

Congenital Rubella Syndrome Alert

On January 6, the Texas Department of Health alerted medical and hospital personnel of the possibility of babies being born with congenital rubella syndrome (CRS) in their facilities. As of that date, CRS had been confirmed in 2 babies in Texas--one born December 1 in Dallas County and the other in El Paso County on December 7.

In 1998 Texas experienced an outbreak of rubella, a vaccine-preventable disease. Congenital rubella syndrome (CRS), by far the most important consequence of rubella, impacts up to 85% of infants born to mothers infected with rubella in their first trimester of pregnancy.

A clinical case of CRS is an illness of newborns resulting from rubella infection *in utero*.

The most commonly described anomalies associated with CRS are as follows:

- Ophthalmologic: cataracts and pigmentary retinopathy
- Cardiac: patent ductus arteriosus, pulmonary artery stenosis
- Auditory: sensorineural deafness
- Neurologic: behavioral disorders, meningoencephalitis, mental retardation

In addition, infants with CRS may have interuterine growth retardation, thrombocytopenia, hepatosplenomegaly, radiolucent bone disease, and purple skin lesions ("blueberry muffin" appearance).

Some infants with intrauterine infection have few or no symptoms at birth but develop severe multisystem disease after a latent period of several months. Notable manifestations of late-onset CRS are a generalized interstitial pneumonitis associated with cough, tachypnea, and cyanosis; chronic rubelliform rash; chronic diarrhea; recurrent infections due to immune system defects; and progressive neurological deterioration. Endocrine abnormalities associated with an increase in autoantibodies may be observed. Insulin-dependent diabetes mellitus, hypothyroidism, and thrototoxicosis manifest at several years of age in children with CRS.

Infected infants may shed virus to all contacts for up to one year. Therefore, it is **important that babies suspected at birth of having CRS be placed in isolation immediately**. It is also important that all hospital and medical personnel be immune to rubella to avoid further transmission of the disease to susceptible pregnant women.

Health care workers with documented evidence of at least one dose of a rubella-containing vaccine or serologic evidence of immunity to rubella are considered protected against the disease. Although many persons born before 1957 may have had rubella disease, there is no guarantee that older health care workers are already immune. Any health care workers who may put themselves or others at risk should have their immune status tested and be vaccinated if necessary.

Eighty-nine (89) cases of rubella were confirmed in Texas in 1998 - more than seven times the number of cases reported throughout the entire year of 1997 (Figure 1). The most recent confirmed case was in mid-October 1998. Because rubella peaked in Texas during March and April 1998, women infected early in their pregnancies during this period would be expected to deliver anytime now through the early part of 1999 (Figure 2).

An outbreak of rubella continues in Mexico with over 41,000 cases reported during 1998. Because of Texas' proximity to Mexico, health care providers are urged to increase the

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Figure 1. Reported Cases of Rubella and CRS in Texas by County, 1998

County	Rubella	CRS	County	Rubella	CRS
Bell	1	0	Jefferson	1	0
Cameron	24	0	Montgomery	1	0
Dallas	1	1	Nueces	3	0
Denton	6	0	Rockwall	1	0
El Paso	8	1	Tarrant	1	0
Galveston	1	0	Travis	8	0
Harris	22	0	Willacy	1	0
Hidalgo	10	0			
			TOTALS	89	2

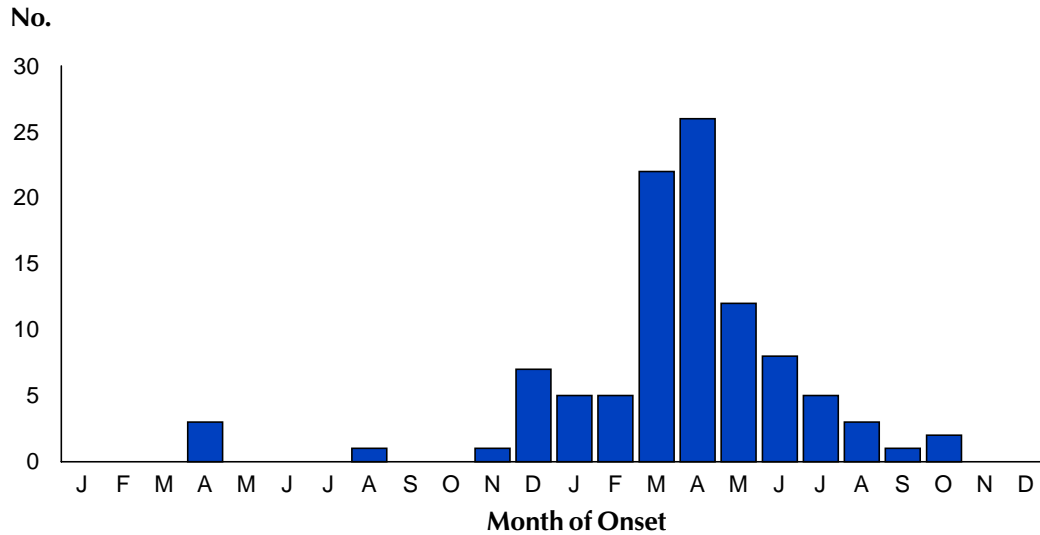
sensitivity of their rubella surveillance. Persons presenting with a low-grade fever or rash - particularly if they have recently traveled in Mexico or grew up in a foreign country - should be suspected of having rubella, and appropriate diagnostic clinical specimens should be obtained.

Rubella is usually a very mild illness, and only 50% of infected persons have symptoms. It is very likely, therefore, that persons infected with rubella may unknowingly spread the disease to others.

