research and development organization for the Department of Defense

DHHS – Department of Health and Human Services

DNBI - Disease Non-Battle Injury

DoD - Department of Defense

DOE - Department of Energy

DOS - Department of State

DOT – Department of Transportation

ECG - Electrocardiogram

EISS - European Influenza Surveillance Scheme

EPA – Environmental Protection Agency

ESSENCE - Electronic Surveillance System for the Early Notification of Community-Based Epidemics

EU - European Union

FAO - Food and Agriculture Organization (of the United Nations)

FBI – Federal Bureau of Investigation

FCC - Federal Communications Commission

FDA - Food and Drug Administration

FEMA - Federal Emergency Management Agency

FMD - Foot and Mouth Disease

FSIS - Food Safety Inspection Service

FTC - Federal Trade Commission

GAO – US General Accounting Office

GEIS – Global Emerging Infections System

HACCP - Hazard Analysis Critical Control Points

HIV/AIDS - Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome

IAEA – International Atomic Energy Agency

ICBM - Intercontinental Ballistic Missile

ICRC - International Committee of the Red Cross

IDP – Internally Displaced Persons

ILI – Influenza-Like Illness

IND - Investigational New Drug

IRCS – International Red Cross Society

JAMA - Journal of the American Medical Association

JTF - Joint Task Force

K-FOR - Kosovo Forces, a NATO-led international peace enforcement force that entered Kosovo on 12 June 99

under a UN mandate. http://www.kforonline.com/

MMR - Measles, Mumps, and Rubella

MRSA - Methicillin Resistance Staphylococcus aureus

NAS - National Academy of Sciences

NATO - North Atlantic Treaty Organization

NCI - National Cancer Institute

NEJM - New England Journal of Medicine

NGO - Non-governmental Organization

NICHD - National Institute of Child Health and Human Development

NIH – National Institutes of Health

NIOSH - National Institute for Occupational Safety and Health

NPIC - National Pesticide Information Center

NRC - Nuclear Regulatory Commission

OEF - Operation Enduring Freedom

OIE - World Organisation [sic] for Animal Health

OSHA - Occupational Safety and Health Administration

PA – Protective Antigen

PAHO - Pan American Health Organization: http://www.paho.org

PCBs - Polychlorinated Biphenyls; more info is at EPA: http://www.epa.gov/opptintr/pcb/

PCR – Polymerase Chain Reaction

PHLS - Public Health Laboratory Service

PHS - Public Health Service

PPE - Personal Protective Equipment

RSV - Respiratory Syncytial Virus

STDs - Sexually Transmitted Diseases

TB - Tuberculosis

UK - United Kingdom - England, Northern Ireland, Scotland, and Wales

UN - United Nations

UNHCR - United Nations High Commissioner for Refugees

USAID - United States Agency for International Development

USAMRIID - United States Army Medical Research Institute for Infectious Diseases

USDA – United States Department of Agriculture

USGS - United States Geological Survey

USPS - United States Postal Service

USPSTF - United States Preventive Services Task Force

VA - Veteran's Administration

vCJD - variant Creutzfeldt-Jakob Disease

VOA - Voice of America, an international multimedia broadcasting service funded by the US Government

WHO - World Health Organization

WIA - Wounded in Action

WMD - Weapons of Mass Destruction