



**PENNSYLVANIA DEPARTMENT OF HEALTH
HEALTH ALERT #14**

Date: October 18, 2001
Subject: Update: Anthrax Cases and Exposures
To: Health Alert Network
From: Robert S. Zimmerman, Jr., MPH
Secretary of Health

**HOSPITALS: PLEASE SHARE THIS WITH ALL MEDICAL, PEDIATRIC, NURSING,
LABORATORY, RADIOLOGY & PHARMACY STAFF IN YOUR HOSPITAL**

PROFESSIONAL ORGANIZATIONS: DISTRIBUTE TO YOUR MEMBERSHIP

Pennsylvania:

There have been NO confirmed cases of anthrax illness or exposure anywhere in the Commonwealth.

New York City:

A third case of cutaneous anthrax has been identified in New York City. This case occurred in a 27 year old female who works at CBS News and has primary responsibility for opening and responding to the mail. The patient does not recall a specific threat letter that may have been the source of exposure. On October 1st, she noticed two small papules on her face, and over the next 24 hours she developed significant facial swelling. Associated symptoms included nausea, diarrhea, sore throat, and cervical lymphadenopathy. She was treated empirically with Augmentin for 5 days for a presumed infected insect bite. After several days she developed a blackened eschar. On October 12th, after announcement of the NBC case, the patient was reported to the NYCDOH and was empirically started on ciprofloxacin. A dermatology consult was obtained, and the skin biopsy was positive by immunohistochemical staining at CDC for the cell wall antigen of *B. anthracis* and ELISA IgG antibody to protective antigen. No recommendations for prophylaxis have been issued. Patients with possible exposure in the CBS News building should contact the NYCDOH PUBLIC HOTLINE at 1-877-817-7621 for advice about prophylaxis.

This is the third case of cutaneous anthrax diagnosed in New York City over the past week. All three cases have had an epidemiologic association with a major news network. The first case occurred in a 38 year old female who works for NBC News; she developed a lesion on September 25. The second case occurred in an infant whose mother works for ABC News; he developed a skin lesion on September 29, one day after visiting his mother's office. Of note is that the preliminary diagnosis on all three cases was an infected insect bite (a brown recluse spider bite was the leading diagnosis for both the first and second case), emphasizing the importance of considering anthrax in the differential diagnosis of an ulcerative or necrotic lesion, especially if associated with surrounding edema, vesicles and a blackened eschar.

On October 17, 2001, anthrax spores were detected in a midtown Manhattan office used by New York Governor Pataki. Full-time employees who work on the 39th floor of 633 Third Avenue are being offered prophylaxis with ciprofloxacin. **All other persons, including visitors to the 39th floor, family members and workers on other floors do not need to be treated.**

Washington, D.C.:

On October 15, 2001, Senate Majority Leader Tom Daschle's office in the Hart Senate Office Building received a letter containing a powdery substance which tested positive for anthrax. Approximately 30 Senate staffers have tested positive for anthrax exposure. The Centers for Disease Control and Prevention has recommended **60 days of prophylaxis with ciprofloxacin, doxycycline or amoxicillin for anyone who spent time on the fifth or sixth floors of the southeast corner of the Hart Senate Office Building on Monday, October 15, 2001, between 9 am and 7 pm.**

Nasopharyngeal swabs and blood testing are NOT recommended. People in other parts of the building or the Capitol complex, or who were not there during this time frame do NOT require any prophylaxis.

The October 19, 2001 issue of the *Morbidity and Mortality Weekly Report* (MMWR) contains two articles of interest, "Update: Investigation of Anthrax Associated with Intentional Exposure and Interim Public Health Guidelines, October 2001," and "Recognition of Illness Associated with the Intentional Release of a Biologic Agent," which should provide further guidance to health care and public health practitioners. The entire issue is available at the following URLs:

http://www.cdc.gov/mmwr/mmwr_wk.html or

<http://www.cdc.gov/mmwr/PDF/wk/mm5041.pdf> (Adobe Acrobat camera-ready format)

The following satellite and webcast should also provide additional useful information:

Anthrax: What Every Clinician Should Know

An American Hospital Association, American Medical Association, Public Health Training Network and Centers for Disease Control and Prevention broadcast.

