



Community & Hospital Letter

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NHANES is Coming to Town

THE NATIONAL HEALTH AND NUTRITION EXAMINATION SURVEY (NHANES) is coming to the metropolitan area in August. NHANES is a unique study that gathers information from people all over the United States each year to learn more about the health of the nation. The first NHANES study was conducted in the early 1960s and never, in the >40 years of operation, had NHANES included the Kansas City area.

Over the years, data collected by NHANES surveys have led to the development of the growth charts used from infancy to adolescence, identification of high levels of lead in people's blood that then led to removal of lead from gasoline, identification of health problems linked with overweight, delineation of number of problems caused by undiagnosed diabetes, and inclusion of vitamins, calcium and minerals to food to help prevent poor nutrition. These are just a few examples of the utility and richness of the NHANES data in improving the health status of Americans.

The 2005-2006 NHANES will collect information on anemia, cardiovascular disease, diabetes, environmental exposures, hearing loss, infectious diseases, kidney disease, mental health and cognitive functioning, nutrition, obesity, oral health, osteoporosis, physical fitness and functioning, reproductive history and sexual behavior, respiratory disease (asthma, chronic bronchitis, emphysema), sexually transmitted diseases, and vision.

The Centers for Disease Control and Prevention's National Center for Health Statistics is the organization responsible for NHANES and each year 15 counties and about 5,000-7,000 persons are selected for participation in the study. This year Jackson County, Missouri, was selected. Using Census 2000 data, 24 residential areas were selected for inclusion, including 15 in Kansas City. Within a residential area, certain houses are preselected for sampling. However, until contacted by the NHANES

staff, who the residents of those houses are is unknown to the interviewers.

The NHANES process consists of two steps. The first step is contacting the persons living in each of the preselected houses and asking them to participate in a short interview. The goal in Jackson County is to complete 635 screening interviews. The second step involves asking some people to participate in more detailed interviews and physical examinations. For Jackson County the goal is 356 persons, although the NHANES staff expect only about 277 persons will actually complete the physical examinations.

In Jackson County, the interview portion of the study will be conducted in August and the physical examinations will be done in September. For the physical examinations, NHANES will bring into the community medical trailers with the appropriate screening equipment and staff. These trailers are interconnected and will be set up near Troost and Emanuel Cleaver II Blvd. Persons participating in the examination phase are financially compensated and receive a report of their findings, if they choose. Should a condition be found that warrants further follow-up, the NHANES will provide local referrals if necessary.

What the NHANES data will not do for the metropolitan area is to provide estimates of the local prevalence of the conditions screened for. The design of the study yields data applicable in a national aggregate and not at the local level.

More information about NHANES is available at www.cdc.gov/nhanes and NHANES reports are available at www.cdc.gov/nchs.

The Kansas City Health Department has released its *Community Health Assessment 2005* report. It is available at: www.kcmo.org/health.

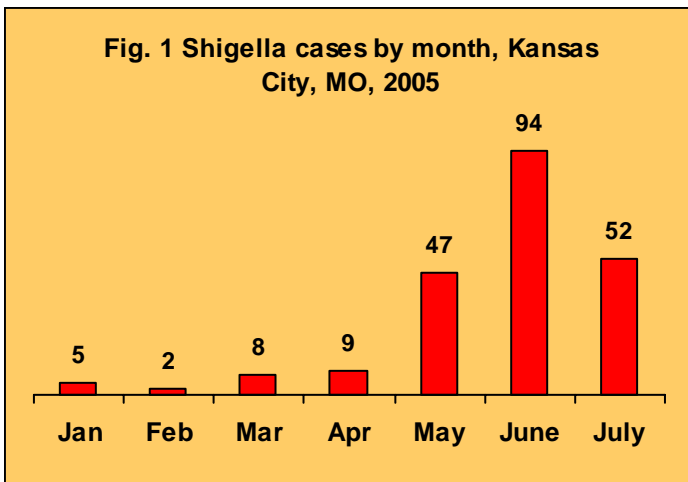
Community-wide Shigella Outbreak, KCMO— Update

ACCORDING TO the Centers for Disease Control and Prevention (CDC), an estimated 360,000 people in the United States become ill with shigellosis each year, although only about 18,000 cases are reported to public health agencies. Kansas City is currently experiencing a community epidemic of shigellosis with some 198 cases

partment has developed a handout on steps to take to minimize the risk of infection with the shigella bacteria. In the 3 census tracts mentioned above, the flyer is being passed out to patrons of grocery and convenience stores and through neighborhood associations. The Missouri Daycare Licensing program has distributed fliers to all licensed day care centers in the state, while the Kansas City Health Department's environmental inspectors are distributing them to food establishments, swimming pool operators, and day care centers citywide as part of their routine inspection processes.

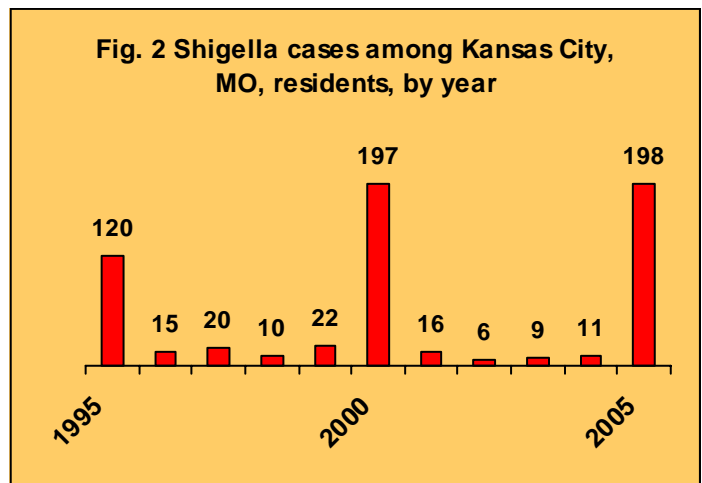
Kansas City is not alone in having a community wide shigellosis outbreak. The Lexington-Fayette County Health Department in Kentucky has a similar situation, with 111 cases since May.

