entirely preventable and directly related to economic and educational disparity.

Methods: The World Rabies Day initiative arose from a group of rabies prevention professionals who built partnerships with the World Health Organization, the World Organization for Animal Health (OIE), the Centers for Disease Control and Prevention, Pasteur Institute, and other organizations. This initiative advocates for improving the health of the whole population, human and animal, - a ‘One Medicine Approach’ - by raising awareness about the need to control rabies in the main global animal reservoir, the domestic dog, and prevent human rabies through education and appropriate medical prophylaxis.

Results: During the inaugural year, at least 74 countries participated through a wide variety of events including vaccination clinics, educational seminars, media outreach, museum and zoo exhibits, parades, festivals, dances, puppet shows, runs, and dog walks. Summary data indicates that nearly 400,000 people participated in a World Rabies Day event, over 600,000 animal vaccinations were administered and more than 54 million people were educated worldwide. In some countries, rabies experts convened to discuss goals and plans for rabies prevention and control, with several initiating a national program. Veterinary colleges joined forces towards this effort, with activities at 24 in the US, 15 in India, 5 in Indonesia, and several in Mexico, Peru, The Philippines and other countries

Conclusions: The first World Rabies Day was a major achievement for the rabies prevention community. These efforts are envisioned to be part of comprehensive human and animal health delivery that would develop and augment public health and veterinary infrastructure in regions of greatest need. Now is the time for ‘Working Together to Make Rabies History!’

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Epidemiology of Bacterial Infections (Poster Presentation)

69.001

Investigation of Common Microorganisms in Patients with Brain Abscess

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Background: Brain abscess is a Focal collection within the brain parenchyma. Despite the technological advancements in diagnostic and neurosurgical procedures, brain abscess continues to remain a potentially fatal central nervous system infection.

Methods: In a descriptive study, we evaluated 30 cases of brain abscesses treated at Lohman Hakim hospital from March 2003 to December 2006.

Results and conclusion: Out of 30 patients 20 (66.7%) were males and 10 (33.3%) females. Mean age was 32 years (range 8 years to 70 years). There was a peak at 20 to 29 years. Predisposing factors were identified in 20 (66.7%) patients. The common predisposing factors were otic infection (26.7%), I.V. drug use (16.7%), neurosurgery (13.3%) and penetrating head trauma (6.7%). The most frequent presenting signs and symptoms were headache (73.3%), nausea and vomiting (70%), fever (50%), focal neurologic defects (50%) and mental status changes (46.7%). Triad of fever, headache and focal deficit were seen in 20% of patients. Solitary abscess was found in 70% of the cases while in 30% of the cases multiple abscess were found. Frontal lobe and parietal lobe were the commonest sites involved.

Cultures were found positive for microorganism in 66.7% of the cases. 45% of which were aerobic and 55% anaerobic bacteria.

Staphylococci (30%), peptostreptococcus (25%), bacteroids (20%) and streptococcus (15%), were the commonest isolates.

Third generation cephalosporins and metronidazole and vancomycin were used most often for empirical therapy. Burr hole aspiration was done in only 50% of the cases. Overall mortality was 23.3% in this series. Mortality rate was 33.3% in patients with medical treatment.

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Incidence of Brucellosis in Shazand County, Iran, 2006


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Background: Brucellosis is a major zoonosis with a worldwide distribution and represents a serious public health problem in many developing countries. The aim of this study was to figure out the annual incidence rate of Brucellosis in Shazand County.

Materials and Methods: All patients living in Shazand county, with a clinical picture compatible with Brucellosis plus to positive laboratory results were included in this study. Positive laboratory results were defined by the Ministry of Health as Wright agglutination titer ≥1/80 and ZME titer ≥1/40. A questionnaire including Demographic data, symptoms and onset of the problem were filled in by every patient. The data was analyzed by means of SPSS software version 14.

Results: In this questionnaire based study, out of the 145 patients, who participated in this study, 95 were male and 50 were female. 72 patients were above 40 years old, 73 had less than 40 years of age and among them 3 people were under 10 year old (2%). 40% of patients had presented during summer months. Incidence rate was 13.1 per 10000 population.

Conclusion: The incidence rate in Shazand County was 13.1 per 10000 population and thus has not changed much compared to a year before (13/10000). The incidence rate in Markazi state, where our county is located, has been 7.3 per 10000 population, so the prevalence of Brucellosis in Shazand county has been much higher than expected.Unfortunately in IRAN there is no annual rate available, we just know that it had been 24 per 10000 about 8 years ago. Incidence of Brucellosis in European countries is far less than that (0.01/100000) which indicates the need for further preventive measures for vaccination of the cattle
A Large Outbreak of Water-Borne Typhoid Fever Attributed to Contaminated Well in a Coastal City, China

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Keywords: Typhoid fever; Outbreak; Waterborne; Field epidemiology

Background: On October 15, 2006, the China information system for disease control and prevention revealed typhoid fever (TF) cases increasing greatly from October 7, comparing with the same period of the previous year, in a coastal city, P.R. China.

