LOUISIANA MONTHLY MORBIDITY

DISEASES REPORTED DURING MONTH OF JUNE, 1970 BY PARISH OF RESIDENCE

TUBERCULIN TESTING IN LOUISIANA

The tuberculin skin test is a valuable tool in use today to identify persons at high risk of developing tuberculosis.

PPD (Purified Protein Derivative), is the test material used most often in the State Department of Health's testing program because of its uniformity of strength, purity, and dependability.

Three methods of administration are used. The Heaf test is a multiple puncture technique using concentrated PPD. The Jet gun injection method delivers the PPD dose intradermally under

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DIVISION OF PUBLIC HEALTH STATISTICS – – LOUISIANA STATE DEPARTMENT OF HEALTH

RELEASED JULY 8, 1970	ASEPTIC MENINGITIS	DIPHTHERIA	ENCEPHALITIS	ENCEPHALITIS, POST INFECTIOUS	INFECTIOUS AND SERUM HEPATITIS	MEASLES	MENINGOCOCCAL INFECTIONS	PERTUSSIS	POLIOMYELITIS, PARALYTIC	RABIES IN ANIMALS	RHEUMATIC FEVER	RUBELLA *	SHIGELLOSIS	TYPHOID FEVER	OTHER SALMONELLOSIS	TETANUS	TUBERCULOSIS, PULMONARY	GONORRHEA	SYPHILIS, PRIMARY AND SECONDARY
TOTAL TO DATE 1969	14	4	19	1	423	120	72	1	0	16	10	34	24	0	35	5	338	4476	331
TOTAL TO DATE 1970	22	12	15	11	334	87	55	10	0	45	8	147	18	1	31	2	371	5585	371
TOTAL THIS MONTH	11	1	7	1	63	17	6	1	0	4	0	7	5	0	5	1	63	1142	78
ACADIA			1				1										1	5	
ALLEN																			
ASCENSION					1														
ASSUMPTION																		1	
AVOYELLES																	1		
BEAUREGARD																			
BIENVILLE																			
BOSSIER																		9	1
CADDO						1							3				5	112	20
CALCASIEU					4								1		3		5	41	1
CALDWELL																			
CAMERON																			
CATAHOULA																			
CLAIBORNE										2								4	
CONCORDIA																			
DESOTO							1											2	3
EAST BATON ROUGE					2	1	1					1			1		5	55	19
EAST CARROLL																	1	5	
EAST FELICIANA																		1	
EVANGELINE																		1	
FRANKLIN																			
GRANT																			
IBERIA																		7	1
IBERVILLE					1														

* Includes Rubella, Congenital Syndrome

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JACKSON																	1	1	
JEFFERSON			1		5												5	120	1
JEFFERSON DAVIS					1												1	3	
LAFAYETTE	4				4												2	25	2
LAFOURCHE	1		1		2													16	
LASALLE																	1		
LINCOLN						3												5	
LIVINGSTON																	1		
MADISON																		3	
MOREHOUSE																		1	1
NATCHITOCHES																		8	
ORLEANS	4	1	3		27		2						1		1		23	431	19
OUACHITA					4	8												52	
PLAQUEMINES																1			
POINTE COUPEE																			
RAPIDES																		34	1
RED PIVER										1									
RICHLAND	1																	5	
SABINE																			
ST. BERNARD	1																2	5	
ST. CHARLES																		1	
ST. HELENA																		1	
ST. JAMES																			
ST. JOHN					1													2	
ST. LANDRY					3												2	14	1
ST. MARTIN					3												4	1	
ST. MARY																	1	3	2
ST. TAMMANY			1	1	1													16	
TANGIPAHOA																		23	2
TENSAS																		1	
TERREBONNE																		8	1
UNION										1									
VERMILION					1												1	1	
VERNON					3	3	1					6						81	1
WASHINGTON																		22	
WEBSTER																		4	1
WEST BATON ROUGE																	1		
WEST CARROLL																		2	
WEST FELICIANA								1										7	1
WINN						1												3	
OUT OF STATE																			

From January 1 through June 30 of 1970, the following cases were also reported: 1 Brucellosis, 2 Leprosy, 1 Leptospirosis, 21 Malaria (contracted outside U.S.A.), and 1 Trichinosis.

high pressure. Both are screening procedures suitable for large groups such as school children because of the speed with which the tests can be applied. These are relatively painless methods, less frightening to children. Reactions to screening tests that fall in the "doubtful" or "positive" categories are subsequently verified by the single intradermal injection (Mantoux) technique, which is a more accurate measure of sensitivity. Reactions to the tests should be read 48 to 72 hours after injection. The presence or absence of induration may be determined by inspection and by palpation with gentle finger stroking. The diameter should be measured transversely to the long axis of the forearm and recorded in millimeters. Records should always be kept of the type of test used, including the type and dose of tuberculin, and the size of reaction in millimeters.

Intradermal (Mantoux) tests with the standard 5 TU dose of PPD showing an area of induration of 10 mm or more are considered as positive reactions and almost always reflect sensitivity resulting from infection with M. tuberculosis.

Induration measuring 5 mm through 9 mm are doubtful reactions. These reactions reflect sensitivity from either atypical mycobacteria or M. tuberculosis. For doubtful reactions it is recommended that the Mantoux test be repeated. If PPD antigens for atypical mycobacteria are available, these may be injected on the opposite forearm at the same time.

Areas of induration measuring 0 through 4 mm are considered negative.

A positive tuberculin test demonstrates that infection is present, but does not prove the presence of active disease. It will exclude persons who are not in need of further study and identify those who need further study, including x-ray.

Since the risk of developing active tuberculosis is much higher among the positive reactor group, it is important that this group be identified, kept under surveillance and possibly treated prophylactically to prevent the onset of the disease.