

## CLINICAL CAPSULES

### Storm Disrupts Preventive Care

Missing pediatric vaccinations is one of the health challenges the country faces from Hurricane Katrina, Anthony Fauci, M.D., said at a press briefing sponsored by the Association of Health Care Journalists.

"One of the problems with natural catastrophes and disasters is that when you interrupt the regularly scheduled childhood vaccinations, then you develop areas of vulnerability of children getting infected with common viruses that you generally don't think of as being a problem, like measles," said Dr. Fauci, director of the Na-

tional Institute of Allergy and Infectious Diseases, Bethesda, Md. "We've got to keep the children's vaccination schedules up for normal diseases, not necessarily diseases that are peculiar to Katrina."

Keeping up the vaccination schedule in pediatric Hurricane Katrina survivors has been made even more difficult by the fact that many patients' health care records have been destroyed. "So one of the things we have to be sure of is when in doubt, vaccinate," Dr. Fauci said, adding that the hurricane "certainly is an argument for electronic versions of medical records."

### STI Vaccination Widely Accepted

Ninety-three percent of 320 parents and 89% of their 320 adolescents endorsed a vaccine against HIV, said Gregory D. Zimet, Ph.D., and his associates at Indiana University, Indianapolis.

Eighty-five percent of parents and 87% of adolescents said that they would get a gonorrhea vaccine if it were available, and 89% and 90% of parents and adolescents, respectively, supported a vaccine for genital herpes. The parents and adolescents were recruited into the study from primary care clinics and private pediatric practices, and responded to anonymous surveys. Parental predictors of vaccine

acceptance included a parental history of sexually transmitted infections and a perceived vulnerability of the child to STIs.

Adolescent predictors of vaccine acceptance included having parents who accepted the vaccine and having at least one friend who had engaged in sex. Since the ideal age for immunization against STIs would be preadolescence or early adolescence, prior to the onset of sexual activity, parental acceptance and support of vaccination would be central to any program, the investigators noted (*J. Adolesc. Health* 2005;37:179-86).

### MRSA Joins Football Team

An outbreak of community-acquired methicillin-resistant *Staphylococcus aureus* (CA-MRSA) occurred among 13 players on a high school football team in Pennsylvania, said Jeffrey A. Rihn, M.D., of the University of Pittsburgh and his colleagues (*Pediatr. Infect. Dis. J.* 2005;24:841-3).

The outbreak began during the fourth week of football season, when abscesses appeared in four players, and three of them yielded positive cultures for CA-MRSA. Although the team was educated about hygiene behavior, such as washing hands, treating skin lesions promptly, and not sharing towels, the outbreak eventually included 20 infections.

All 102 players and staff members underwent nasal cultures. Overall, 3 of 102 cultures (2.9%) were positive for MRSA and 32 (31.4%) were positive for methicillin-susceptible *S. aureus*; this low prevalence of colonization means surveillance cultures aren't useful for determining risk of CA-MRSA. Mupirocin was not effective at controlling infections due to noncompliance and non-simultaneous use. Eight infections were treated with drainage and empiric cephalexin or amoxicillin/clavulanate, and the recurrence rate was slightly lower in cases where the choice of antibiotics was guided by culture. In this outbreak, risk factors did not include personal hygiene practices or sharing towels or equipment.

### Uncircumcised at Greater UTI Risk

Being uncircumcised and having a fever greater than 39° C were significant risk factors for urinary tract infections (UTIs) in a study of 1,025 infants aged 1-60 days, said Joseph J. Zorc, M.D., of the University of Pennsylvania, Philadelphia, and other members of the Multicenter RSV-SBI study group. Overall, 52% of the 291 boys were uncircumcised, and 21% of these had UTIs, compared with UTI rates of 2% among circumcised boys and 5% among girls. In addition, 23 of 68 male infants who were uncircumcised and had fevers greater than 39° C were diagnosed with urinary tract infections.

Hispanic/Latino boys and Asian boys were significantly more likely to be uncircumcised (78% and 72%, respectively), compared with infants of other ethnicities (28%). Circumcision status was often not documented in the records of patients in whom infections were missed. Physicians may not consider circumcision status as a factor in managing UTIs, and an enhanced urinalysis or empiric treatment while awaiting culture results in the absence of enhanced urinalysis may be merited for uncircumcised infants, the investigators said (*Pediatrics* 2005;116:644-8).

—Heidi Splete with staff reports

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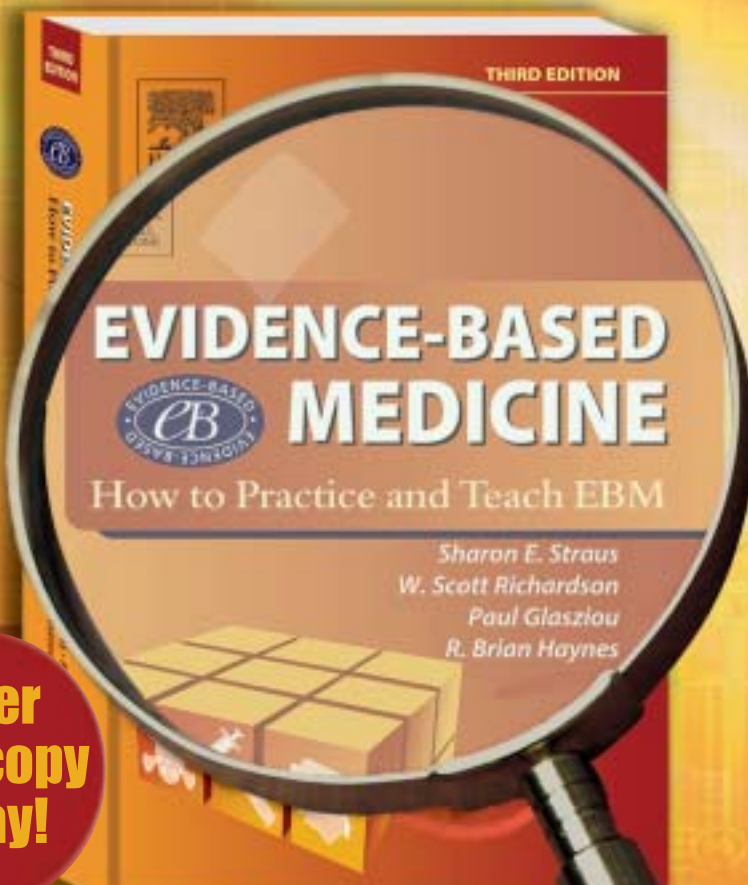
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