

Four cases of flesh-eating disease reported in Halton last month

Halton Region had four cases of the flesh-eating disease last month alone, including one death.

But Mary Anne Carson, manager of communicable disease programs at the Halton Health Department, said the January numbers aren't raising alarm bells in the medical community. In fact, the number of cases is slightly down from last year.

Invasive Group A streptococcus, as the disease is medically known, is a rare and frightening form of a common infection, the same illness which was contracted by Lucien Bouchard and cost him his leg.

Health authorities said the public is at little risk, and there isn't much people can do to protect themselves from the disease, other than to seek medical attention when signs and symptoms occur. There is no vaccine, and nothing can be done to increase immunity.

"This is the time of the year when we typically see cases, more so than in any other time of the year," said Carson. "And, because it occurs in cycles or in groupings, it's not a concern that we had four cases in January."

Statistics for 1995 showed there were

seven cases of invasive Group A streptococcus, which under law must be reported by doctors. But five of last year's seven Halton cases were reported in January alone.

For reasons of confidentiality, the health department won't say where the cases have occurred in Halton, said Carson.

"Because there are so few cases, there's a higher probability of identifying the actual individual," said Carson.

According to Health Canada, the bacteria leading to the infection can enter the body through cuts. When a cut occurs, it should be washed, kept clean and watched for symptoms which suggest infection.

If redness begins to rapidly spread around a cut, and there is a tremendous amount of pain, see a doctor immediately. With necrotizing fasciitis, blood supply to human tissue is stopped and infected areas must be surgically removed. Death occurs in 30-50 per cent of cases.

Dr. Allison McGeer, a microbiologist at Mount Sinai and Princess Margaret hospitals in Toronto, is one of the investigators in the Ontario Group A Streptococcal Study, designed to collect

more information about the disease. She said the prevalence of group A streptococcus will vary over time, peaking in January each year.

"It's a winter disease, so you're more likely to get more cases now than in summer," she said. "Last year, it was at its peak in January, but this January there weren't nearly as many cases across the province."

Based on past patterns, she expects there will be something like 200 cases in the province this year. In 1995, there were about 340 cases, up from 210 in 1994, 179 in 1993, and 143 cases in 1992, the first year statistics were collected.

"The good news is it's not continuing to steadily get worse, but it's an important disease in the sense that it's a new disease and there's a lot we need to learn about it," said McGeer.

Doctors need to adjust their practices she said, "so people are getting the best treatment that's available for it."

Dr. Dan Kertesz, epidemiologist at Laboratory Centre for Disease Control in Ottawa, said the fact there are more cases reported in the winter months is due to the same factors that cause more seasonal cases of cold and flu - infections through the nose and throat.

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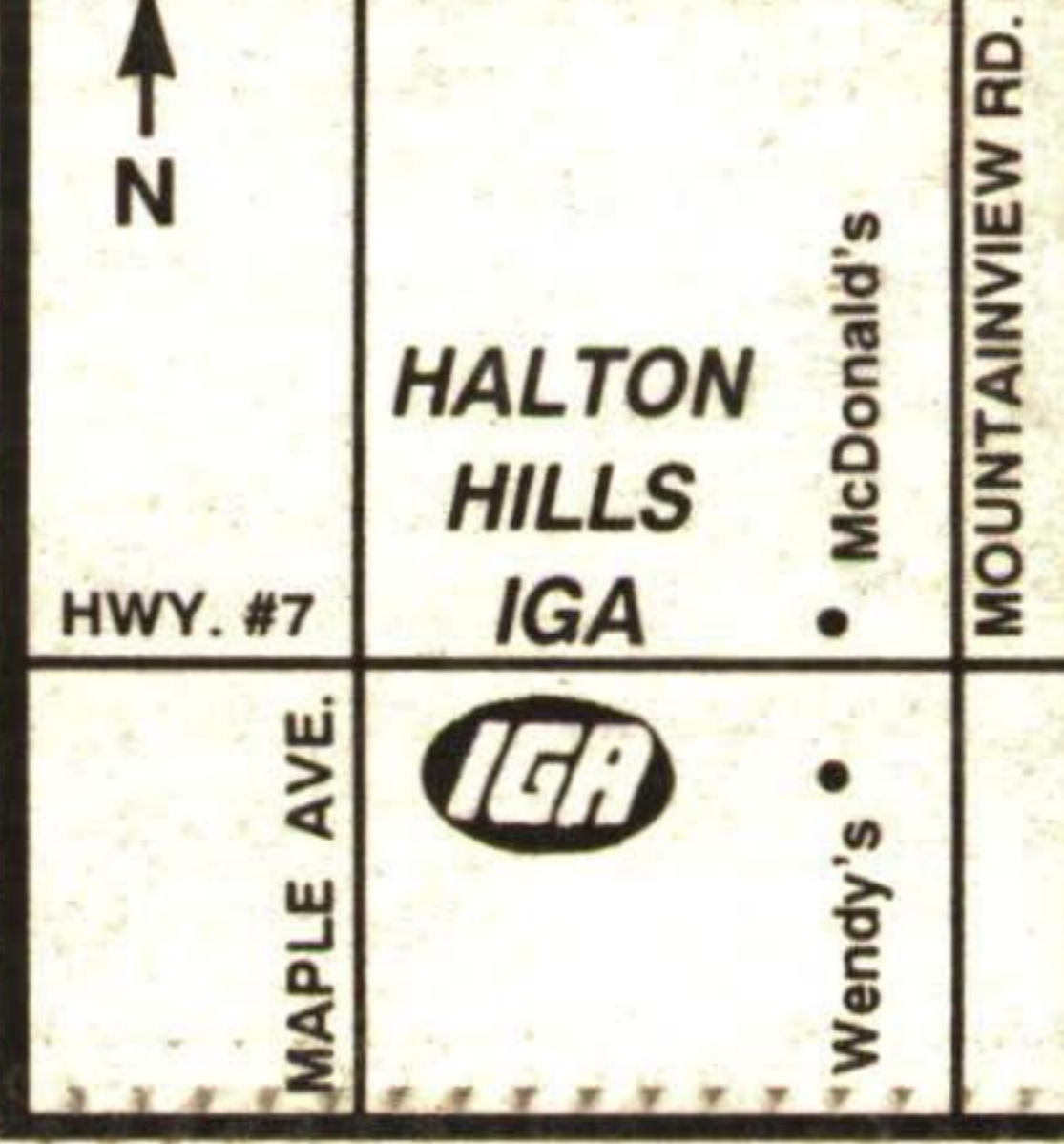
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