CA-MRSA has been shown to carry many additional virulence genes [2,4,7].

The National MRSA Reference Laboratory is inviting microbiology laboratories throughout Ireland to submit suspect isolates for testing.

Adapted from reference 1 by the Eurosurveillance editorial team.

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TRICHINELLOSIS OUTBREAK IN LATVIA LINKED TO BACON BOUGHT AT A MARKET, JANUARY-MARCH 2005

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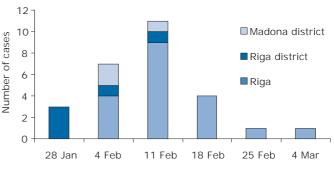
Between January and March 2005, 45 trichinellosis cases were notified to the Public Health Agency (PHA) of Latvia. This represents a 246% increase on the same period in 2004, and involved 42 patients in three outbreaks, and three sporadic cases.

The largest of these outbreaks affected 27 patients and occurred between 28 February and 14 March. Cases occurred in three administrative territories (Riga, the capital of Latvia, the district around Riga, and the Madona district). Epidemiological analysis linked the infection to eating salted streaky bacon bought at Riga central market. Of the 27 patients, 18 were female and 9 were male. The average age of the patients was 41 (range: 13-60).

The main symptoms were weakness, nausea, facial oedema (more then half of the cases) and fever – in more than in half the cases, the body temperature exceeded 38°C. All the patients were admitted to hospital. The incubation period ranged between two and four weeks.

FIGURE 1

Patients in the 2005 Riga outbreak of trichinellosis, by onset of illness and place of residence



Week of onset (Week starting)

The Latvian Food and Veterinary Service (FVS) collected 37 meat samples from retail outlets identified in the investigation, and all tested negative for trichinella larvae. One retail outlet was found to be selling pork of unknown origin which came with falsified delivery notes, so the pork had not been tested for *Trichinella spiralis* in government-supervised inspections. The descriptive epidemiology of those who were ill strongly implicated this streaky bacon as the vehicle for infection. A case-control study was not carried out. It was not possible to confirm that the trichinellosis outbreak was caused by the bacon, as none was available for testing.

Trichinellosis situation in humans

Trichinellosis in both humans and animals is a mandatorily notifiable disease in Latvia, and sporadic cases must be registered and reported. All outbreaks are required to be reported. Since 2002, there has been a European case definition for reporting trichinellosis [1]. The laboratory diagnosis is by testing blood serum for antibodies to *Trichinella spiralis*.

Epidemiologists from the Public Health Agency investigate each case notified by a physician. The PHA, in collaboration with the Food and Veterinary Service (FVS), check the producers of implicated foods if there is reasonable suspicion that a business may be connected with the case. In cases of human trichinellosis due to consumption of animal products or when the *T. spiralis* parasite is found in animal products and there is a potential risk of human infection, the PHA and FVS cooperate in exchanging information.

In the past seven years (1998-2004), 247 cases have been reported in Latvia. Annual case numbers peaked in 2000 with 91 cases, which included four outbreaks involving a total of 77 cases.

In the period 2001-2004, the number of cases reported annually has remained steady (range: 20-24), with an incidence of between 0.7 and 1 case per 100 000 inhabitants. In the last five years, cases of trichinellosis have been identified in all the age groups above 1 year old.

FIGURE 2
Human trichinellosis cases in Latvia, 1998-2004

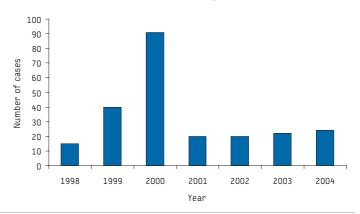
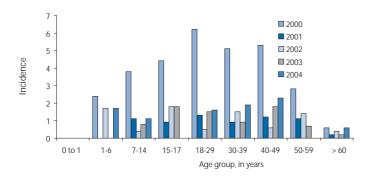


FIGURE 3

Incidence of trichinellosis per 100 000 population, by age group, 2000-2004



In the past four years (2001-2004), between one and three outbreaks have been identified each year, involving between 2 and 20 people. In each outbreak, the epidemiological investigation has shown that the infections were due to eating infected pork.

TABLE 1
Outbreaks of trichinellosis in Latvia, 2000-2004

Year	Total number of cases	Outbreaks	Total number of patients in all outbreaks
2000	91	4	77
2001	20	1	2
2002	20	3	13
2003	22	2	20
2004	24	3	13

Trichinellosis situation in animals

The FVS is responsible for surveillance, reporting and control of zoonoses in the animal population and the food chain. It has produced guidelines for slaughter houses for the veterinary examination of cows, sheep, goats and horses.

Diagnosis in the FVS slaughter house laboratory is by:

- Trichinoscopy and compression or
- Recovery of larvae after mechanical digestion of a sample.

All pig and horse carcasses are tested for trichinella larvae. If there are any positive results, the affected slaughterhouse is investigated and placed under restrictions while legally prescribed remedial measures are instituted. When animals are slaughtered at home, or hunted for personal consumption, the owner or hunter is responsible for ensuring the carcass is tested before it is consumed. (Table 2)

In the period 1999-2004, trichinellosis was identified in 3 pigs on one farm in 2000 and in 2 pigs on one farm in 2001. In each case the pigs were slaughtered at home without veterinary supervision. Every year, trichinellosis is found in large numbers of wild pigs.

To control trichinellosis outbreaks, the FVS organises unannounced checks on food producers that have been associated with trichinellosis outbreaks. In the first quarter of 2005, the FVS tested 58 samples from various retail grocery products (fresh pork, 17 samples; smoked pork and bacon, 33; salted bacon, 8) for Trichinella larvae. Trichinella larvae were not found in any of these samples.

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TABLE 2

Epizootic situation of trichinellosis in Latvia, 1999-2004

	Pigs		Wild pigs		Lynx		Beaver		Foxes	
Year	Number of checked animals	Positive cases								
1999	368 610	-	120	3	-	-	-	-	-	-
2000	328 546	3	238	5	2	2	5	-	-	-
2001	322 723	2	567	7	-	-	14	-	-	-
2002	446 408	-	583	9	-	-	8	-	150	36
2003	429 171	-	313	13	2	2	8	-	-	-
2004	419 105	-	1022	12	-	-	14	-	-	-

UPDATE ON THE EUROPEAN LYMPHOGRANULOMA VENEREUM EPIDEMIC AMONG MEN WHO HAVE SEX WITH MEN

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The Europe-wide epidemic of lymphogranuloma venereum (LGV), caused by *Chlamydia trachomatis* serovar L2, is continuing. It is affecting men who have sex with men (MSM), many of whom are HIV positive. Outbreaks and various case reports have been described in several European countries and, more recently, in the United States and Canada. The outbreak is of public health importance, since LGV facilitates transmission of HIV and other blood-borne infections.

Overview of the LGV situation in Europe (March 2005)

In the Netherlands, 144 confirmed cases of LGV had been reported by March 2005, the majority in Amsterdam: 65 cases in 2002/3 were identified retrospectively. In France, 142 cases of LGV have been confirmed, mainly in Paris and Bordeaux, of which 21 in 2002/3 were identified retrospectively. In the United Kingdom