Inhalational Anthrax in Florida: The First Intentional Cases in US History

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Palm Beach County



- October 2, 2001
 - Patient admitted
 - Public Health notified
- October 3, 2001
 - Specimen transport
 - Laboratory diagnostics
- October 4, 2001
 - Confirmation of *B. anthracis*
 - Florida and CDC teams arrive



Index Case--RS

- 63-year-old male
- Illness onset September 30
- Unexplained, non-localizing severe illness
 - shaking chills, fever
 - vomiting
 - altered mental status
- Hospital admission October 2

History

- Social/Occupational
 - London native; in U.S. since 1974
 - Photo editor, American Media Inc (AMI)
- Exposure
 - Cyclist, fisherman
 - Travel: North Carolina only
 - No livestock exposure

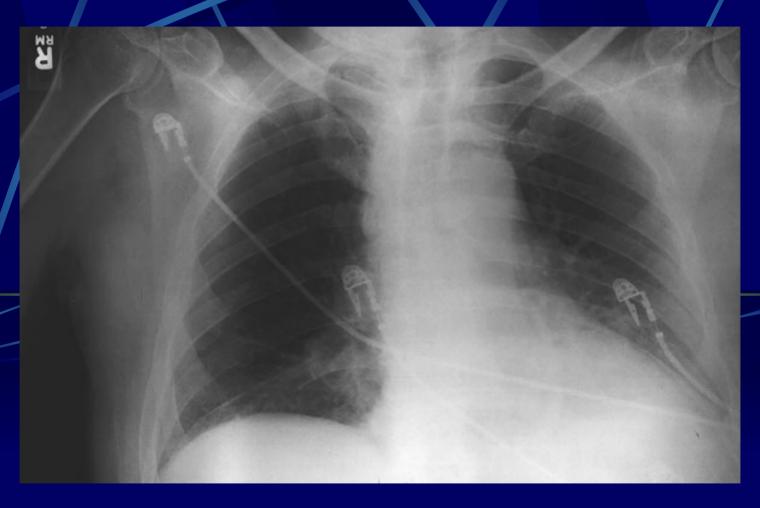
Clinical Findings

- Incoherent
- Fever
- Supple neck
- Clear lung sounds
- Hypotensive
- Seizures

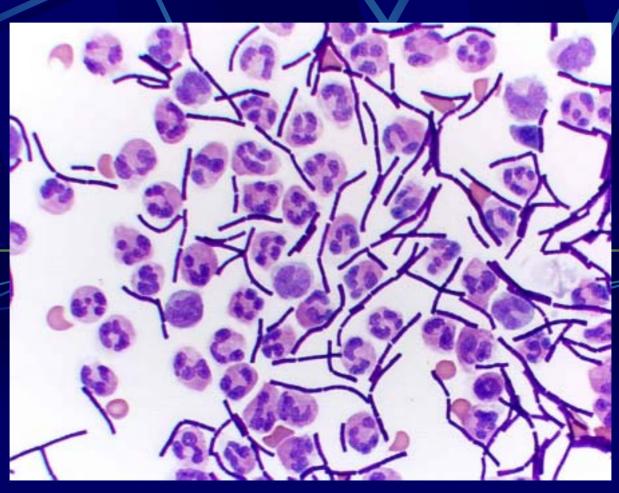
Laboratory/Imaging

- WBC count: 9400 mm³
- Chest X-ray: increased perihilar density
- Head CT: normal
- Cerebrospinal fluid:
 - 4570 WBC mm³, 1375 RBC mm³
 - glucose 57 mg/dl; protein 666 mg/dl

Chest Film—Case 1



Cerebrospinal Fluid Gram Stain



Questions

- Inhalational disease?
- Natural or intentional acquired?
- Florida or North Carolina exposure?
- Others at risk?

Public Health Response

- Surveillance Team
- Case Investigation Team
- Environmental Team
- Intervention Team
- Other Functions:
 - Coordination
 - Communications

Surveillance Palm Beach County

- Hospital intensive care units (14)
 - Blood or CSF cultures within 24 hours of admission
 - Retrospective to September 11
 - Continuing prospectively
- Laboratory
 - Gram-positive organisms from sterile sites
- Medical examiner
 - Unexplained deaths consistent with anthrax

Expanded Surveillance

- Surrounding Counties
 - ED, ICU, laboratory, ME
- Statewide
 - Laboratory
 - Veterinary
- North Carolina
 - Similar to Palm Beach County

Case Investigation

- Key informant interviews
- Investigation of suspect cases
- Interface with clinicians

Environmental Investigation

- Inspection
- Sampling
- Locations
 - Home
 - Worksite
 - Recreation & travel destinations
 - Retail businesses patronized

