



Bulletin No. 2
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Pertussis in Juneau

On January 18, a two-month-old boy was air evacuated to Seattle with pertussis. The child had received one DTP and one oral polio vaccine. Contact tracing did not reveal the source of infection. However on January 19, another child, six weeks old, was diagnosed with pertussis. Further contact tracing is underway and close surveillance is being maintained in the Juneau area.

In 1977, several cases of pertussis occurred in Juneau. When a case of pertussis is diagnosed, we recommend the following:

1. Isolation
2. Erythromycin - 40 to 50 mgs. per kilogram per day for seven days for the patient and for contacts.
3. Vaccination with DTP, if the patient or contact is less than six years of age and has not adequately completed the primary series or had a DTP in the last three years. Adult contacts should not routinely receive booster DTP.

PENICILLINASE-PRODUCING NEISSERIA GONORRHEA (PPNG) - FIRST ALASKAN CASE

Penicillinase-Producing Neisseria gonorrhoea (PPNG) first appeared in the United States more than a year and a half ago. Since that time, more than 200 cases have been reported from 26 states and Guam. The first case of PPNG in an Alaskan has now been documented in a 17-year-old male who traveled to the Philippines in December of 1977. Symptoms occurred shortly after the patient's return to Alaska in January. The patient immediately sought treatment and because of his recent travel history, a test was done to see if PPNG organisms were involved. The patient was initially treated with 4.8 M.U. of Aqueous Procaine Penicillin G. Following treatment, the patient noticed decreased urethral discharge but symptoms of dysuria and incomplete voiding persisted. Laboratory confirmation of the presence of PPNG organisms resulted in the patient's subsequent retreatment with 2 gms. of Spectinomycin. Follow-up test-of-cure cultures have been negative. Epidemiologic follow-up revealed that the patient had no contacts in Alaska.

In the future, more cases of PPNG will occur in Alaska. To continue surveillance in Alaska, the Section of Communicable Disease Control recommends the following:

1. "Test-of-cure" cultures should be performed on all patients treated for gonorrhoea 3 to 7 days after completion of treatment.
2. If the "test-of-cure" culture is positive, an additional culture should be sent to the State Laboratory requesting that a test for PPNG be performed.
3. Documented treatment failures should be retreated with 2 grams of Spectinomycin intramuscularly.
4. Call Dr. John Middaugh, Medical Epidemiologist at 272-7534, for epidemiological assistance on all patients identified as having PPNG.

(Reported by David Bourne, Anchorage Municipal VD Clinic)