Louisiana

DEPARTMENT OF HEALTH AND HUMAN RESOURCES
OFFICE OF HEALTH SERVICES AND ENVIRONMENTAL QUALITY
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MONTHLY MORBIDITY REPORT

REPORTED MORBIDITY
MAY, 1983

PUBLIC HEALTH STATISTICS and
DIVISION OF DISEASE CONTROL

RABIES IN A HORSE - WEBSTER PARISH - A CASE REPORT

The animal was an eleven year old thoroughbred stallion. It was usually kept separate from other animals in a 100' x 100' pen with an attached barn with stalls. It had a history of "hyper" disposition, fractious behavior and of being antagonistic to other animals in his pen and stall area. The owner's first indication of unusual behavior was on Friday evening, April 22, 1983 when he noticed that previous feed and water were untouched. The owner administered 10 ml of penicillin IM and called the veterinarian who suggested another 10 ml of penicillin and if no improvement by morning to report back. The owner, assisted by his son, gave the additional injection and moved the animal to a one acre pen in front of the barn. Upon checking the animal Sunday morning, the owner noticed the animal having "real red gums and froth around the mouth" and had not eaten. It soon began pacing constantly, and would periodically throw himself on the ground and lay still. The Veterinarian checked the animal at 9:30 am, Sunday, and observed the following symptoms: Temperature 104°, hyperemic gums, dehydration, and signs of abdominal distress, however, abdominal and intestinal sounds were essentially normal. The animal was given Banamine 10 ml, Lasix 5 ml, and Albon 60 ml. Attempts were made to place a stomach tube but the animal was uncontrollable. The veterinarian returned at 1:00 pm and observed the same symptoms but the animal "seemed to be having less pain". The horse was observed playing in his water trough but was not drinking. The diagnosis at this time was possible toxemia, septicemia, or colic from an embolus. The veterinarian returned again at 3:00 pm with an assistant and tried unsuccessfully to load the horse in a trailer so that it could be taken to the clinic. They tried to administer IV fluids but were unsuccessful so they decided to sedate the animal with 3 ml Rompun and 1 ml Acepromazine maleate. The attending veterinarian returned again at 7:00 pm with another veterinarian, and an assistant.

The animal had become more aggressive, and was constantly getting up and down. Sedation again with 3 ml of Rompun and 10 ml of Detamine put the horse to sleep. While it was anesthesized a stomach tube was passed to determine if the horse had gastric colic. During this process the horse began to revive, so 250 ml of Chloropent was administered. While administering the Chloropent the animal died. The time was approximately 8:oo pm Sunday, April 24. Because of the possibility of encephalitis or rabies the owner was told that the head should be removed for examination.

The veterinarian and a new assistant returned Monday, April 25, to remove the head from the animal for submission to the laboratory. The Webster Parish Health Unit sanitarian picked up the head from the veterinary clinic on April 26. The head was placed inside a single plastic bag in a cardboard box. At the health unit the head

Reported by Wayne McMahen, DVM. Spring hill, LA., David R. Jeane, Sanitarian, Webster Parish Health Unit and B.H. Young, M.D., Medical Director, Region VII.

was repacked into 2 more large plastic bags and placed into a large cardboard box which was sealed. It was then transported to the Northwest Regional Laboratory in Shreveport for examination. Upon arrival at the laboratory the box containing the head broke and the sanitarian's right hand penetrated through the bags and was covered with blood and fluids.

The Webster Parish Health Unit received a call from the Regional Lab on Friday afternoon, April 29, reporting that the horse was positive for rabies by flourescent antibody test.

Postexposure antirabies immunization with Human Rabies Immune Globulin and Human Diploid Cell Rabies Vaccine was administered to the sanitarian, the two veternarians, two assistants, the owner and the owner's son.

Skunks are frequently observed around the owner's residence. A family of skunks had been raised during the past year under or around the barn. Both the owner and the veterinarian believe that a rabid skunk was the probably source of the horse's infection.

