

Epi Monthly Report

Office of Epidemiology and Disease Control



Miami-Dade County
HEALTH DEPARTMENT

Foodborne Illness Outbreak at a Family Birthday Party

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Background

On November 27, 2001, the Office of Epidemiology and Disease Control (OEDC) of the Miami-Dade County Health Department (MDCHD) received a call from a resident of Miami-Dade asking for help in finding the cause of an outbreak at a private home after a dinner party attended by forty-two persons on November 25, 2001. An investigation was initiated.

Methods

Epidemiologic Methods

A case was defined as a person who attended the party, ate foods and drank beverages, and developed symptoms of diarrhea and or abdominal cramps within 24 hours. Attendees were asked to fill a custom made questionnaire at their homes, and fax it to the OEDC. Epi Info 2000 software was used for data entry and statistical analysis.

Laboratory Testing

Samples of left over foods and bottled water provided by the hostess were sent for testing to the Department of Health (Jacksonville and Miami

branches) Bureau of Laboratories.

Results

Epidemiologic Results

Thirty-five (83%) of the forty-two attendees responded and returned the questionnaire. Seventy-one percent of the respondents (25 out of 35) reported symptoms. The median age among respondents was 45 years old, ranged from 2 to 75 years old. Forty-three percent of the respondents (15 out of 35) were female. The incubation period of this illness had a range of 7 to 16 hours (median of 11 hours). Most of the cases occurred between 10 and 12 hours (Figure 1). Only one person was hospitalized. None of the other respondents required medical attention. Table 1 shows the frequency of symptoms among respondents.

Table 1 Frequency of Symptoms, Family Birthday Party, Miami-Dade County, November, 2001 (N = 25)

Symptom	Cases	%
Diarrhea	25	100%
Abdominal cramps	19	76%
Nausea	2	8%



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Figure 1 Number of reported ill cases by time of onset, family birthday party, Miami-Dade County, November, 2001

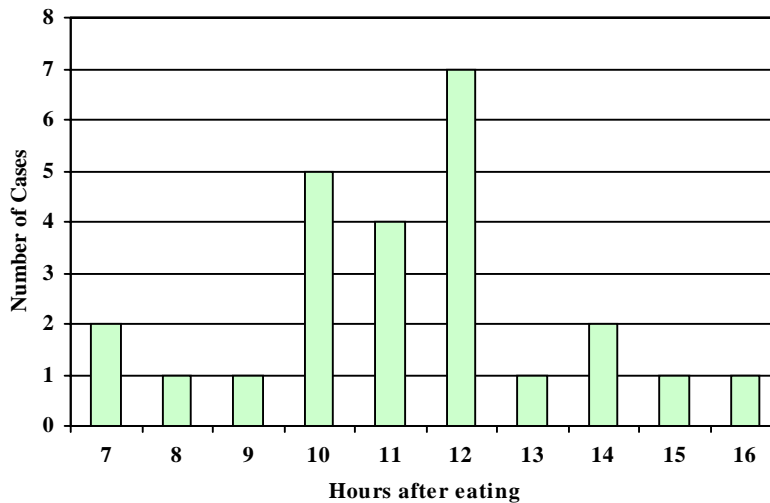


Table 2 Univariate Analysis of Risk Factors, Family Birthday Party, Miami-Dade County, November, 2001

Food Items	ILL		NOT ILL		P Value
	No.	%	No.	%	
Black beans	24	96.0	7	70.0	0.06
Cake	22	88.0	9	90.0	0.87
BBQ Chicken	23	92.0	8	80.0	0.31
Bread	18	72.0	5	50.0	0.21
Beer	12	48.0	4	40.0	0.67
Chips/ salties	9	36.0	5	50.0	0.45
Cold cuts	5	20.0	5	50.0	0.11
White rice	24	96.0	8	80.0	0.19
Pork leg	20	80.0	5	50.0	0.11
Fruit salad	19	76.0	4	40.0	0.06
Green salad	19	76.0	6	60.0	0.42
Water	16	64.0	5	50.0	0.47
Sodas	13	52.0	2	20.0	0.13
Wine	3	12.0	2	20.0	0.61
Ice	13	52.0	3	30.0	0.29

There was no statistically significant association between illness and a particular meal or water (Table 2). The black beans and fruit salad were the most likely vehicles for the illness ($p=0.06$).

Laboratory Results

No contaminating pathogens were isolated from the samples of left over foods (cold cuts, green salad, fruit salad, chicken, cake) that were sent to the De-

partment of Health's Central Laboratory in Jacksonville. The bottled water that was sent to the Miami Regional Laboratory was negative for coliforms.

Conclusions and Recommendations

No pathogen was found for this outbreak of common exposure to foods. Black beans and fruit salad were the most likely vehicles for this illness. Clinical specimens were not available. Only one patient received medical attention. Our offer to test the stools of some of the ill respondents was declined by them. A sample of the black beans was not available for testing, and the fruit salad tested negative for the suspected pathogens. Preparation of these foods was made partially or fully in the home while some were bought. The likely food items were prepared fully at the home. The source of the contamination remains unknown. In preparation of foods in private homes our recommendations include:

1. Frequent hand washing between different food preparations (raw vs. cooked)
2. Cleaning of contact surfaces after handling raw products.
3. Maintain holding temperatures (hot and cold).



Influenza Virus Surveillance Summary Update

Carina Blackmore, MS, Vet. Med., PhD.

