

# LOUISIANA MONTHLY MORBIDITY

DISEASES REPORTED DURING MONTH OF JULY, 1967

BY PARISH OF RESIDENCE

## PROPHYLAXIS OF CONTACTS IN MENINGOCOCCAL DISEASE

In the May issue meningococcal disease was discussed and it was pointed out that community prophylaxis should be avoided in most cases. Prophylaxis of intimate contacts is a different question. Dr. Margaret H.D. Smith, Professor of Pediatrics at Tulane University, commenting on the May issue, stated that all children who are family contacts should receive sulfa prophylaxis. The rationale is that most cases of fulminating meningococcemia occur in young children and since upwards of 50 per cent of meningococci are still sulfonamide sensitive, sulfa should be administered. Although definitive data is lacking as to whether an increased risk exists among intimate contacts, most physicians will elect to prescribe prophylaxis for such individuals including adults. Immunization Recommendations for Adults on Page 3.

DIVISION OF PUBLIC HEALTH STATISTICS -

- LOUISIANA STATE DEPARTMENT OF HEALTH

| RELEASED<br>August 10, 1967 | ASEPTIC<br>MENINGITIS | DIPHTHERIA | ENCEPHALITIS | ENCEPHALITIS,<br>POST INFECTIONOUS | INFECTIOUS AND<br>SERUM HEPATITIS | MEASLES | MENINGOCOCCAL<br>INFECTIONS | PERTUSSIS | POLIOMYELITIS,<br>PARALYTIC | RABIES IN ANIMALS | RHEUMATIC FEVER | STREPTOCOCCAL<br>INFECTIONS | SHIGELLOSIS | TYPHOID FEVER | OTHER<br>SALMONELLOSIS | TETANUS | TUBERCULOSIS,<br>PULMONARY | GONORRHEA | SYPHILIS |
|-----------------------------|-----------------------|------------|--------------|------------------------------------|-----------------------------------|---------|-----------------------------|-----------|-----------------------------|-------------------|-----------------|-----------------------------|-------------|---------------|------------------------|---------|----------------------------|-----------|----------|
| TOTAL TO DATE 19 66         | 15                    | 2          | 11           | 6                                  | 267                               | 93      | 135                         | 7         | 0                           | 24                | 2               | 159                         | 29          | 5             | 90                     | 4       | 580                        | 3643      | 1563     |
| TOTAL TO DATE 19 67         | 29                    | 6          | 25           | 12                                 | 287                               | 150     | 80                          | 95        | 0                           | 44                | 6               | 82                          | 53          | 12            | 112                    | 3       | 548                        | 4211      | 1331     |
| TOTAL THIS MONTH            | 5                     | 1          | 5            | 5                                  | 43                                | 4       | 1                           | 24        | 0                           | 7                 | 1               | 6                           | 13          | 1             | 21                     | 0       | 61                         | 779       | 188      |
| ACADIA                      |                       |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 2                          | 10        |          |
| ALLEN                       |                       |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           |          |
| ASCENSION                   |                       |            |              |                                    | 2                                 |         |                             |           |                             |                   |                 | 1                           |             |               | 1                      |         | 1                          | 4         | 2        |
| ASSUMPTION                  |                       |            |              |                                    | 1                                 |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           |          |
| AVOUELLES                   |                       |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           | 1        |
| BEAUREGARD                  |                       |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 1                          | 1         | 1        |
| BIENVILLE                   |                       |            |              |                                    |                                   |         |                             | 1         |                             | 1                 |                 |                             |             |               |                        |         |                            |           | 1        |
| BOSSIER                     |                       |            |              |                                    |                                   |         |                             |           |                             | 3                 |                 |                             |             |               |                        |         |                            | 25        | 1        |
| CADDO                       |                       |            | 1            |                                    | 2                                 |         |                             |           |                             |                   |                 |                             | 9           |               | 6                      |         | 11                         | 103       | 18       |
| CALCASIEU                   |                       |            |              |                                    | 2                                 |         |                             |           |                             |                   |                 | 1                           |             |               |                        |         | 4                          | 39        | 4        |
| CALDWELL                    |                       |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           |          |
| CAMERON                     |                       |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             | 1             |                        |         |                            |           |          |
| CATAHOULA                   |                       |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           |          |
| CLAIBORNE                   |                       |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 1                          | 1         | 1        |
| CONCORDIA                   |                       |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 1                          | 1         | 2        |
| DESOTO                      |                       |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            | 5         | 1        |
| EAST BATON ROUGE            | 1                     |            |              |                                    | 1                                 |         |                             |           |                             |                   |                 |                             |             |               | 5                      |         | 3                          | 57        | 9        |
| EAST CARROLL                |                       |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 1                          | 1         | 1        |
| EAST FELICIANA              |                       |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 1                          | 2         | 1        |
| EVANGELINE                  |                       |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 2                          | 2         | 2        |
| FRANKLIN                    |                       |            |              |                                    | 1                                 |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 1                          | 2         |          |
| GRANT                       |                       |            |              |                                    | 1                                 |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            | 4         |          |
| IBERIA                      |                       |            |              |                                    | 1                                 |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            | 6         |          |
| IBERVILLE                   |                       |            |              |                                    | 3                                 |         |                             |           |                             |                   |                 |                             |             |               | 1                      |         | 1                          | 13        | 2        |

