



**State of Hawaii  
Department of Health  
P.O. Box 3378  
Honolulu, HI 96801-3378**

January 31, 2005

To: Norman Goldstein MD, Editor, Hawaii Medical Journal  
Fr: Chiyome L. Fukino MD, Director of Health

The Hawaii Administrative Rules, Title 11, Department of Health, Chapter 156, may be viewed at the URL: [www.hawaii.gov/health/about/rules/11-156.pdf](http://www.hawaii.gov/health/about/rules/11-156.pdf).

**Re: Reporting Eosinophilic Meningitis**

In response to several cases of eosinophilic meningitis attributed to angiostrongyliasis, the Hawaii Department of Health (HDOH) will be investigating a possible increase in the prevalence of eosinophilic meningitis/angiostrongylus infection in Hawaii.

Thank you for your assistance and cooperation.

Sincerely,

Chiyome Leinaala Fukino MD  
Director of Health

**Pursuant to the authority vested in the Director of Health in Hawaii Revised Statutes § 11-156-3(c), effective immediately, health care providers in Hawaii are required to report patients with eosinophilic meningitis, i.e., signs and/or symptoms consistent with meningitis plus eosinophils in the cerebrospinal fluid (CSF).**

Reports of eosinophilic meningitis should be communicated within three days of identification by telephone to the (HDOH), preferably as soon as for other notifiable conditions and are listed below.

| Contact                               | Phone No. | After Hours  |
|---------------------------------------|-----------|--------------|
| Oahu, Field Investigation Section     | 586-4586  | 808-566-5049 |
| Hawaii, District Health Office (Hilo) | 933-0912  | 808-360-2575 |
| Hawaii, District Health Office (Kona) | 322-4877  | 808-360-2575 |
| Maui District Health Office           | 984-8213  | 808-360-2575 |
| Kauai District Health Office          | 241-3563  | 808-360-2575 |

*Angiostrongylus cantonensis* has been documented in various Hawaiian snail and slug species since at least the 1960's but the frequency of human infection here has not been well characterized. By making eosinophilic meningitis notifiable, we hope to obtain the information needed to assess potential trends and identify modifiable risk factors.

Angiostrongyliasis should be considered in any meningitic persons with CSF eosinophilia. Diagnostic suspicion should be increased for such patients who also have exposure history consistent with eating inadequately washed fresh vegetables and/or mollusks (i.e., snails and their relatives) or crustaceans (i.e., shrimp and their relatives) here in Hawaii. Definitive diagnostic testing is limited; clinicians should contact investigators in the HDOH Disease Investigations Branch for assistance.

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