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Aseptic Meningitis in Juneau

Since September there have been 17 patients from Juneau requiring lumbar puncture for an illness best described as aseptic meningitis. The most prominent symptoms recorded have been headache (94%), fever or history of fever (56%), photophobia (38%), and myalgias (31%). Ten of the 17 patients have had abnormal CSF compatible with aseptic process. CSF cell counts have ranged from 25 to 1284 cells, the majority having a mononuclear predominance. The maximum CSF protein has been 79 mg %; all glucose values have been normal, and all CSF cultures sterile. Presently throat specimens from two patients submitted to the state Virology/Rabies Unit for viral culture have yielded isolates. One appears to be a rhino virus and probably unrelated, and the second an enterovirus - an enteroviral etiology is expected and if other isolates of the same virus plus serologic evidence of recent infection with this virus can be established in other patients then the etiology would be established.

Interestingly, there is epidemiologic evidence to suggest the incidence of this illness has been greater since November 1 and that the illness is continuing to occur. Communicable Disease Control is not aware of similar illness occurring at any other location in the State and would like to hear of cases fitting the syndromes of febrile headache, aseptic meningitis, or viral encephalitis.

Although two patients with this illness have required further evaluation in Seattle, there have been no known neurologic sequela associated with the illness.

The occurrence of this outbreak emphasizes the importance of communicable disease reporting. In this case the careful observations and communication between Juneau physicians led to the correct suspicion that an outbreak was occurring. By notifying Communicable Disease Control an investigation was begun which has helped establish etiology, extent, and seriousness of the illness. This in itself often softens both public and professional anxieties. Often the investigations also lead to effective control measures. For example, if the virus of lymphocytic choriomeningitis were to be found as the etiology of the Juneau outbreak, rodent control measures could be instituted - and without proper investigation this outbreak would continue uncontrolled and possibly unrecognized.

As a hint, we would like to remind everyone that when dealing with possible enteroviral illness the chances of recovering the virus are greatly increased when stool swabs as well as throat cultures are submitted for virus isolation. Also, remember that due to the large number of serospecific viruses within the enteroviral group, serologic testing for coxsackievirus or ECHO viruses cannot be done without an isolate.