Editorial Comment:

Through June 1983 seventeen cases of animal rabies have been reported in Louisiana, 16 skunks and one horse. All of the cases have occurred in northern Louisiana. Bossier, Webster, Lincoln, Bienville, Red River, Union, and Sabine parishes have had at least one case each of skunk rabies. The above reported case in a thoroughbred horse is the second diagnosed case of rabies in a thoroughbred horse in Louisiana this year. The first case was diagnosed in a horse that arrived with symptoms from Texas at the race track in Vinton, Louisiana in March. The area where the animal had been maintaimed in Texas was a highly endemic skunk rabies area and a rabid skunk was suspected as the source. This case was not recorded as a Louisiana case.

GASTROENTERITIS ASSOCIATED WITH RAW OYSTER CONSUMPTION

During the month of November, 1982, approximately 450 cases of gastroenteritis associated with raw oyster consumption were reported to the Epidemiology Section of the Louisiana State Department of Health. The illnesses were characterized by sudden onset of nausea, vomiting, abdominal cramps and diarrhea occurring 24-28 hours after eating raw oysters and lasting 1-3 days. Fever and headache were not uncommon. The problem subsided after the sources of the oysters were identified and the implicated oyster growing areas were officially closed for harvesting.

Most of the cases were recorded following a news release on November 26, 1982 describing the problem and requesting persons affected to call the health department. However, before the news release 4 outbreaks with a total of 61 cases were under investigation. The following is a summary of these four outbreaks and one outbreak discovered subsequent to the news release:

OUTBREAK A

On October 32, 1982, 19 of 20

persons (95%) who ate raw oysters at a party in Donaldsonville became ill with gastroenteritis. Within 9-12 hours after eating, 14 people (74%) developed diarrhea, 14 (74%) experienced nausea or vomiting and 15 (79%) had abdominal cramps. Symptoms lasted from 2-72 hours.

OUTBREAK B:

On November 11, 23 of 34 people (68%) who ate raw oysters at a party in Houma became ill 2-48 hours after eating. Twenty-one (91%) had nausea or vomiting, 20 (87%) had diarrhea and 15 (65%) had abdominal cramps. Symptoms lasted from 1-3 days.

OUTBREAK C:

On November 12, 8 of 11 people (73%) who ate raw oysters at a company party in Terrebonne Parish became ill 5-48 hours after eating. Seven (88%) had nausea or vomiting, 7 had abdominal cramps and 6 (75%) had diarrhea. Symptoms persisted for 1-3 days.

OUTBREAK D:

On November 12, 11 of 13 people (85%) who ate raw oysters at a private party in Jefferson Parish became ill 18-48 hours after eating. Ten (91%) had abdominal cramps, 8 (73%) had nausea or vomiting and 7 (64%) had diarrhea. Symptoms lasted 1-3 days.

OUTBREAK E:
(Reported after DHHR News Release)

Between November 18 and November 26, 32 of 54 people (59%) from Baton Rouge who had consumed raw oysters from the same source became ill 24-96 hours after eating. Twenty-one (66%) had nausea or vomiting, 24 (75%) had diarrhea and 17 (53%) had abdominal cramps. Symptoms lasted 24-48 hours.

Laboratory Finding:

Fecal specimens from 69 ill persons were tested for Salmonella, Shigella, and Vibrio species of which one was positive for Vibrio parahaemolyticus. Fourteen of these specimens were also tested for Campylobacter species and one was reported positive. Of six leftover oyster specimens obtained from ill patients one was positive for Vibrio parahaemolyticus and Vibrio vulnificus. Both of these organisms are frequently encountered in routinely submitted oyster specimens not associated with illness.

Acute and convalescent sera from 16 patients were submitted to the National Institution for Infectious Diseases for Norwalk virus immune electron microscopy studies. The results of these studies were inconclusive, however, symptoms, incubation periods and duration of illness were characteristic of Norwalk virus.

