

Louisiana



REPORTED MORBIDITY
JUNE, 1977

MONTHLY MORBIDITY REPORT

Provisional Statistics

from the

OFFICE OF PUBLIC HEALTH STATISTICS

DEPARTMENT OF HEALTH
AND HUMAN RESOURCES
OFFICE OF HEALTH SERVICES
AND ENVIRONMENTAL QUALITY

AUG 11 1977

SYPHILIS SCREENING FOR EMPLOYMENT

The Bureau of Laboratories will no longer perform syphilis tests on blood specimens collected for the purpose of screening employees. The Bureau will continue to confirm reactive results found in other laboratories, and to accept specimens from high risk individuals. Employees per se cannot be considered high risk individuals. Very few cases of syphilis have been discovered through employment screening in recent years in spite of the large number of specimens submitted. Many administrators of schools, food estab-

lishments, hospitals, nursing homes and elsewhere have the mistaken impression that such testing is required. Actually, we can discover no statewide regulations that would require employees to have serologic tests for syphilis.

Since the processing of this large volume of negative specimens is costly to the State and the taking of blood seems an imposition on employees, we feel it is best to curtail such screening.

RUBEOLA MORBIDITY IN LOUISIANA

- 1976 -

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During 1976, the nation experienced a dramatic increase in rubeola morbidity. Reported cases for 1976 were 65% higher than in 1975. The 39,585 cases reported nationally in 1976, although below the 1971 epidemic year, far exceeded the 1971-75 five year median of 26,718 cases.

This resurgence of rubeola activity also occurred in Louisiana. The 315 cases reported in the state during 1976 represented the highest total since 1971.

The metropolitan New Orleans area was most heavily affected by the disease. Nearly eighty percent of the reported cases resided in Orleans and surrounding parishes. While measles outbreak were also reported in Assumption, St. Mary and St. Martin parishes, the remainder of the state reported only sporadic cases.

Orleans Parish was unique in that 94% of its reported cases occurred among preschool children, a large percentage of whom were less than two years of age. The Orleans cases were predominantly black, and largely Charity Hospital patients. Just prior to the start of the red measles outbreak in Orleans Parish, influenza reached epidemic levels, filling the pediatric emergency room at Charity Hospital in New Orleans. Apparently, a large number of exposures to red measles occurred at that facility among unimmunized preschoolers brought there for treatment for influenza.

This pattern was not repeated in the other affected parishes. Outbreaks among school age children accounted for the majority of cases outside of the city. (Table 1).

Table 1
RUBEOLA MORBIDITY BY AGE OF CASE LOUISIANA,
CALENDAR YEAR 1976

Area	Total	< 12 months	12-18 months	19 months - 5 years	≥ 6 years	Unknown
Orleans Parish	140 (100%)	35 (25%)	36 (26%)	55 (39%)	8 (6%)	6 (4%)
Parishes other than Orleans	175 (100%)	10 (6%)	17 (10%)	47 (27%)	100 (57%)	1 (0.6%)
State-wide	315 (100%)	45 (14%)	53 (17%)	102 (32%)	108 (34%)	7 (2%)

Confirmed immunization status was available on 257 of the 315 reported cases. (Table II).

With the exception of the Orleans Parish outbreak, morbidity patterns in Louisiana did not vary greatly from those seen in outbreaks in other states. An upward shift in age distribution of cases was noted both in Louisiana and the nation as a whole. Vaccine failures

among children who were immunized prior to 12 months of age, particularly if the vaccine was administered with ISG or MIG, contributed significantly to the rise in cases among adolescents. To assure protection, revaccination with live measles vaccine is recommended by both the American Academy of Pediatrics and the Public Health Service for children immunized prior to 12 months of age.

Table II
IMMUNIZATION STATUS OF RUBEOLA CASES IN LOUISIANA
CALENDAR YEAR 1976*

	Total	Unvaccinated	Vaccinated			
			Age Vaccine Received			Age Unk
			< 12 mos.	12 mos.	≥ 13 mos.	
*Number of cases with known Histories	257	182	18	8	21	28
Percentage distribution	100.0%	70.8%	7.0%	3.1%	8.2%	10.9%

*Excluded were 58 cases whose immunization status could not be confirmed.

REVISED IMMUNIZATION SCHEDULE

The Office of Health Services and Environmental Quality held a meeting on June 27, 1977 of its special committee of consultants on immunization policies and procedures to consider revisions in the schedule of routine childhood immunizations. The major impetus for the meeting was the recent decision by the American Academy of Pediatrics and the Public Health Service's Advisory Committee on Immunization Practices to change the recommended age of routine measles immunization from twelve to fifteen months of age. The Committee voted to accept that recommendation, as well as to allow the diphtheria-tetanus-pertussis (DTP) and polio (TOPV) boosters previously scheduled at 18 months of age to be given along with the measles-mumps-rubella (MMR) immunizations at the age of 15 months. The new recommendations are presented below:

Table 1

**RECOMMENDED SCHEDULE FOR IMMUNIZATION
OF NORMAL INFANTS AND CHILDREN**

AGE	IMMUNIZATION
2 months	DTP, TOPV
4 months	DTP, TOPV
6 months	DTP, TOPV
15 months	DTP, ¹ TOPV, ¹ MMR ²
4-6 years	DTP, ³ TOPV
14-16 years, and every ten years thereafter	Td ⁴

¹ Give DTP and/or TOPV only if a minimum of 6 months have lapsed since 3rd dose, otherwise wait until 6 months have lapsed. The MMR, however, should not be delayed.

