Diphtheria Strikes Anchorage

On February 4, 1974, a 39-year-old Eskimo woman was seen in Anchorage at the Alaska Native Medical Center with a three-day history of sore throat. Examination revealed exudative tonsillitis and culture showed toxigenic diphtheria. The patient has been a resident of Anchorage for many years and admits to frequenting the bars along Fourth Avenue. The patient was treated with penicillin and fortunately developed no neuropathy or cardiopathy. Efforts are underway to trace her contacts to determine the extent of diphtheria that exists in Anchorage’s Fourth Avenue population.

On February 19, 1974, a 30-year-old Caucasian male was admitted to Providence Hospital with cranial nerve neuropathy and respiratory impairment requiring tracheostomy. Diphtheria was considered in the diagnosis and although this has not been proven, the patient was treated with diphtheria antitoxin.

With diphtheria existing in Anchorage physicians should consider this diagnosis in anyone with an exudative pharyngitis. Culture media for diphtheria may be obtained from the Regional State Laboratories.

(Reported by Tim Samuelson, M.D., Dennis Beckworth, M.D., Royce Morgan, M.D., Thomas Feller, M.D., George Stewart, M.D., Keith Brownsberger, M.D., Jack Smith, M.D., Dave Beal, M.D., and Barbara Jared, PHN.)

Influenza ? ? ? ?

High absenteeism from Anchorage Elementary and Jr. High Schools continue to be reported. While the illness is compatible with influenza, culture confirmation has still not occurred. Facilities to culture influenza are available in Alaska. Any physician suspecting influenza in a patient and wishing to obtain a culture should contact the State Medical Epidemiologist, Dr. Mickey Eisenberg, at 272-7534 (Anchorage).

Reports of Influenza B activity in the lower-48 have come from 21 states, mostly in the mid-West. The West Coast has been relatively spared and no portion of the country reports true epidemic incidence. The younger children seem to be the most involved age group.