Live Broadcast Thursday Oct. 18, 2001

4:00 PM - 5:30 PM EDT

Re-Broadcast Monday October 22, 2001

5:00 PM - 6:30 PM EDT

This live satellite and web broadcast will present clinical guidelines and procedures for the early recognition, diagnosis, treatment, and reporting of anthrax exposure. A panel of experts from the Centers for Disease Control and Prevention will provide an overview of clinical, laboratory and public health preparedness for potential *Bacillus anthracis* incidence.

Exposure incidents will be emphasized. A question and answer session will enable participants nationwide to pose questions to panelists fax or e-mail during the program.

Goal: To provide physicians, nurse clinicians and other health care workers serving in private offices, hospitals and public health settings with an update of how to correctly recognize, test, diagnose, treat and report cases that could be attributed to *Bacillus anthracis* exposure.

Objectives:

After the satellite broadcast, participants will be able to:

- * Describe the critical role the front line medical practitioners play in the public health system's surveillance of *Bacillus anthracis* exposure.
- * Describe the proper clinical practice for early recognition, testing, diagnosis, treatment and reporting of anthrax exposure.
- * Provide accurate and relevant information about *Bacillus anthracis* and the risk it poses to individuals and the community.

Target Audience: Physicians, nurse clinicians and other health care workers serving in private offices, hospitals and public health settings.

Expected Participants:

- * Tommy Thompson, Secretary, Department of Health & Human Services
- * Jeffrey P. Koplan, MD, MPH, Director, Centers for Disease Control and Prevention
- * Ed Baker, MD, Director, Public Health Practice Program Office, Centers for Disease Control and Prevention
- * Bradley A. Perkins, MD, Centers for Disease Control and Prevention
- * David S. Stephens, MD, Centers for Disease Control and Prevention, and Emory University

Sponsors:

- * American Hospital Association,
- * American Medical Association
- * Public Health Training Network, Centers for Disease Control and Prevention
- * University of North Carolina School of Public Health.

Satellite Technical Specifications:

Broadcast Signal Date and Time: Thursday, October 18, 2001 - 4:00 PM - 5:30 PM EDT

Test signal 2:00 PM EDT

Re-Broadcast Monday October 22, 2001 5:00 PM - 6:30 PM EDT

Test signal 4:30 PM EDT

C Band:

Satellite: Galaxy 4R
Longitude: 99° West
Channel 19
Downlink Frequency: 4080
Polarization: Horizontal
Audio Frequency: 6.2 & 6.8

Ku Band:

Satellite: Galaxy 4R
Longitude: 99° West
Channel: 21
Downlink Frequency: 12117
Polarization: Horizontal
Audio Frequency: 6.2 & 6.8

Additional Networks

- HSTN
- LTCN
- JCSN

PHYSICIANS: Contact the Pennsylvania Department of Health at 1-877-PA-HEALTH or your local hospital to find a viewing site.

This broadcast will be closed-captioned.

Web Cast Information

A link to the web cast will be provided on the day of the broadcast at www.cdc.gov/phtn. The program will be accessible after its conclusion at the same URL; look for the link to the Anthrax broadcast.

Numbers for Call-In During Program

FAX: 888-361-4011

E-mail: phtnlive@cdc.gov

Technical Assistance Line: 888-626-8730

Audiobridge Information: An audiobridge will be available for those unable to arrange for a viewing location.

1-888-917-8047 After dialing you will be prompted to say the following information:

Verbal Passcode: Dr. Koplan

Leader Name: Jo Ann Bittle

This information is current as of 2 pm, October 18, 2001, but may be modified in the future. We will continue to post updated information regarding the most common questions about this subject as well as the latest information on our preparedness efforts.