

CLINICAL CAPSULES

Vaccine Contains Measles in School

The largest reported school-based measles outbreak in the United States since 1998 was limited to nine cases—eight students and one adult staff member—in a boarding school of more than 600 students, said Dr. Lorraine F. Yeung of the Centers for Disease Control and Prevention, Atlanta, and her associates.

A total of 629 (95%) of the 663 students aged 13-26 years had received at least two doses of measles-containing vaccine (MCV); two of those students had accidentally received a third dose. Eight students had not received any vaccination; four of these had not been vaccinated for philosophical or religious reasons (*Pediatrics* 2005;116:1287-91). The vaccine effectiveness rate was 97% among the 627 students who received two doses, but it was higher among those who had received both doses in the United States than among those who received both doses outside the United States (99% vs. 94%).

Six of the eight student cases had received two doses of vaccine, and two were unvaccinated. Of the six vaccinated patients, three had received their doses outside of the United States, including the source patient, a 17-year-old boy who had traveled to Beirut, Lebanon, and became ill upon his return.

Lack of Follow-Up for Chlamydia

The majority of adolescents received appropriate antibiotics for chlamydia an average of 6 days after testing positive, but few received other types of follow-up care, based on a study of 122 patients, said Dr. Loris Y. Hwang and colleagues at the University of California, San Francisco.

The 96 girls and 26 boys aged 14-19 years had tested positive for *Chlamydia trachomatis* infection during the study period, and 118 cases were treated. Although 97% of the adolescents received appropriate antibiotics, only 79% received safe sex counseling and 52% received partner management advice (*Arch. Pediatr. Adolesc. Med.* 2005;159:1162-6).

Hepatitis in Child Care Settings

Routine implementation of the hepatitis A vaccine contributed to historically low levels of infection—6/100,000 people—in Maricopa County, Ariz., said Hesha Jani Duggirala, Ph.D., of Tulane University, New Orleans, and the Maricopa County Department of Public Health, Phoenix.

Maricopa County traditionally averaged 38 hepatitis cases per 100,000 people—more than three times the national average. In a community-wide outbreak in 1997, hepatitis patients were more than six times as likely to have a history of attending or working in a child care center, compared with healthy people, and approximately 40% of cases in 1997 were linked to direct or indirect child care contact. This finding prompted the requirement of hepatitis A vaccination for all children aged 2-5 years who attended child care centers (*Pediatr. Infect. Dis. J.* 2005;24:974-8).

According to data from the Arizona State Immunization Information System, 23,817 children aged 2-5 years living in Maricopa County received one dose of the hepatitis A vaccine between February 1999 and June 2000; this number represented

approximately 12% of children aged 2-5 years living in the county.

During 1998-2001, the age-specific incidence declined for all age groups; the steepest declines occurred among children aged 0-4 years (-91%) and aged 5-9 years (-94%).

Unlike the 1997 outbreak, few cases reported during 1998-2001 were associated with child care centers. The researchers conducted a case-control study of 72 cases and 144 age-matched controls, and found that neither direct nor indirect child care center contact was significantly associated with illness in a logistic regression analysis,

although direct contact with an infected person remained a significant risk factor.

FluMist Program Cuts Illness Rates

Use of live, attenuated flu vaccine significantly reduced the rates of fever and respiratory illness in a pilot study of 185 school-aged children, said Dr. James C. King Jr. of the University of Maryland, Baltimore, and his associates.

Children at a designated test school received the live, attenuated vaccine (FluMist) prior to the 2003-2004 flu season, while children from two other schools in the community served as controls (*Pediatrics* 2005;116:868-73).

Overall, adults and children in the test school households reported significantly fewer fever and respiratory illness-related ambulatory physician visits, compared with controls, during a 7-day recall period near the peak influenza week in December 2003. The most significant differences between the test and control groups included the mean number of child medical visits per 100 children (5.6 in the test school group, compared with 15.3 and 18.3 in the two control groups) and the number of over-the-counter medicines purchased per 100 households (25.9 in the test group vs. 51.2 and 44.5 for the two control groups).

—Heidi Splete

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Reference: 1. Meinking TL, Entzel P, Villar ME, Vicaria M, Lemard GA, Porcelain SL. Comparative efficacy of treatments for pediculosis capitis infestations. *Arch Dermatol.* 2001;137:287-292.

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