Objective: To identify its epidemiological cause, and develop its control measures.

Methods: TF case was defined as any case involving onset of fever between October 7 and December 15, 2006, plus the following: high fever (>38.5°C), headache, malaise, intestinal hemorrhaging, myalgia, or rose-colored spots on the skin, and with the laboratory result of the decreasing Eosinophil cell or Widal test (+) in Jiaojiang district. The first 25 cases from October 7 and 100 controls randomly chosen from neighborhood of each case, age referring to +5 year old, were selected to carry out a case-control study, through questionnaire. Well water was randomly selected to detect the total bacteria, Coliform group. The chi-square test and non-conditional logistic regression analysis was used for statistical significance was assessed by the two-sided test with the test level equaling 0.05.

Results: Totally 58 typhoid cases, including 29 confirmed and 29 probable cases were identified between October 7 and December 15, 2006. The cases were mainly non-residents. Through non-conditional logistic regression analysis, the result showed that mode to use well water (Odds Ratio [OR] = 5.71, 95% Confidence interval [95% CI] = 2.23—14.59) and eat outside (OR = 8.18, 95% CI = 1.51—44.26, AR = 0.27) was the main causation of this outbreak. In addition, through chi-square test, the result also shows that Xiamia market (OR = 5.46, 95% CI = 1.61—20.37, AR = 0.23), cooked food taking (OR = 4.13, 95% CI = 1.44—11.92, AR = 0.27 may also the suspected risk factors of this outbreak. The number of total bacteria and Coliform group in well water both far outnumber the standards. Further more, through non-residents. Through non-conditional logistic regression analysis was used for statistical analysis. Statistical significance was assessed by the two-sided test with the test level equaling 0.05.

Conclusion: This TF outbreak was mainly caused by the inappropriate manner to use contaminated well water system, probably by septic tank seepage into storage well and unhealthy food habits. The epidemic was controlled by the effective measures.

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Epidemiological Risk Factors of Urban Leptospirosis in North Chennai (Tamil Nadu) - A South India Study

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Background: Leptospirosis is under diagnosed and under reported in India due to lack of awareness of the disease and lack of appropriate laboratory diagnostic facilities in most parts of the country. Out of 28 States and 7 Union Territories in India, leptospirosis is endemic in 5 States [Tamil Nadu, Kerala, Gujarat, Karnataka and Maharashtra] and in one Union Territory, Andaman and Nicobar Islands. Chennai (formerly Madras) is an important coastal metropolis in South India and has a land area of 172 kilometer square with a population around 6 million. The average yearly rainfall is about 1500 mm, with most rainfall coming from North East Monsoon (September - December). This study was undertaken to study the epidemiological profile of urban leptospirosis in North Chennai.

Patients and methods: Patients with fever admitted in Government Stanley Medical College and Hospital, tested positive for leptospirosis utilizing Macroscopic Slide Agglutination Test (MSAT) titers of 2+ and above with Modified Faine’s score of >25 [Clinical (A) + Environmental (B) + Laboratory (C)] were taken up for study [confirmed by Microscopic Agglutination Test (MAT)]. These patients were evaluated for epidemiological risk factors as shown in Table below in addition to relevant clinical and lab profile. Other causes of fever were excluded with relevant investigations. This prospective study was undertaken from February 2006 to May 2007.

Results: 90 patients were analyzed. Males - 56 (62.2%); Females - 34 (37.7%) Age range: 13—74 years, Mean Age: 37.5 years.

All cases came from North Chennai, where majority of lower socio economic population reside. There were 86.6% outdoor manual workers, 7.7% housewives & 5.5% were students. 51% cases occurred between September to December. Contact with contaminated environment contributed to cases in other months. The epidemiological profile of our study group was shown in Table. The important factors in the contact with contaminated environment were, poor sanitation: 95.5%; walking barefoot: 85.5%; poor drainage facilities: 78.8% and contact with rodents in 33.3% cases.

Fever, Headache, Myalgia were the common presenting features and jaundice (23.3%), renal failure (16.6%) were the important complications noted. Mild cases were treated with oral Doxycycline and severe cases (with organ dysfunctions) with parenteral penicillin. One patient was dialyzed. There were no mortality.

Conclusion: This study revealed that,

(a) Poor sanitation, walking bare foot, inadequate drainage facilities were the important epidemiological risk factors due to contaminated environment in acquiring leptospirosis in North Chennai.

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