EPI-NEWS

NATIONAL SURVEILLANCE OF COMMUNICABLE DISEASES

Editor: Peter Henrik Andersen
Dept. of Epidemiology
Statens Serum Institut • 5 Artillerivej • DK 2300 Copenhagen S

Tel.: +45 3268 3268 • Fax: +45 3268 3874
www.ssi.dk • epinews@ssi.dk • ISSN: 1396-4798

RABIES PROPHYLAXIS

In 2005, a total of 94 persons received prophylactic treatment for rabies after animal bites, table 1.

Table 1. Number of persons given post-exposure prophylaxis after possible exposure to rabies, 2005

Species	Denmark	Abroad
Dog	1	46
Bat	10	2
Monkey	-	14
Cat	4	12
Fox	1	-
Other	-	4
Total	16	78

Sixteen persons were possibly exposed in Denmark, 18 in the rest of Europe, 44 in Asia, nine in Africa and seven in South America.
A total of 56 persons were treated with Human Rabies Immunoglobulin (HRIG) in addition to vaccination.
Bat bites in Denmark were the reason that 10 persons received post-exposure prophylaxis, table 1.
Two of the bats were investigated, one tested positive and one tested negative for rabies. In addition, four persons were treated after cat bites, and one after a dog bite. The cats and the dog tested negative for rabies, and the treatment was interrupted. One person was treated after fox bite. Also in this case, treatment was interrupted as there is no evidence that foxes in Denmark are infected with rabies.
Abroad, Thailand was the country in which most Danes were possibly exposed to rabies. A total of 31 persons were treated, including 20 after dog bites, nine by monkey bites and two by squirrel and rat bites, respectively.

Comments

The major part, 83%, of the persons given post-exposure prophylaxis were possibly exposed abroad, particularly in Thailand. On counselling before foreign travel, it is important to discuss the risk of rabies when coming into contact with animals.
It is also important that people in Denmark be careful to use protective measures when handling bats. If bitten, vaccination should be commenced, and the bat should be tested for rabies, if possible.
(A. H. Christiansen, S. Cowan, Department of Epidemiology)

RABIES IN ANIMALS

Classical sylvatic rabies virus is not found in Denmark, but is endemic in Greenland, where polar foxes regularly spread the infection to huskies and other mammals, table 2.

Table 2. Rabies tests performed on animals in Denmark, 2005

Species	Denmark No./pos.	Greenland No./pos.
Fox	0/0	15/5
Dog	1/0	7/0
Cat	6/0	1/0
Hedgehog	1/0	-
Bat rabies		
Bat	15/2	-
	23/2	23/5

Since 1985, European bat lyssavirus (EBL) or bat rabies virus is detected almost every year in bats in Denmark. This virus is related to classical rabies virus. EBL is widespread in other Northern European countries, such as Germany, Poland and the Netherlands. Occasional deaths have been reported in Scotland (one case), Russia (two cases) and Finland (one case), where humans have been in close contact with bats. In addition, the infection has been detected in several sheep in Denmark.
Cats have occasionally, on the basis of symptoms, been suspected of having EBL and have subsequently been submitted for investigation. Although it is theoretically possible, EBL has never been detected in cats in Denmark.
The number of bats submitted has varied very much through the years, with a declining trend in recent years, and the proportion of infected bats has also varied. In 2005, EBL was detected in two bats, representing 13% of the number submitted, table 2. The continued occurrence of EBL in Denmark means that caution must still be taken.
The future diagnostic methods for detection of rabies virus will be supplemented with PCR.
(L. S. Christensen, Danish Institute for Food and Veterinary Research, Lindholm)

CREUTZFELDT-JAKOB DISEASE 2004

Creutzfeldt-Jakob disease (CJD) is divided into three types: sporadic, hereditary and iatrogenically acquired. In addition, there is variant CJD (vCJD), which was described in 1995, and which is considered to be the human form of mad cow disease (bovine spongiform encephalopathy, BSE), EPI-NEWS 12/01. In Denmark, CJD has been notifiable since May 1997, EPI-NEWS 10/97.
The calculations are based on the year of death of the patient. In the period 1997-2004, there was a total of 53 notified cases: 33 certain, 17 probable and three possible cases, all classified as sporadic. Among these, 27 were males and 26 females. The median age was 65 years (46-86).
Table 3 presents the number of patients notified with suspected CJD, who died in 2004 and 2003, respectively.
There are no known cases of vCJD in Denmark.
(S. Cowan, Department of Epidemiology)

Table 3. Creutzfeldt-Jakob disease, notified cases in 2004 (2003)

Deceased in:	2004	(2003)
Certain cases	4	(3)
Probable cases	2	(5)
Possible cases	1	(0)
Total	7	(8)