| DIVISION OF PUBLIC HEALTH STATISTICS - |   | - LOUISIANA STATE DEPARTMENT OF HEALTH |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           |          |
|--|---|--|------------|--------------|------------------------------------|-----------------------------------|---------|-----------------------------|-----------|-----------------------------|-------------------|-----------------|-----------------------------|-------------|---------------|------------------------|---------|----------------------------|-----------|----------|
| RELEASED<br>August 10, 1967            |   | ASEPTIC<br>MENINGITIS                  | DIPHtherIA | ENCEPHALITIS | ENCEPHALITIS,<br>POST INFECTIONOUS | INFECTIOUS AND<br>SERUM HEPATITIS | MEASLES | MENINGOCOCCAL<br>INFECTIONS | PERTUSSIS | POLIOMYELITIS,<br>PARALYTIC | RABIES IN ANIMALS | RHEUMATIC FEVER | STREPTOCOCCAL<br>INFECTIONS | SHIGELLOSIS | TYPHOID FEVER | OTHER<br>SALMONELLOSIS | TETANUS | TUBERCULOSIS,<br>PULMONARY | GONORRHEA | SYPHILIS |
| JACKSON                                |   |  |            |              |                                    |                                   |         |                             |           | 1                           |                   |                 |                             |             |               |                        |         |                            | 1         |          |
| JEFFERSON                              |   |  |            | 1            | 3                                  |                                   |         | 3                           |           |                             |                   |                 | 4                           |             | 1             |                        |         | 3                          | 31        | 12       |
| JEFFERSON DAVIS                        |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            | 1         |          |
| LAFAYETTE                              |   |  | 1          |              |                                    | 1                                 | 1       |                             |           |                             |                   |                 |                             |             |               |                        |         | 1                          | 13        | 1        |
| LAFOURCHE                              | 1 |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 2                          | 3         | 2        |
| LASALLE                                |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 1                          |           |          |
| LINCOLN                                |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            | 4         | 2        |
| LIVINGSTON                             |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 2                          |           |          |
| MADISON                                |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           |          |
| MOREHOUSE                              |   |  |            |              |                                    |                                   |         |                             |           | 1                           |                   |                 |                             |             |               |                        |         |                            | 2         |          |
| NATCHITOCHEs                           |   |  | 1          |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            | 2         |          |
| ORLEANS                                |   |  | 2          | 1            | 15                                 | 1                                 | 10      |                             |           |                             | 1                 |                 |                             |             | 5             |                        | 6       | 204                        | 68        |          |
| OUACHITA                               |   |  |            |              | 1                                  |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 3                          | 45        | 8        |
| PLAQUEMINES                            |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           | 1        |
| POINTE COUPEE                          |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           | 2        |
| RAPIDES                                |   |  |            |              | 2                                  |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 1                          | 6         | 3        |
| RED RIVER                              |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           |          |
| RICHLAND                               |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 1                          | 2         | 1        |
| SABINE                                 |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            | 2         | 1        |
| ST. BERNARD                            |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 1                          |           | 1        |
| ST. CHARLES                            |   | 1                                      |            | 1            |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           |          |
| ST. HELENA                             |   |  |            |              |                                    |                                   |         | 3                           |           |                             |                   |                 |                             |             |               |                        |         |                            |           | 1        |
| ST. JAMES                              | 2 |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           | 1        |
| ST. JOHN                               |   |  |            |              | 1                                  |                                   |         | 4                           |           |                             |                   |                 |                             |             |               |                        |         | 1                          |           |          |
| ST. LANDRY                             |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             | 1             |                        |         | 4                          | 23        | 5        |
| ST. MARTIN                             |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 1                          | 5         | 1        |
| ST. MARY                               | 1 |  |            | 1            |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            | 4         | 1        |
| ST. TAMMANY                            |   |  |            |              |                                    | 1                                 |         |                             |           |                             |                   |                 | 3                           |             |               |                        |         |                            | 9         | 2        |
| TANGIPAHOA                             |   |  |            |              | 1                                  |                                   |         |                             |           |                             |                   |                 |                             |             |               | 1                      |         | 1                          | 5         | 7        |
| TENSAS                                 |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           | 1        |
| TERREBONNE                             |   |  |            | 1            |                                    |                                   |         | 3                           |           |                             |                   |                 |                             |             |               |                        |         | 2                          | 2         | 3        |
| UNION                                  |   |  |            |              |                                    |                                   |         |                             |           | 1                           |                   |                 |                             |             |               |                        |         |                            | 3         |          |
| VERMILION                              |   |  |            |              | 1                                  |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           | 2        |
| VERNON                                 |   |  |            |              | 4                                  |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            | 121       | 7        |
| WASHINGTON                             |   |  |            |              | 1                                  |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         | 2                          | 1         | 3        |
| WEBSTER                                |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            | 7         |          |
| WEST BATON ROUGE                       |   |  |            |              |                                    | 1                                 |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            | 1         |          |
| WEST CARROLL                           |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           |          |
| WEST FELICIANA                         |   |  |            |              |                                    |                                   |         |                             |           |                             |                   | 1               |                             |             |               |                        |         |                            | 4         | 1        |
| WINN                                   |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            | 2         | 4        |
| OUT OF STATE                           |   |  |            |              |                                    |                                   |         |                             |           |                             |                   |                 |                             |             |               |                        |         |                            |           |          |