Suspect Case--EB

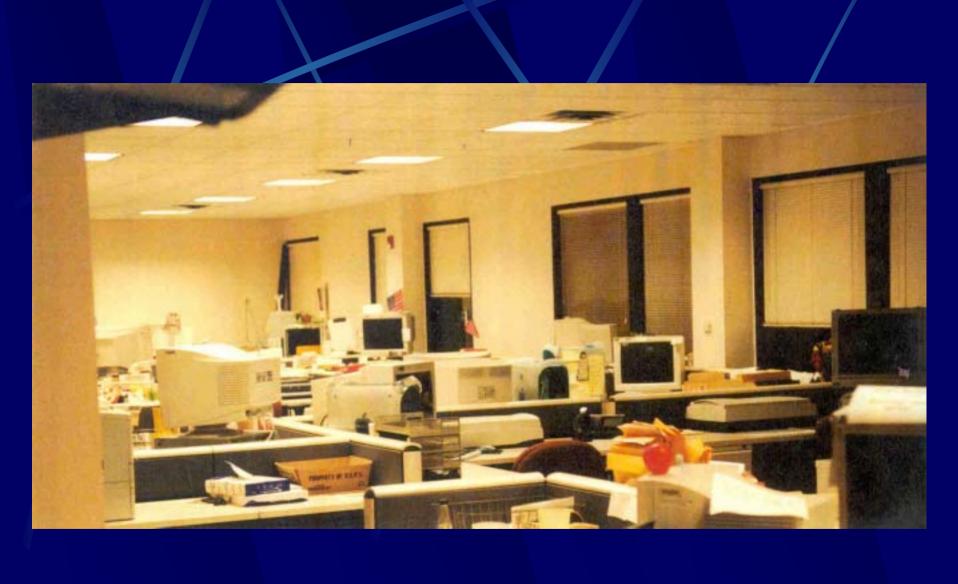
- 73-year-old male
- AMI employee
- Respiratory illness onset Sep 28
- Non-ICU hospital admission Oct 1
- Clinical course: moderate disease with pulmonary infiltrates/effusions, no mediastinal lymphadenopathy

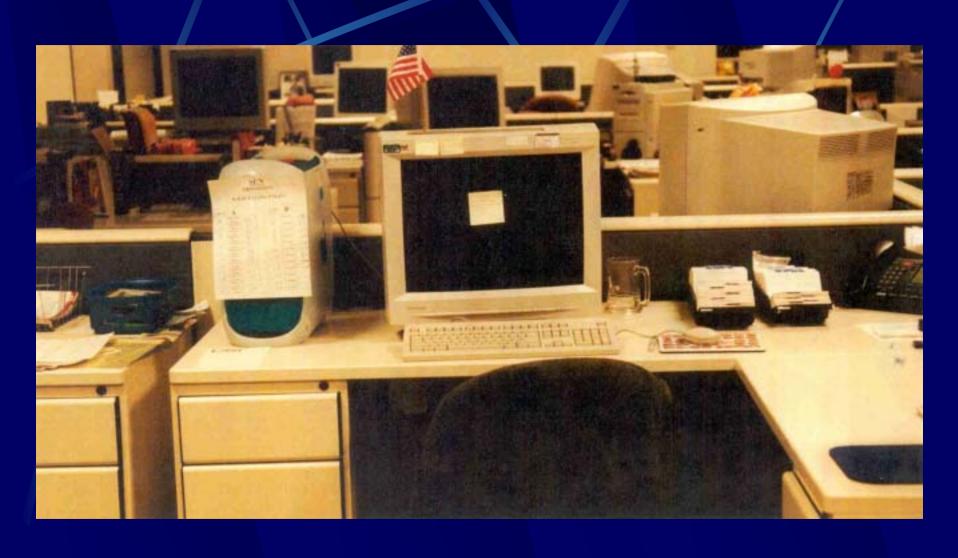
October 7: Pivotal Findings

- B. anthracis isolated from
 - Office keyboard used by index case
 - Nasal swab of ill AMI employee (EB)
- Conclusions
 - Source AMI building
 - Mechanism: intentional release

Work Site







Strategy Change

- FBI takes leadership role
 - Building secured
 - Collected work site samples
 - NIOSH, NCEH consulted
 - Swabs, vacuum & air samples
- Environmental team
 - Assisted, processed samples
 - Unable to enter building

Oct 7: Intervention Planning

- Define exposed group
 - Anyone in AMI building >1 hour
 - In past 60 days
- Assess exposure
 - Questionnaire
 - Nasal cultures
 - Serology testing
- Deliver PEP

Oct 8: Intervention



Suspect Cases

- EB:
 - Clinical improvement
 - PCR and IHC staining positive on pleural fluid
 - Serology with 4-fold rising titer
- Other suspect cases hospitalized:
 - 2 AMI employees
 - Several non-AMI employees
 - No preliminary evidence of anthrax

Chest Film—Case 2



CT—Case 2



Oct 10: Preliminary Results

- Nasal cultures
 - 1 of 1051 positive
- AMI building environmental cultures
 - 10 of 14 (71%) mail room positive
- Serology
- Antibiotic side effects data pending

Exposure AssessmentPositive Nasal Culture

- SD: 36-year-old female
- AMI employee
- Asymptomatic
- Handles, opens mail
- Opened letter containing powder ~9/25
- Office cultures positive

Exposure Assessment Index Case

- Observed viewing suspicious mail (9/19)
 - Contained fine white powder
 - Also contained "Jewish star"
- Office cultures positive

Anthrax Links With Mail

- Index case: handled "suspicious" mail
- EB: AMI mail distributor
- SD: mail sorter--opened letter with white powder
- Evidence for multiple suspect letters

AMI mailroom



Change in Focus

- Focus on postal service and express mail
- Concern with waste management staff
- National events confirmed postal link
- Additional exposed mail handlers and waste managers given PEP

Environmental TestingIssues

- Guide to epidemiological investigation
- May indicate possible risk
- Positive environment # Risk
- No quantification of risk
- Can rule-out risk groups
 - Housekeeping staff
 - Waste management staff

Florida Specific Issues

- No letter(s)—Why?
 - No index of suspicion
 - Multiple letters
- No postal worker cases—Why?
 - Different physical properties of powder
 - Different packaging
 - Different environmental conditions
 - Different quantity of powder

General Issues

- Local/State/Federal cooperation
 - Public Health
 - Law enforcement
 - Communications
- Public Health Capacity
 - Informatics
 - Laboratory Support
 - Staffing levels
- Logistics
 - Command and control
 - Intervention

Further Information

- http://myflorida.com then "health and human services" then "diseases and conditions" then anthrax
- Bureau of Epidemiology (850) 245-4401