

CLINICAL CAPSULES

Food-Borne Hepatitis A

A large hepatitis A outbreak in November 2003 among patrons of a Pennsylvania restaurant was linked to green onions that were apparently contaminated at farms in northern Mexico.

A case-control study involving 240 of the 601 patients showed that 91% had eaten mild salsa containing green onions, compared with 35% of 134 controls (odds ratio 19.6), and that 98% of patients vs. 58% of controls had eaten a menu item containing green onions (odds ratio 33.3), reported Charlotte Wheeler, M.D., of the

Centers for Disease Control and Prevention, and her colleagues.

Restaurant workers were ruled out as the source of the outbreak. An analysis of serum samples from 170 patients showed that the sequences of hepatitis A virus were identical in all the patients (N. Engl. J. Med. 2005;353:890-7).

The findings highlight the increasing proportion of outbreaks associated with fresh produce. Hepatitis A caused by green onions has been a particular concern: outbreaks have been reported in Ohio, Kentucky, Florida, Tennessee, Georgia, and

North Carolina. The findings may mean rethinking targeted hepatitis A vaccination strategies, Lorian Di Giammarino, M.D., and Jules L. Dienstag, M.D., wrote in an editorial (N. Engl. J. Med. 2005;353:944-6).

They argued that the current policy of targeting people at high risk does not address the problem of increasing food-borne infections, but universal childhood vaccination has the potential to eliminate "the specter of outbreaks of food-borne hepatitis" in a cost-effective manner.

Artesunate for Malaria

The drug artesunate should be the treatment of choice for severe malaria, ac-

cording to the Southeast Asian Quinine Artesunate Malaria Trial group.

Artesunate is easier to administer, faster acting, and safer than quinine, which is the mainstay of severe malaria treatment. In a randomized controlled trial, artesunate also proved significantly better for reducing mortality: 15% of 730 patients in the artesunate group vs. 22% of 731 in the quinine group died from malaria during the study (Lancet 2005;366:717-25).

Artesunate was administered as a 2-4 mg/kg bolus at 0, 12, and 24 hours and then daily, followed by oral therapy; it was well tolerated. Quinine was administered as a 20 mg/kg loading dose in dextrose water and saline infused over 4 hours, followed by 10 mg/kg infused over 2-8 hours three times daily, followed by oral therapy; this regimen was associated with a significantly increased risk of hypoglycemia (relative risk 3.2).

Shigella Risk

An increase in *Shigella* infection in men is probably attributable to outbreaks in men who have sex with men, the CDC said.

Shigellosis outbreaks have been reported in that population (MSM) in major cities across North America, Europe, and Australia. Although risk factors for sexual transmission are not well defined, exposure to fecal material is likely to blame. In studies, up to 90% of those affected by outbreaks among MSM have reported oral-genital or oral-anal contact in the week prior to diagnosis (MMWR 2005;54:820-2).

To reduce the risk of shigellosis and other enteric illnesses that can be transmitted sexually, those with diarrhea should refrain from oral-anal, oral-genital, and anal-genital contact while symptomatic. Those engaging in sexual contact should wash their hands and anal-genital region thoroughly before and after sexual activity, and condoms, dental dams, and gloves should be utilized for protection. Clinicians should request appropriate laboratory examinations in patients with diarrhea who are MSM and counsel patients about the risks involved in exposure to fecal matter.

Flu Treatment Donation

A donation by Roche of three million treatment courses of oseltamivir for a World Health Organization antiviral stockpile will bolster the organization's ability to respond quickly in the event of an emerging influenza pandemic, WHO announced.

The donation of 30 million capsules could help reduce illness and death, and assist in containing or slowing the spread of disease in the event of such a pandemic, according to a WHO statement.

Roche will reserve the treatment courses for up to 5 years. Ten million capsules will be available in 2006, with the remaining capsules available by mid-2006, the company reported.

Experts predict that an influenza pandemic will indeed occur. The timing and severity of a pandemic are uncertain, but WHO noted that it is keeping a close eye on avian influenza outbreaks in Asia, Russia, and Kazakhstan, which have the potential to trigger a human pandemic should the virus mutate into a form that could transmit easily between people.

—Sharon Worcester

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1. McCullough P et al. *Circulation*. 2002; 106:416-422.