From Jan. 1 through July 31 of 1967, the following cases were also reported:  
5 Tularemia, 17 Malaria, 11 Leptospirosis, and 6 Brucellosis

## IMMUNIZATION RECOMMENDATIONS FOR ADULTS

**INFLUENZA:** Recommended for persons with chronic debilitating diseases including cardiovascular, pulmonary, renal or metabolic disorders, and for persons in older age groups, particularly those over sixty-five.

**Schedule:** 1.0 ml. of bivalent vaccine subcutaneously, followed by a second dose two months later. If vaccinated as recently as July, 1963, only a single booster is necessary. This should be given as soon as possible after October 1, and completed by early December.

**POLIOMYELITIS:** Primary and booster immunizations are not recommended except in special situations such as epidemics, foreign travel or pregnant women who have not previously received a course of oral vaccine.

**Schedule:** Two doses of Trivalent vaccine given six to eight weeks apart, or monovalent vaccine given in the order Type I, Type III, Type II at six to eight week intervals. In case of an epidemic the virus type responsible should be identified and the corresponding monovalent vaccine offered to all ages from two months up on a community-wide basis.

**RABIES:** Pre-exposure immunization is recommended for veterinarians, animal handlers, laboratory workers handling rabies virus, and persons with frequent exposure to wild life such as foxes, skunks or bats.

**Schedule:** Three 1.0 ml. injections of duck embryo origin vaccine given subcutaneously in the deltoid area not less than seven days apart followed by a fourth dose six months after the third dose. Serum should be submitted for a test of the neutralizing antibody three to four weeks after the last injection. 1.0 ml. boosters every two to three years. (Another recommended schedule, which appears equally effective, is two 1.0 ml. subcutaneous injections given one month apart followed by a third dose six to seven months later.

**SMALLPOX:** Vaccination is recommended at five year intervals, except for persons who conceivably might be exposed by newly introduced infections (e.g., hospital personnel) or by virtue of traveling internationally in an endemic or potentially endemic area, who should be vaccinated at three year intervals.

**Technique:** Ten pressures are adequate for primary vaccination and thirty for revaccination.

**TETANUS AND DIPHTHERIA:** Recommended for all adults every ten years, except in the case of a tetanus prone wound when it should be given unless the person has received a dose within one year prior to the injury.

**Schedule:** Primary immunization requires a single dose of combined Tetanus and Diphtheria Toxoids, Adult Type (TD) given intramuscularly or subcutaneously on two occasions at four to six week intervals with a reinforcing dose approximately one year after the second.

**TYPHOID:** Not recommended except in cases of intimate exposure to a known typhoid carrier, community or institutional outbreaks, or foreign travel to areas where typhoid fever is endemic.

**Schedule:** The initial series consist of an injection of 0.5 ml. subcutaneously on two occasions, separated by four or more weeks, or for more rapid protection three doses of 0.5 ml. at weekly intervals. Once the primary series has been given, a booster should be given every three years under conditions of continued or repeated exposure.