A clinical case of rubella is an illness with the following characteristics:

- acute onset of a fine pink or red rash
- temperature greater than 99°F (37.2°C) **and**
- joint pain **or**
- swelling and tenderness of the lymph glands (particularly behind the ears) **or**
- conjunctivitis (red, watery eyes)

Figure 2. Rubella in Texas by Month of Onset, 1997 and 1998



Nov/Dec 1998

Bimonthly Statistical Summary of Selected Reportable Diseases

Selected Diseases/Conditions	HHSC Region											Selected Texas Counties								This Period		Cumulative[1]	
	1	2	3	4	5	6	7	8	9	10	11	Bexar	Dallas	El Paso	Harris	Hidalgo	Nueces	Tarrant	Travis	1997	1998	1997	1998
Sexually Transmitted Diseases[2]																							
Syphilis, primary and secondary	*0	*1	*26	*1	*7	*12	*4	*5	*0	*1	*0	*5	*22	*1	*10	*0	*0	*4	*0	*78	*57	*676	*411
Congenital Syphilis	*0	*0	*1	*0	*0	*6	*0	*0	*0	*0	*0	*0	*1	*0	*6	*0	*0	*0	*0	*24	*7	*164	*85
Resistant Neisseria gonorrhoeae	*0	*0	*0	*0	*0	*0	*0	*0	*0	*0	*0	*0	*0	*0	*0	*0	*0	*0	*0	*1	*0	*10	*8
Enteric Diseases																							
Salmonellosis	31	11	36	9	6	68	45	26	5	8	19	5	11	8	63	8	3	7	20	678	264	2361	3064
Shigellosis	120	19	47	7	16	72	52	41	4	8	36	14	19	8	57	5	0	11	28	806	422	2631	3388
Hepatitis A	25	33	33	2	14	3	27	31	7	2	44	28	4	2	3	12	2	6	19	784	221	3882	3282
Campylobacteriosis	14	1	7	4	1	4	15	16	1	1	8	10	1	1	2	0	4	2	10	125	72	845	729
Bacterial Infections																							
H. influenzae type b, invasive	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	3
Meningococcal, invasive	0	0	3	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	22	0	161	163
Lyme disease	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	11	0	56	23
Vibrio species	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	10	0	36	14
Other Conditions																							
AIDS[4]	16	4	127	10	0	223	36	37	2	13	19	31	78	13	204	7	4	24	15	843	489	4685	4039
Hepatitis B	1	0	3	0	0	0	2	0	0	1	0	0	0	1	0	0	0	0	0	0	7	0	944
Adult elevated blood lead levels	0	0	127	2	0	19	1	4	2	0	0	0	17	0	0	0	0	2	0	215	155	1617	1295
Animal rabies - total	0	9	2	2	0	0	4	4	5	1	0	1	0	0	0	0	0	0	0	26	27	266	410
Animal rabies - dogs and cats	0	3	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	2	5	13	21
Tuberculosis Disease[2]																							
Children (0-14 years)	*1	*0	*0	*0	*0	*4	*1	*0	*1	*0	*3	*0	*0	*0	*4	*1	*0	*0	*1	*11	*10	*131	*129
Adults (>14 years)	*5	*4	*46	*7	*3	*83	*23	*22	*5	*14	*22	*14	*31	*14	*56	*5	*3	*12	*9	*297	*234	*1781	*1546
Injuries[2]																							
Spinal Cord Injuries (5)	0	1	6	0	0	6	0	0	0	0	0	0	1	0	3	0	0	2	0	17	13	91	79

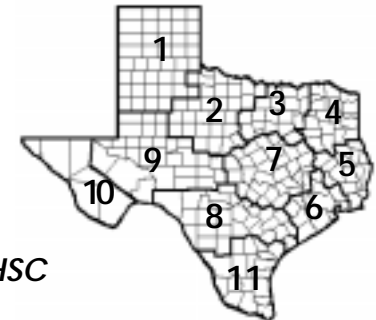
1. Cumulative to this month. 2. Data for the STD's, Tuberculosis, and spinal cord injuries are provided by date of report, rather than date of onset. 3. Voluntary reporting. 4. AIDS totals include reported cases from Texas Department of Corrections, which are not included in the regional and county totals. 5. 6 reports were missing PHR identification *Data incomplete.

Call 1-800-705-8868 to report

1997 POPULATION ESTIMATES

1997 HHSC REGIONS					
1	764,497	4	957,383	7	1,931,454
2	533,392	5	687,951	8	2,017,179
3	5,104,222	6	4,404,421	9	555,363
STATEWIDE TOTAL			19,307,387		

SELECTED COUNTIES			
Bexar	1,324,190	Hidalgo	492,619
Dallas	2,099,876	Nueces	311,154
El Paso	715,807	Tarrant	1,427,664
Harris	3,163,342	Travis	632,922



HHSC



Disease Prevention News (DPN)
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 TDH Healthy Texans BBS: (800) 858-5833

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Vaccine-Preventable Disease Update Reported Cases with Onset From 11/01/98-12/31/98

Condition	County	Number	Date
		of Cases	of Onset
Mumps	Deaf Smith	1	11/24
	Pertussis	Bexar	12/07
	Colorado	1	11/15
	Guadalupe	1	11/04
	Matagorda	1	11/21
Rubella	Dallas	1	12/01
	El Paso	1	12/07
YTD	Mumps	Pertussis	Rubella
	1	4	2

Calling All Reports:

The Infectious Disease Epidemiology & Surveillance Division is currently processing 1998 disease data for our year-end transmission to CDC. To help us meet our deadlines, if you are a health professional or work for an organization required to report, please submit all 1998 infectious disease reports no later than March 30, 1998. We will not be able to send CDC any 1998 reports received after March 30, 1999; thus, late reports will not be counted in the 1998 morbidity data for Texas. If you have any questions, please contact Julie Rawlings at (512) 458-7228.