EUROPEAN TRAINING PROGRAMME FOR EPIDEMIOLOGISTS

It is again possible to apply for admission to a two-year European training programme for epidemiologists, EPIET (European Programme for Intervention Epidemiology Training). The training starts in September 2006 and takes place while stationed for two years in another European country or in the ECDC in Stockholm.
During the training, skill is attained in performing independent tasks associated with surveillance and control of infectious diseases, outbreak tracing and management, applied research and communication, etc.
Applicants must be citizens of the EU, Switzerland or Norway, and must have some experience in the field of public health and the epidemiology of infectious diseases. The applicant is expected to be interested in field epidemiology, and good language skills are required in English and another EU language.
During the training period, the student will be paid out of national funds or out of funds from the EU programme. Further information is available on www.epiet.org or from Kåre Mølbak, Department of Epidemiology, SSI.
The deadline is 6 February 2006.
(Department of Epidemiology)

18 January 2005

Individually notifiable diseases

Number of notifications received in the Department of Epidemiology, SSI (2006 figures are preliminary)

Table 1	Week 2 2006	Cum. 2006 [1)]	Cum. 2005 [1)]
AIDS	3	4	3
Anthrax	0	0	0
Botulism	0	0	0
Cholera	0	0	0
Creutzfeldt-Jakob	1	2	0
Diphtheria	0	0	0
Food-borne diseases	8	24	15
of these, infected abroad	2	3	5
Gonorrhoea	8	15	18
Haemorrhagic fever	0	0	0
Hepatitis A	0	0	6
of these, infected abroad	0	0	1
Hepatitis B (acute)	0	1	2
Hepatitis B (chronic)	3	8	3
Hepatitis C (acute)	0	0	1
Hepatitis C (chronic)	4	6	7
HIV	2	5	13
Legionella pneumonia	0	3	5
of these, infected abroad	0	1	1
Leprosy	0	0	0
Leptospirosis	2	2	1
Measles	0	0	0
Meningococcal disease	0	0	5
of these, group B	0	0	4
of these, group C	0	0	1
of these, unspec. + other	0	0	0
Mumps	1	1	0
Neuroborreliosis	1	4	7
Ornithosis	1	2	1
Pertussis (children < 2 years)	1	5	14
Plague	0	0	0
Polio	0	0	0
Purulent meningitis			
Haemophilus influenzae	0	0	0
Listeria monocytogenes	0	0	0
Streptococcus pneumoniae	0	0	5
Other aethiology	0	0	0
Unknown aethiology	0	0	0
Under registration	8	11	-
Rabies	0	0	0
Rubella (congenital)	0	0	0
Rubella (during pregnancy)	0	0	0
Shigellosis	1	4	3
of these, infected abroad	1	3	2
Syphilis	5	6	3
Tetanus	0	0	0
Tuberculosis	7	14	11
Typhoid/paratyphoid fever	2	3	3
of these, infected abroad	1	2	3
Typhus exanthematicus	0	0	0
VTEC/HUS	3	6	6
of these, infected abroad	0	0	2

[1)] Cumulative number 2006 and in corresponding period 2005

Selected laboratory diagnosed infections

Number of specimens, isolates, and/or notifications received in SSI laboratories

Table 2	Week 2 2006	Cum. 2006 [2)]	Cum. 2005 [2)]
Bordetella pertussis			
(all ages)	7	15	42
Gonococci	5	10	19
of these, females	1	1	1
of these, males	4	9	18
Listeria monocytogenes	2	3	2
Mycoplasma pneumoniae			
Resp. specimens [3)]	24	44	169
Serum specimens [4)]	12	28	62
Streptococci [5)]			
Group A streptococci	3	8	7
Group B streptococci	4	7	2
Group C streptococci	0	3	0
Group G streptococci	4	9	8
S. pneumoniae	33	111	82
Table 3	**Week 52 2005**	**Cum. 2005 [2)]**	**Cum. 2004 [2)]**
Pathogenic int. bacteria [6)]			
Campylobacter	20	3,666	3,705
S. Enteritidis	5	646	545
S. Typhimurium	2	569	467
Other zoon. salmonella	7	563	525
Yersinia enterocolitica	0	241	226

[2)] Cumulative number 2006 and in corresponding period 2005

[3)] Resp. specimens with positive PCR

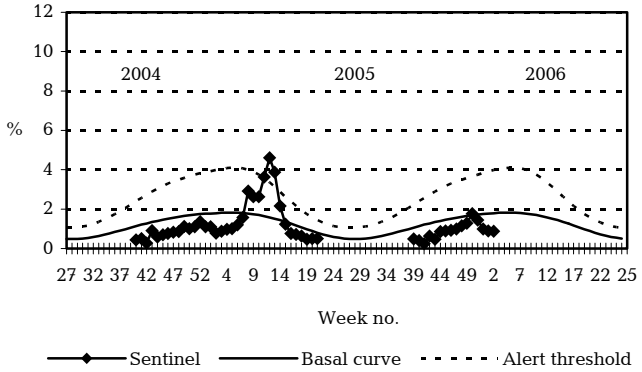
[4)] Serum specimens with pos. complement fixation test

[5)] Isolated in blood or spinal fluid

[6)] See also www.germ.dk

Sentinel surveillance of the influenza activity

Weekly percentage of consultations, 2004/2005/2006



Sentinel:	Influenza consultations (as percentage of total consultations)
Basal curve:	Expected frequency of consultations under non-epidemic conditions
Alert threshold:	Possible incipient epidemic

18 January 2006