Shigellosis outbreaks in Kansas City are cyclic, occurring at about 5 year intervals (Figure 2).



having been reported as of the 3rd week of July. Ninety percent of the cases are among children ≤ 5 years old, with 60-70% of these children being enrolled in day care. The distribution of cases is shown in Figure 1 and although the July numbers will increase some, the peak of the outbreak may have occurred in June. The majority of the *Shigella sonnei* isolates that have been PFGE typed belong to the same or a very closely related strain. The cases are occurring across the City, as well as the metropolitan area, but are heavily concentrated in 3 census tracts in the center City.

In response to this outbreak, the Kansas City Health De-

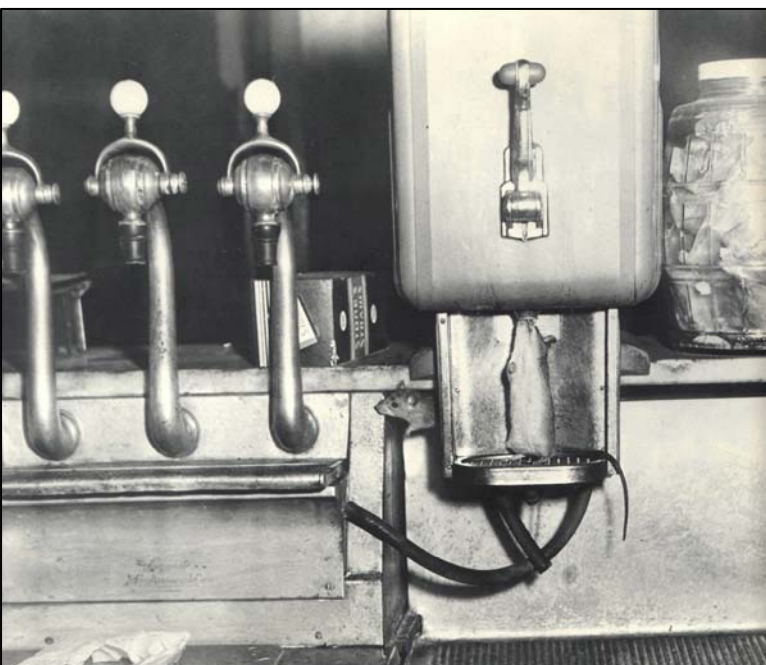


The Kansas City Health Department will be offering its 4-day Principles of Epidemiology Course on November 14th to 17th. This is an introductory course to applied epidemiology. The course is free and enrollment is limited to 15 persons.

To enroll send an e-mail to Gerald_Hoff@kcmo.org.

munity like Kansas City, there are species of rats and mice that live in the wild, seldom invading homes or businesses and there are species that prefer to survive in close proximity to humans. It is the latter that cause the most anxiety for Kansas City Citizens. While these animals pose minimal risk of infections to people, they do have the potential, in the proper situations such as restaurants, to contaminate large quantities of food with their feces and/or urine.

In the home situation, rats and mice likewise can contaminate food products, damage the housing unit, and, with rats in particular, bite the people living in that unit.



Rat bites are not reportable to Animal Control or the Health Department so there are not readily available data on the frequency of such incidents.

There are few predators for rats and mice that live in close proximity to people. Mice probably are preyed upon by snakes, owls, hawks, and the occasional cat. Adult rats would be less likely to experience much predation. Therefore, earlier in Kansas City's history, government spent considerable money in efforts to reduce and control rodent populations. However, the final vestiges of those efforts terminated in 2003 when the City Council defunded the limited activity that was occurring.

On the 27th of July 2005, in response to complaints about rats, the City Manager made \$50,000 available for rodent control primarily targeted at areas of the community where storm drain improvement work was depriving many rats of refuge causing them to seek living accommodations in the homes of neighborhood residents. While the Water Services Department will conduct the majority of rodent control efforts, the Health Department has been charged with educating people about rodent habitats and how best to eliminate them. The City's control efforts will focus on its property and not on private property. Homeowners and business owners will be responsible for controlling and eliminating rodents from their properties. Citizens are asked to call the Action Center (513-1313) to report rodent problems so they can be abated.

Hantavirus Update

HANTAVIRUSES in the Western Hemisphere are associated with hantavirus pulmonary syndrome (HPS). Sigmodontine rodents carry the hantaviruses that cause HPS and are found throughout the Americas. Sin Nombre virus, carried by *Peromyscus maniculatus*, is the predominant cause of HPS in the United States and Canada. Mononghela, New York, Bayou, and Black Creek Canal viruses also cause HPS and are found in eastern Canada and the eastern and south eastern US.

Since the first documented hantavirus cases in May 1993, there have been 396 cases in the US reported as of 6th July 2005. Hantaviruses pose a risk to both the general public and to biologists working with wild rodents. On the 23rd of July, a report on ProMED described hantavirus infection in two University of Colorado researchers working on rodent populations in various locations in the state.