

VERBATIM

'It's appropriate to dismiss a family from your practice when it disrupts the physician-patient/parent relationship. It comes down to a matter of trust. If the parents don't trust the physician on an issue as important to a child's health as immunization, they are more likely to question the physician's judgment about other important health concerns.'

Dr. Karen E. Breach, p. 23

Vibrio Illness Strikes After Hurricane Katrina

BY PATRICE WENDLING
Chicago Bureau

In the wake of hurricane Katrina, 22 new cases of *Vibrio* illness with five deaths were identified during August 29 to September 11, according to government health sources.

The illnesses were caused by *Vibrio vul-*

nificus, *V. parahaemolyticus*, and nontoxicogenic *V. cholerae*. (MMWR 2005;54:928-31).

These organisms are acquired from the environment and are unlikely to cause outbreaks from person-to-person transmission.

No cases of toxigenic *V. cholerae* serogroups O1 or O139, the agents that cause cholera, were identified.

No confirmed cases of illness have been identified with onset after Sept. 5, although additional cases were under investigation at press time.

Of the 22 confirmed cases, 18 were wound-associated *Vibrio* cases reported in residents or displaced persons from Mississippi or Louisiana.

Five patients (28%) with wound-associated *Vibrio* infections died, according to an investigation by state and local health de-

partments and the Centers for Disease Control and Prevention. Three of the deaths were associated with *V. vulnificus* infection and two with *V. parahaemolyticus* infection.

Whether acquired through wound infection or ingestion, *V. vulnificus* typically causes a severe and life-threatening illness characterized by fever, chills, decreased blood pressure, and blood-tinged blistering skin lesions.

V. parahaemolyticus typically causes gastroenteritis after consumption of contaminated shellfish. Wound infections are less common from this organism and are generally less severe.

Nontoxicogenic *V. cholerae* causes primarily gastroenteritis and has rarely been reported to cause wound infections.

All three organisms can result in more severe infections in patients with liver disease or who are immunocompromised.

An underlying condition that might have increased the risk for severe *Vibrio* illness was reported in 13 (72%) of the patients with wounds.

Vibrio infections are diagnosed by culture of wound, blood, or stool specimens. For stool samples, health officials recommend a selective media of thio-sulfate-citrate-bile salts-sucrose agar.

Clinical laboratories are advised to send all *Vibrio* isolates to state public health laboratories for confirmation.

Nationwide, an average of 412 cases from *Vibrio* species other than toxigenic *V. cholerae* O1 or O139 were reported each year during 2000 to 2004, including an average of 146 cases reported in the five Gulf Coast states.

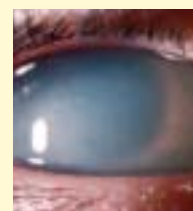
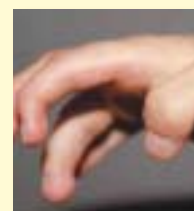
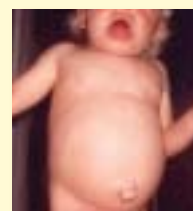
In areas where floodwaters have receded and surfaces are dry, *Vibrio* should not be a concern, because the organism is killed rapidly by drying. ■

Mucopolysaccharidosis I (MPS I) – a lysosomal storage disorder

Jarrett was diagnosed with MPS I, a relatively uncommon yet rapidly progressive and often life-threatening lysosomal storage disorder. Now, with early detection, an urgent referral, and treatment options, children like Jarrett may have a more positive prognosis, and may avoid serious problems associated with disease progression.

Signs and symptoms of MPS I – identifiable, but not always obvious

Look for telltale clusters of signs and symptoms, which may begin to present as early as infancy.



- Macrosomia (in infancy)
- Recurrent otitis media
- Hepatosplenomegaly
- Hearing loss
- Hernia (inguinal/umbilical)

- Facial dysmorphism (coarse features)
- Corneal clouding
- Chronic rhinitis
- Communicating hydrocephalus (severe form)

- Joint stiffness and skeletal deformities
- Developmental delay (severe form)
- Valvular heart disease
- Obstructive airway disease

Learn more about identifying signs and symptoms of MPS I by visiting www.MPSIDISEASE.com or by contacting Genzyme Corporation at 800-745-4447, option 2.



Make the call

Make the urgent referral that may make the difference for children with MPS I