SELECTED REPORTABLE DISEASES
(By Place of Residence)

STATE AND PARISH TOTALS Reported Morbidity May, 1983	VACCINE PREVENTABLE DISEASES					ASEPTIC MENINGITIS	HEPATITIS A ** AND UNSPECIFIED	HEPATITIS B	LEGIONNAIRES DISEASE	MALARIA***	MENINGOCOCCAL INFECTIONS	SHIGELLOSIS	TUBERCULOSIS, PULMONARY	TYPHOID FEVER	OTHER SALMONELLOSIS	UNDERNUTRITION SEVERE	GONORRHEA	SYPHILIS, PRIMARY AND SECONDARY	RABIES IN ANIMALS (PARISH TOTALS CUMULATIVE, 1983)
	MEASLES	RUBELLA*	MUMPS	PERTUSSIS	TETANUS														
TOTAL TO DATE 1982	0	0	3	1	2	34	390	115	0	3	32	37	185	0	66	2	9549	722	14
TOTAL TO DATE 1983	12	9	0	2	2	19	383	150	2	2	27	26	161	3	84	5	8908	704	16
TOTAL THIS MONTH	12	0	0	0	0	11	69	35	1	1	0	10	24	3	25	1	2757	123	5
ACADIA							6	2									19	2	
ALLEN																	2		
ASCENSION								1				1	1				4	1	
ASSUMPTION																	15		
AVOYELLES																	9		
BEAUREGARD													1				13		
BIENVILLE													1				1	2	3
BOSSIER						3		1							1		13	5	
CADDO						1	1					2	2		2		160	15	
CALCASIEU							1	2							1		95	3	
CALDWELL																	9		
CAMERON																	2		
CATAHOULA																			
CLAIBORNE							1										4		
CONCORDIA																	2		
DESOTO								1									4	2	
EAST BATON ROUGE	11						1					1	1		1		114	10	
EAST CARROLL							1										7		
EAST FELICIANA																	1	3	
EVANGELINE																	2	1	
FRANKLIN													2				10		
GRANT																	1		
IBERIA							12										9	1	
IBERVILLE																	4	2	
JACKSON																	3		
JEFFERSON						3	6	4					2				199	12	
JEFFERSON DAVIS							4										10	1	
LAFAYETTE						1	5	6					2		2		47	4	
LAFOURCHE														1		1	41		
LASALLE																	1		
LINCOLN														1			6		2
LIVINGSTON															1		5		
MADISON																	22		
MOREHOUSE							1										33		
NATCHITOCHES																	3		
ORLEANS						1	3	7		1		2	4	1	1		1453	41	
OUACHITA							1						3				135		
PLAQUEMINES															1		3		
POINTE COUPEE																	5		
RAPIDES								1					1				46	1	
RED RIVER																	1	2	1
RICHLAND																	22		
SABINE																	2		2
ST. BERNARD							1										7		
ST. CHARLES							1						1				7		
ST. HELENA																			
ST. JAMES																	9		
ST. JOHN								1				1			1		15	1	
ST. LANDRY								2							1		21	3	
ST. MARTIN							4										11		
ST. MARY							2		1				1				7	1	
ST. TAMMANY							5					2			2		3	2	
TANGIPAHOA								2				1	1		2		19	4	
TENSAS																	1		
TERREBONNE						2	3	3					1		7		41		
UNION							1										2		1
VERMILION							1								1		6		
VERNON																	9		
WASHINGTON															1		7	1	
WEBSTER							1										16	3	7
WEST BATON ROUGE																	14		
WEST CARROLL							7	2									2		
WEST FELICIANA																	12		
WINN																	9		
OUT OF STATE	1																2		

*Includes Rubella, Congenital Syndrome.
**Includes 16 cases of Hepatitis Non A and Non B.
***Acquired outside United States unless otherwise stated.
From January 1, 1983 - May 31, 1983 the following cases were also reported:
1-Amebiasis, 1-Cryptococcosis, 2-Leptospirosis, 1-Reye Syndrome, 1-Trichinosis, 2-Tularemia

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