

Louisiana

LOUISIANA HEALTH AND HUMAN
RESOURCES ADMINISTRATION
DIVISION OF HEALTH



MONTHLY MORBIDITY REPORT

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Provisional Statistics

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BATON ROUGE, LA

Reported Morbidity
March, 1976

OFFICE OF PUBLIC HEALTH STATISTICS

TUBERCULOSIS EPIDEMIC RICHLAND PARISH, LOUISIANA



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During the month of January, 1974, two tuberculosis cases were reported from the city of Delhi in Richland Parish. One of these cases, a forty-eight year old black male, was sent to Greenwell Springs Tuberculosis Hospital, where he remained for four months. The second case was diagnosed by a Monroe physician and was referred to the Richland Parish Health Unit with a diagnosis of "tuberculosis, pleural effusion". Both of the above cases are currently on therapy.

From these two cases, twenty-one contacts had positive skin tests and were placed on prophylactic medicines. Fourteen of these have completed treatment successfully, one became allergic and medicines were discontinued, four did not complete a year's treatment, and one was re-started this year. In February of 1974, two more cases were found. One of these was a four year old granddaughter of a case diagnosed in January. She was diagnosed on X-ray findings alone. She is currently on therapy and will continue for four more months. The second case in February was a 57-year-old black male

diagnosed by a local physician and referred to the health unit for treatment in Greenwell Springs. This patient has become hostile in recent months and his therapy is questionable. These two patients named twenty people as contacts, of which 7 had positive skin tests and were placed on prophylactic medicines. Of this group, three moved to another parish; four were re-started in April of 1975 because previous treatment was doubtful.

In the month of March, 1974, a child from Delhi was referred to the EPSDT Clinic for medical screening because of difficulty in walking. He was referred to Handicapped Children's Services and X-rays were done on his hips and legs. X-rays were reported as negative. Then, on April 13, 1974, he was admitted to the Richland Parish Hospital in Rayville, Louisiana, where on April 15, 1974, he died and was diagnosed on post mortem as having had tuberculosis meningitis. As a result of this death, residents of the local housing project in which his mother and remaining family members lived were called in for a tuberculin skin testing. From the results of the 150 Mantoux skin tests done, approximately 32 were positive and were placed on therapy. Of this number, 18 did not complete a year's treatment, 3 refused treatment, and 11 were re-started in April of 1975.

In cooperation with the school nurses, approximately 1,300 students were skin tested

in the local school system. On March 18, 1974, this program detected an additional 33 reactors, bringing the total on prophylaxis to 131. Included in this number were 20 school children who were recent converters.

A new case was diagnosed in April of 1974 and was admitted to Greenwell Springs on April 18. This patient was a 66 year old black male. At the present time he is still on chemotherapy.

No new cases were reported until October of 1974, when a 54-year-old black female was detected at the local Health Unit with a positive skin test, X-ray, and sputum. All of her contacts were placed on prophylactic medication. During the remaining two months of 1974, no new cases were reported.

In the first quarter of 1975, approximately 136 Mantoux skin tests and 114 Heaf tests were applied. Approximately 45 Mantoux tests were positive and 20 Heaf tests were positive. These skin tests were applied on persons other than household contacts or school children. In January of 1975, a 2-year-old black female with a diagnosis of pulmonary tuberculosis was reported from the E.A. Conway Hospital in Monroe, Louisiana. Her contact was a male friend of her mother, who had recently died at St. Francis Hospital with a diagnosis of pulmonary tuberculosis with hemorrhage of the lungs. This child's sister also had a suspicious chest X-ray and was placed on therapy.

Again in January, a 23-year-old black male with a diagnosis of active tuberculosis was referred to the Health Unit from a hospital in New Orleans where therapy had been initiated. Two brothers of this case were also diagnosed with active tuberculosis and referred to Greenwell Springs.

A 22-year-old black male was also diagnosed during this time as having active pulmonary tuberculosis and admitted to Greenwell Springs. From these six cases, 18 contacts were placed on prophylactic medication.

On March 5, 1975, members of the Tuberculosis Control and Epidemiology Units of the Division of Health met with personnel of the Richland Parish Health Units, Regional Nursing and Records Consultants, and Richland Parish school nursing personnel to discuss the alarming increase in the number of tuberculin converters among school-age children. The discussion and

ideas presented at the meeting led to the planning of an investigation into the possibility of a common exposure.

The Preliminary Facts and Objectives of this Meeting: Sixty-three children converted from a negative to a positive skin test (Heaf test) within a one-year period from a school population of 1,300 students. Because the Heaf test has a relatively high frequency of false positives, all the positive tests, as well as the remainder of the school children who had not been tested, were given a PPD (Mantoux) test, which is more accurate. Each child found to be a converter received a home visit. Interviewers questioned household members for contact with known cases of tuberculosis or persons exhibiting tuberculosis symptoms. Converters were referred to a clinician for further evaluation and treatment. Household and other contacts were skin tested and the reactors X-rayed.

On March 18, 1975, with the cooperation of the school nurses, 120 children from the school system were skin tested. Of this group, 33 had positive Mantoux tests. After intensive interviews, each remaining family member of a reactor was brought in for a Mantoux. All positive members and school children were brought to the health unit in Rayville for chest X-rays and all were referred to the Delhi branch unit, where 62 people were placed on chemoprophylaxis.

Among the contacts of known cases during this quarter, approximately 30 people were skin tested, of which 18 were placed on chemoprophylaxis.

