



Bulletin No. 13  
July 26, 1974  
Salmonellosis in Juneau

From July 7, 1974 through July 26, 1974, 28 laboratory confirmed cases of salmonellosis occurred in a trailer court outside of Juneau, Alaska. In addition, two dozen suspected cases occurred. All of the cases have occurred in or traced to a trailer park and condominium development with its own separate water system.

Epidemiologic investigation has demonstrated a waterborne spread for this epidemic from a contaminated water system. Control measures have been instituted and a different water system with adequate chlorination is now being used. Three of the cases were hospitalized and there were no deaths.

Salmonellosis is usually a self-limiting disease requiring no antibiotics. The administration of antibiotics serves to prolong the fecal excretion of the organism and may, in fact, lead to antibiotic resistance. Hence, most authorities recommend withholding antibiotics and using them only for cases of sepsis or severe diarrhea requiring hospitalization.

(Reported by Bea Shepard, Microbiologist, Southeast Regional Laboratory, Dr. Frank Pauls, Director of Laboratories, Margaret Bixby, PHN, Acting Southeast Regional Health Officer, Lyle Hubbard, Sanitarian and Ron Flynn, Sanitarian.)

### **Botulism in Sheldon's Point**

On July 19, 1974, a 39-year-old male Eskimo from a fish camp near Sheldon's Point was flown to Bethel because of respiratory difficulty. Upon arrival the patient was noted to have dilated fixed pupils, dry mouth, muscle weakness involving principally the head and upper extremities and diarrhea. During examination the patient had a respiratory arrest, and was successfully intubated. However, he expired on July 22nd, despite treatment with Botulism trivalent antitoxin.

On July 17, 1974, the patient and his wife had eaten a white fish (at the fish camp) which had been caught nine days earlier. During the nine days the fish had been placed in a plastic bag and put inside a smokehouse.

Unfortunately, the antitoxin was administered prior to drawing serum for toxin analysis precluding a definitive diagnosis. Nonetheless, the clinical picture is virtually diagnostic for botulism.

(Reported by George Brennerman, M.D., David Templin, M.D., Roger Ranch, P.A., Jeanette Pitcherella, PHN, John Kuhn, Sanitarian and Thomas Bender, M.D.)