² Give MMR anytime child comes to clinic after first birthday, but no earlier than 12 months of age. Give 2nd injection to any child vaccinated before 12 months of age. Any child having a history of tuberculosis exposure should be tuberculin skin tested before immunization with measles vaccine. The vaccination should be withheld from a child who is a tuberculin reactor until he begins appropriate therapy for tuberculosis. If tuberculin testing is to be done on a child not having a history of tuberculosis exposure, it may be given at the same time as measles vaccine.

³ If child has reached the sixth birthday, he should be given Td instead of DTP.

⁴ A booster dose may be given earlier (i.e., 10-14 years of age) in situations such as organized school programs designed to offer boosters at specified grade levels.

Table 2

**IMMUNIZATIONS FOR CHILDREN
NOT IMMUNIZED IN INFANCY**

VISIT	15 MONTHS* THROUGH 5 YEARS	6 YEARS AND OVER
First visit	DTP, TOPV, MMR	Td, TOPV, MMR
2 months later	DTP, TOPV	Td, TOPV
2 months later	DTP, TOPV	
6-12 months later	DTP, TOPV	Td, TOPV
Every 10 years thereafter	Td	Td

* From 12 months if child comes to clinic before 15 months of age.

ABBREVIATIONS:

DTP - Diphtheria and Tetanus toxoids combined with Pertussis Vaccine
 TOPV - Trivalent Oral Polio Vaccine
 Td - Tetanus and Diphtheria toxoids, Adult type
 MMR - Measles, Mumps, Rubella combined

SELECTED REPORTABLE DISEASES

(By Place of Residence)

STATE AND PARISH TOTALS	ASEPTIC MENINGITIS	DIPH THERIA	ENCEPHALITIS	ENCEPHALITIS POST INFECTIONOUS	HEPATITIS A AND UNSPECIFIED	HEPATITIS B	TUBERCULOSIS, PULMONARY	MENINGOCOCCAL INFECTIONS	PERTUSSIS	RABIES IN ANIMALS	RUBELLA*	SEVERE UNDERNUTRITION	SHIGELLOSIS	TYPHOID FEVER	OTHER SALMONELLOSIS	TETANUS	MEASLES	GONORRHEA	SYPHILIS, PRIMARY AND SECONDARY
Reported Morbidity June, 1977																			
TOTAL TO DATE 1976	27	0	7	4	242	71	282	29	2	2	85	7	33	2	42	2	177	9706	316
TOTAL TO DATE 1977	5	0	4	0	298	64	288	68	4	6	26	4	39	0	44	1	74	8745	324
TOTAL THIS MONTH	0	0	0	0	44	14	40	9	2	1	3	0	12	0	12	0	3	1237	62
ACADIA																		8	
ALLEN																		2	
ASCENSION					1													2	
ASSUMPTION																			
AVOYELLES							2											8	1
BEAUREGARD																		1	
BIENVILLE														1					
BOSSIER																		18	
CADDO					5	3	4			1					1		1	137	4
CALCASIEU					2	1	1	1			3						1	86	
CALDWELL																			
CAMERON																		2	
CATAHOULA																		1	
CLAIBORNE								1										6	
CONCORDIA																		4	
DESOTO																		6	
EAST BATON ROUGE					1	1	1						5		2			114	16
EAST CARROLL																		4	
EAST FELICIANA																		1	
EVANGELINE																			
FRANKLIN																		9	2
GRANT																		1	2
IBERIA							1											13	1
IBERVILLE																		12	
JACKSON							1												
JEFFERSON					8	2	2						1		1			31	2
JEFFERSON DAVIS							1											7	
LAFAYETTE					1													33	
LAFOURCHE					3	1	1											10	
LASALLE																		1	
LINCOLN																		21	
LIVINGSTON																		1	
MADISON					9													13	
MOREHOUSE																		5	
NATCHITOCHES					1										1			5	1
ORLEANS					4	6	14	2					6		2			368	22
OUACHITA					1		3											28	2
PLAQUEMINES								1									1	1	
POINTE COUPEE																		1	
RAPIDES							3											104	2
RED RIVER																		2	
RICHLAND																		12	1
SABINE							1												
ST. BERNARD					1		1											2	
ST. CHARLES															1			3	1
ST. HELENA																			
ST. JAMES															1			3	3
ST. JOHN																			
ST. JOHN																			
ST. LANDRY								1										3	
ST. MARTIN															1			7	
ST. MARY					1													5	
ST. TAMMANY					1		1								1			22	
TANGIPAHOA								1										32	
TENSAS							1												
TERREBONNE					4													4	
UNION																		3	
VERMILION																		2	
VERNON								2	2									29	
WASHINGTON																		18	
WEBSTER							2											2	1
WEST BATON ROUGE																		8	1
WEST CARROLL					1													1	
WEST FELICIANA																		14	
WINN																		1	
OUT OF STATE																			

Includes Rubella, Congenital Syndrome
 From January 1, through June 30, 1977, the following cases were
 also reported: 1 - Brucellosis; 4 - Leptospirosis; 1 - Malaria
 (contracted outside the U.S.A.).