



# County of Santa Cruz

## HEALTH SERVICES AGENCY

PO BOX 962, 1060 EMELINE AVE., SANTA CRUZ, CA 95061-0962

PHONE: (831) 454-4114 AFTER HOURS: (831) 471-1170 FAX: (831) 454-5049 TDD: (831) 454-4123

### COMMUNICABLE DISEASE UNIT

## PUBLIC HEALTH ALERT

<b>To:</b>	<b>All Healthcare Providers</b>
<b>From:</b>	<b>Arnold S. Leff, MD, REHS, County Public Health Officer</b>
<b>Date:</b>	<b>November 16, 2018</b>
<b>Subject:</b>	<b>Wound Botulism Alert</b>

### Wound Botulism in Black Tar Heroin Users – Multiple Counties

#### Current situation:

The California Department of Public Health (CDPH) would like to alert local health jurisdictions and health care providers of an overall increase in reported wound botulism cases associated with injection drug use (IDU), including several local clusters, in California in 2018. Santa Clara County has had three confirmed wound botulism cases since mid-September, including one who was hospitalized in Santa Cruz County.

#### Background:

Between January 1 and November 5, 2018, the CDPH provided consultation and released heptavalent botulinum antitoxin (BAT) for 45 patients with suspected wound botulism. Botulism was laboratory-confirmed in 37 and probable (clinically compatible with history of IDU but without laboratory confirmation) in 6; 2 did not have botulism. Of the 43 confirmed and probable wound botulism patients, their median age was 46 years (range, 23 to 67), 67% were male, all were hospitalized, and one died. All 43 confirmed and probable wound botulism patients reported recent IDU, most with black tar heroin. Patients resided in 19 different local health jurisdictions, and several patients reported homelessness. There have been at least five IDU-associated wound botulism clusters in California in 2018. In 2017, there was a total of 20 confirmed and probable IDU-associated wound botulism cases reported to the CDPH; thus, there has been a 115% increase in the number of cases in 2018 to date from 2017.

#### Action Steps:

##### CASE RECOGNITION:

- **Consider/suspect botulism** in patients with drooping eyelids (ptosis), blurred vision, difficulty swallowing (dysphagia), and slurred speech, which can progress to a descending paralysis. Not all IDU-associated wound botulism patients present with a visible abscess or wound; and history of neurological symptoms may be difficult to obtain and may resemble drug intoxication or withdrawal. Therefore, clinicians need to have a high index of suspicion for botulism in patients with an IDU history. Prompt clinical diagnosis is imperative as timely administration of BAT may halt the progression of disease, lead to better outcomes, and save lives. Botulism is a rare but

potentially fatal illness caused by a neurotoxin produced by *Clostridium botulinum* bacteria. Wound botulism is the most common type of botulism in adults in California.

#### CASE REPORTING:

- **Clinicians must immediately report any patients with suspected botulism to local public health:** Contact Santa Cruz County Public Health / Communicable Disease Unit (CDU) via phone to **(831) 454-4114**. **After hours call (831) 471-1170** and ask to speak with the Health Officer on call, who will notify CDPH as necessary.
- State health officials are on call 24/7 to provide technical consultation for botulism testing and BAT release. The decision to administer BAT is based on clinical presentation; and **BAT administration should not be withheld pending laboratory confirmation**, which can take more than one week to finalize. Serum specimens (15 cc) for toxin testing must be collected *prior* to BAT treatment and should not be frozen, hemolyzed, or heparinized. Specimens should be refrigerated and sent via the local public health laboratory to CDPH Microbial Diseases Laboratory (MDL). Specimen testing is very rarely authorized without treatment with BAT.

#### PATIENT EDUCATION:

- Clinicians should alert their patients that injecting drugs may increase their risk of not only hepatitis and human immunodeficiency virus but also for botulism. **Persons who inject black tar heroin are at especially high risk for wound botulism** and that cooking or cleaning drug paraphernalia does not decrease a person's risk.

Additional information may be found at:

County of Santa Clara Public Health Department – Health Advisory Wound Botulism:

<https://mailchi.mp/phd.sccgov.org/health-advisory-wound-botulism-in-black-tar-heroin-users>

CDPH Botulism:

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Botulism.aspx>

CDPH Botulism Fact Sheet:

<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/BotulismFactSheet.pdf%23search=wound%20botulism>

U.S. Centers for Disease Control and Prevention Botulism:

<https://www.cdc.gov/botulism/>

National Help Line 24/7 at 1-800-662-HELP (1-800-662-4357)

If you have questions or information regarding possible cases, please call the Public Health Division's Communicable Disease Unit at (831) 454-4114.

**Health Alert:** conveys the highest level of importance; warrants immediate action or attention.

**Health Advisory:** provides important information for a specific incident or situation; may not require immediate action.

**Health Update:** provides updated information regarding an incident or situation; unlikely to require immediate action.

