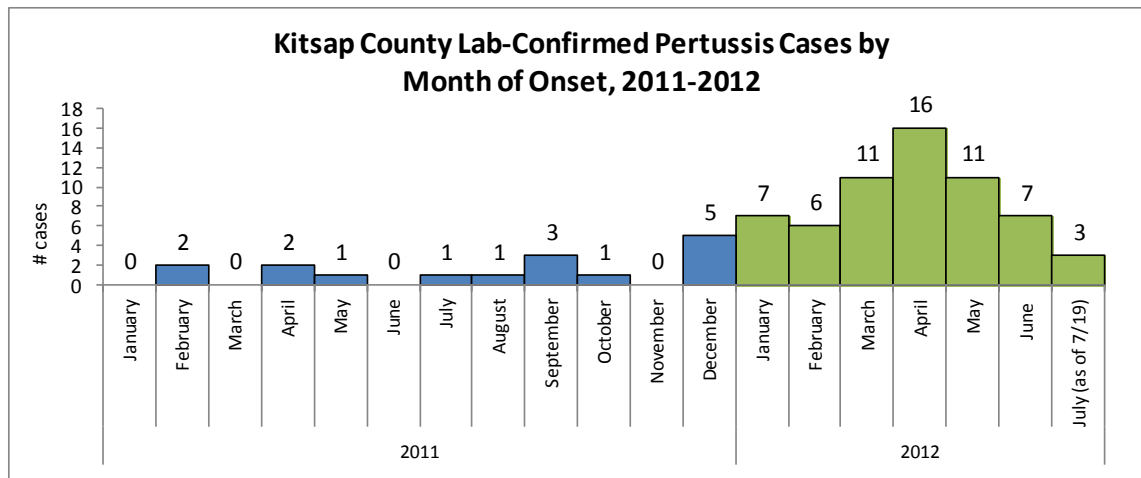


July 23, 2012

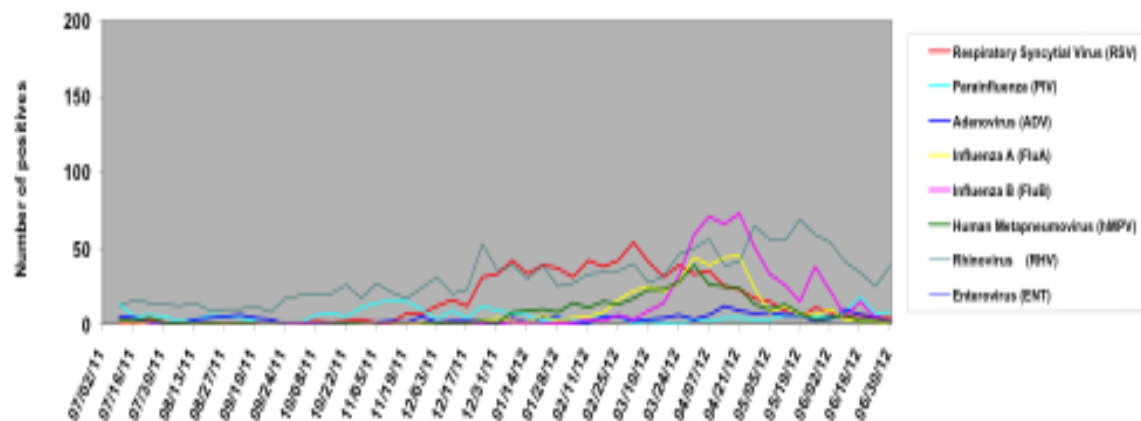
This is a quick update regarding our pertussis cases in Kitsap County as well as recent viral activity that may help you identify current cases you are seeing in your practice. Our pertussis activity is slowing down. See Figure 1. This is due to great work by our medical community and timely interventions with immunizations as well as case identification, isolation, and treatment. Keep up the good work.

Figure 1.



We are still seeing viral respiratory activity in Kitsap County into the summer months. Influenza is gone but I have included the University of Washington Virology Lab viral isolates graphic (Figure 2) which demonstrates the greatest number of isolates belonging to rhinoviruses and parainfluenza viruses. The most recent numbers (7/14/12) only demonstrate 10-13 isolates of each of these viruses per week. This likely represents what we are seeing in practice with upper respiratory illness composed of rhinorrhea, nasal congestion, sore throat and cough with or without fever.

**2011 - 2012 Respiratory & Enteric Viruses
Seattle, Washington**



There have been several non-confirmed reports about enterovirus-like activity composed of fever, vomiting, diarrhea, and skin lesions on the hands, feet, and in the mouth. I was alerted to a patient who returned from overseas travel with what appears clinically to be a Hand Foot Mouth like presentation. I am waiting on viral laboratory testing to confirm it. I have also seen enterovirus-like activity in a few pediatric patients in practice. As a reminder, enteroviruses are a group of viruses that includes polioviruses, coxsackieviruses, echoviruses, and enteroviruses.

Some Background information on enteroviruses:

- Coxsackievirus A16 is the most common cause of hand, foot, and mouth disease in the United States but other coxsackieviruses have been associated with the illness.
- Enterovirus 71 has also been associated with hand, foot, and mouth disease.
- Hand, foot, and mouth disease is a common viral illness that usually affects infants and children younger than 5 years old. However, it can sometimes occur in adults. Symptoms of hand, foot, and mouth disease include fever, blister-like sores in the mouth (herpangina), and a skin rash caused by those enteroviruses listed above. It rarely causes meningitis or encephalitis or serious complications.

Prevention recommendations:

- Wash hands often with soap and water, especially after changing diapers and using the toilet.
- Disinfect dirty surfaces and soiled items, including toys. First wash the items with soap and water; then disinfect them with a solution of chlorine bleach (made by mixing 1 tablespoon of bleach and 4 cups of water).
- Avoid close contact such as kissing, hugging, or sharing eating utensils or cups with people with hand, foot, and mouth disease.

If you have a patient that meets this description, please contact us at 360-337-5239 and we can help facilitate viral testing. Ideally, we would like 1-3 specimens to help clarify the cause of the enterovirus-like activity.

Thanks and have a great summer!

Scott Lindquist MD MPH