

Good Practice and Adverse Drug Reactions

Maxime Coles MD

A-

Recently, a worker in Texas contracted the H5N1 bird flu virus after contact with infected cows which suffered from an eye inflammation (conjunctivitis). Weeks later, it was reported that a dairy worker in Michigan begins coughing and after being seen in the ER, he was also tested positive for the same virus.

In a medical laboratory, a ferret in its cage, was also found infected via airborne with the same virus, transmitted from a sick ferret in a nearby cage. This other ferret was contaminated by another ferret in its cage.

H5N1 is known as the agent avian influenza A virus, a bird flu strain that is infecting Humans, causing a range of illness. It can be also fatal. Early Symptoms are conjunctivitis, sore throat, cough, muscle aches, malaise followed by shortness of breath, difficulty in breathing, altered mental status, abdominal pain and diarrhea.

H5N1 is presently widespread in wild birds and many outbreaks in poultry. In farms with dairy cows, rare human cases have been reported above.

The CDC is watching a situation which is for the moment at low risk for humans. Be careful when exposed to contaminated animals with the H5N1 bird flu virus.

B-

Another health advisory is on “Acute Flaccid Myelitis”: Let us transmit some recommendations from the New-York Department of Health.

Acute Flaccid Myelitis (AFM) is a rare but serious paralytic condition characterized by the rapid onset of flaccid weakness one or more extremities. It affects the nervous system especially the gray matter of the spinal cord, causing loss of muscles reflexes in the body.

AFM is an uncommon disease and more than 30 cases have been diagnosed in New-York state with less than 750 cases through the USA. The cases involved young children and can be identified especially between the months of August and November.

Not one pathogen has been detected in patients suffering from the disease but it is suggested that an enterovirus may be responsible because persons tested for the

enterovirus EV-D68 were found to have more severe symptoms of the disease requiring intensive care and mechanical ventilation.

AFP shares many symptoms with Poliomyelitis with acute flaccid weakness in people unvaccinated for polio or in immunocompromised patients. If such pathology is suspected, individuals should be tested for AFM, EV-D88 and poliovirus via two stool specimens collected in 24 hours apart, a spinal tap (cerebrospinal fluid), Serum, Swabs NO/OP.

A typical case presentation will follow this pattern:

Patients may present or report a febrile respiratory or gastro-intestinal illness with cough, rhinorrhea or vomiting and diarrhea for one to two weeks prior to the onset of the neurological symptoms. (weakness in all limbs more proximal than distal, facial or eye droop, difficulty in swallowing and speaking, hoarse or weak cry). People may report stiff neck, headaches, extremity pain with numbness and tingling.

An MRI may show a spinal lesion with gray matter involvement, unrelated to malignancy or vascular disease. The more severe symptoms of AFM are Respiratory Failure requiring mechanical ventilation and other neurological complications.

Maxime Coles MD

Boca Raton (FL June 2024)