During this 3-month period, 6 cases of pulmonary tuberculosis were reported to the Health Unit, of whom 5 had been referred to tuberculosis hospitals by private physicians and then referred to the health unit upon discharge from the hospital. The other case was detected by the health unit. These cases included two black females, ages 2 and 5, and four black males, ages 22, 23, 43, and 55. In the second quarter (April-June), we held a special X-ray clinic for prophylactic patients and had a special follow-up Mantoux clinic in the Delhi Health Unit.

In this same quarter, 246 Heaf tests and 275 Mantoux tests were done by the Delhi Health Unit. July, August, and September of 1975 were void of any new cases; however, we have continued the skin tests during this time and

have picked up a small number of positives. These have been X-rayed, referred to Monroe Regional Chest Clinic, and placed on therapy.

In July, another mass Mantoux clinic was held. This was the second consecutive testing for the school children and their families whose original tests were negative. Four members of these families had converted. Further investigation is being done on any suspicious contacts of this group. In this clinic 130 Mantoux tests were done. In addition, approximately 110 Heaf tests were done.

On October 28, 1975, special Mantoux

testing of all school children in the three local schools was conducted in cooperation with the school nurses. Twelve hundred and ninety-two tuberculin tests were applied and 6 converters were identified. On November 4, 1975, the third testing of the families of original converters was conducted. In this clinic 117 persons were skin tested and 3 recent converters were identified.

As of this date, 109 patients are presently on chemoprophylaxis. Future skin testing in the Delhi area will consist of re-testing of the school system in Delhi and an additional follow-up of the contacts of converters in the school system.

PHYSICIANS PLEASE READ THIS

EPIDEMIOLOGY UNIT

During March of this year, seventy (70) cases of red measles occurring in the New Orleans area were brought to the attention of the State Division of Health. Of these only ten (10) cases were voluntarily reported by area private physicians. The remainder of the cases were uncovered by Division personnel, or reported through Charity Hospital.

A significant number of cases had been diagnosed by private physicians who failed to report their occurrences as required. Obviously, without good cooperation from the private sector, our efforts to control outbreaks of such contagious diseases are seriously impaired. We again request physicians to report immediately any case of red measles or any reportable disease seen by them during the course of their practice.

SELECTED REPORTABLE DISEASES

(By Place of Residence)

STATE AND PARISH TOTALS REPORTED MORBIDITY MARCH, 1976	ASEPTIC MENINGITIS	DIPHTHERIA	ENCEPHALITIS	ENCEPHALITIS, POST INFECTION	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
TOTAL TO DATE 19 75	11	0	5	3	110	39	113	15	5	2	97	6	35	0	34	1	0	5050	129
TOTAL TO DATE 19 76	16	0	5	3	119	36	135	15	1	0	73	4	17	0	21	1	18**	4987	166
TOTAL THIS MONTH	5	0	2	2	57	18	36	9	1	0	42	4	3	0	3	0	16**	1624	68
ACADIA					1			1										10	
ALLEN																		9	
ASCENSION							1											2	2
ASSUMPTION																		8	
AVOUELLES							1											11	
BEAUREGARD																		4	
BIENVILLE						1												9	
BOSSIER					1		1											21	
CADDO					8	1	1											143	2
CALCASIEU					1		2											90	1
CALDWELL																		1	
CAMERON																		1	
CATAHOULA																		1	
CLAIBORNE																		11	
CONCORDIA					4													4	
DESOTO											1							5	
EAST BATON ROUGE			1	1	4		1	3										67	4
EAST CARROLL																		13	
EAST FELICIANA																		1	
EVANGELINE					3													4	
FRANKLIN							1											9	
GRANT																			
IBERIA							1											8	2
IBERVILLE																		12	
JACKSON																		3	1
JEFFERSON			1		6	3	2		1				2		1	2		58	9
JEFFERSON DAVIS																		8	
LAFAYETTE																		41	
LAFOURCHE	1				1		1	1										24	
LASALLE																		2	
LINCOLN							1											36	
LIVINGSTON																		4	
MADISON																			
MOREHOUSE																		10	
NATCHITOCHE																		23	
ORLEANS	3			1	7	9	4	2					1				13**	419	28
OUACHITA					3		2											93	1
PLAQUEMINES																		1	
POINTE COUPEE							2					1							1
RAPIDES					3		2											99	5
RED RIVER																		1	
RICHLAND							1											9	
SABINE																		11	
ST. BERNARD					1	2	1											4	
ST. CHARLES							1											5	1
ST. HELENA																		3	
ST. JAMES							1	1										1	
ST. JOHN	1																	5	
ST. LANDRY						1	2								1			6	1
ST. MARTIN																		9	1
ST. MARY					1	1	1	1									1	6	1
ST. TAMMANY					3													37	1
TANGIPAHOA					2							3						42	
TENSAS																			
TERREBONNE					5													18	2
UNION																		6	2
VERMILION																		4	
VERNON					1						41							63	3
WASHINGTON					1		2											18	
WEBSTER					1		1								1			41	
WEST BATON ROUGE							3											18	
WEST CARROLL																		1	
WEST FELICIANA																		45	
WINN																		3	
OUT OF STATE																		4	

* Includes Rubella, Congenital Syndrome

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** Additional cases occurring in Orleans parish during March were not included in this report as official case report cards have not yet been received by the Office of Public Health Statistics.