[The following article appeared in EPI UPDATE, a weekly publication by the Bureau of Epidemiology, Florida Department of Health (For January 24, 2002)]

Week ending January 12, 2002-Week 1

National report: During week 2 (January 6-12, 2002), 96 (8.9%) of 1076 specimens tested by the World Health Organization (WHO) and National Respiratory and Enteric Virus Surveillance System (NREVSS) collaborating laboratories across the United States were positive for influenza. Since September 30, a total of 22,888 specimens for influenza viruses have been tested and 904 (3.9%) specimens from 41 states were positive. Of the 904 isolates identified, 885 (98%) were influenza A viruses and 19 (2%) were influenza B viruses. Three hundred and fifty-one viruses were subtyped, 345 (98%) were influenza A (H3N2) and 6 were influenza A (H1N1) viruses. Three hundred and sixty-five (40%) of the 904 influenza viruses isolated nationwide were from Alaska (n=153, 17%) and Hawaii (n=212, 23%). The proportion of patient visits to sentinel physicians for influenza-like illness (ILI) overall was 1.6%, which is below the national baseline of 1.9%. The proportion of deaths attributed to pneumonia and influenza as reported by the vital statistics offices of 122 U.S. cities was 7.0% during week 2. This percentage is below the epidemic threshold of 8.1% for this time. Influenza activity was reported as widespread in Colorado, Pennsylvania and Utah, regional in Alaska, Connecticut, Louisiana, Maryland, Massachusetts, Nebraska, New York, Tennessee, Texas, Vermont, Virginia and Washington this week. Sporadic activity was reported from 33 states, including Florida.

Florida: Influenza activity, calculated based on the proportion of patients with influenza-like illness (ILI) seeking care by physicians participating in the Florida Sentinel Physicians Surveillance Network, continues to be below 2% (1.5%) this week. Influenza-like illness activity was detected in 15 of 22 participating counties from Escambia to Monroe.

Higher flu activity than expected for this time of year (>2%) was reported by physicians in Alachua, Brevard, Escambia, Monroe, Palm Beach, Polk and Seminole Counties. Seventeen cases of influenza A were laboratory confirmed this week. Influenza A (H2N3) was confirmed from Broward (1) Duval (4), Indian River (1), Leon (6), Levy (1), Marion (1), Monroe (1) and Pinellas (1) Counties and our first influenza A (H1N1) isolate this season was recovered from a patient in Duval County. Between September 4 and January 24, influenza A (H3N2) was isolated from 34 patients residing in Broward, Collier, Duval, Hillsborough, Indian River, Leon, Levy, Marion, Monroe, Palm Beach, Pinellas, Polk, and St John's Counties and infections with influenza A of unknown subtype, was diagnosed in patients in Gadsden, Martin, Pinellas, Palm Beach and Hillsborough County. Influenza B was isolated from 2 patients in Hillsborough County. In addition, positive rapid antigen tests were reported from Duval County (1), Hillsborough (11), Palm Beach (1), Marion (8), Miami-Dade (13) Okaloosa (2) and Volusia (6) Counties.



Monthly Report

Selected Reportable Diseases/Conditions in Miami-Dade County, December 2001

Diseases/Conditions	Reported Cases	2001	2000	1999	1998
	this Month	Year to Date	Year to Date	Year to Date	Year to Date
AIDS *Provisional	72	1242	1319	1348	1598
Campylobacteriosis	15	126	159	142	111
Chancroid	0	0	0	0	2
<i>Chlamydia trachomatis</i>	351	3382	3417	3953	3596
Ciguatera Poisoning	0	6	2	0	0
Cryptosporidiosis	0	13	33	23	18
Cyclosporiasis	0	0	0	2	1
Diphtheria	0	0	0	0	0
<i>E. coli</i> , O157:H7	0	2	6	5	9
<i>E. coli</i> , Other	0	1	2	0	2
Encephalitis	0	0	0	0	2
Giardiasis, Acute	29	276	235	92	111
Gonorrhea	172	1757	2626	2639	2626
Granuloma Inguinale	0	0	0	0	0
<i>Haemophilus influenzae</i> B (invasive)	0	1	4	1	1
Hepatitis A	19	191	100	95	118
Hepatitis B	16	81	61	40	69
HIV *Provisional	168	1668	1497	1605	1757
Lead Poisoning	47***	286***	401	Not available	Not available
Legionnaire's Disease	0	3	0	0	1
Leptospirosis	0	0	0	1	0
Lyme disease	1	7	8	2	1
Lymphogranuloma Venereum	0	0	0	0	2
Malaria	5	23	25	18	33
Measles	0	0	0	0	0
Meningitis (except aseptic)	8	26	26	33	17
Meningococcal Disease	5	20	31	29	13
Mumps	0	0	2	4	0
Pertussis	1	3	7	14	14
Polio	0	0	0	0	0
Rabies, Animal	0	0	0	0	1
Rubella	0	0	1	0	0
Salmonellosis	40	341	296	330	290
Shigellosis	17	168	238	194	256
<i>Streptococcus pneumoniae</i> , Drug Resistant	19	181	218	161	89
Syphilis, Infectious	13	183	125	86	31
Syphilis, Other	64	875****	725	799	738
Tetanus	0	1	1	0	0
Toxoplasmosis	4	22	0	1	0
Tuberculosis *Provisional	Not available	Not available	274	264	290
Typhoid Fever	3	5	2	15	3
<i>Vibrio, cholera</i>	0	0	0	0	0
<i>Vibrio</i> , Other	0	0	0	0	1

* Data on AIDS are provisional at the county level and are subject to edit checks by state and federal agencies.

** Data on tuberculosis are provisional at the county level. ***: All follow-up cases were removed

**** The duplicated cases were removed



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