October 5, 2012

MENINGITIS AND STROKE ASSOCIATED WITH POTENTIALLY CONTAMINATED PRODUCT

Dear Colleague,

This letter includes updated information regarding a multistate outbreak of fungal meningitis associated with epidural spinal injections. While the investigation into the source of the infection is ongoing, all infected patients received preservative-free methylprednisolone acetate from three lots that have been voluntarily recalled by the New England Compounding Center, located in Framingham, Massachusetts. This product of concern was distributed to 23 states.

Virginia Department of Health (VDH) is working closely with the only two medical facilities known to have received and used this product from this manufacturer. Both facilities have contacted their patients who received this medication via any route of injection between July 2012 and September 2012. Insight Imaging in Roanoke contacted more than 600 patients and New River Valley Surgery Center in Christiansburg contacted less than 30 patients.

As of October 4, 2012, CDC is reporting 35 cases from 6 states with a clinical presentation consistent with fungal infection. Aspergillus fumigatus was isolated in CSF from one patient; fungal isolates from other patients are being evaluated. Tragically, these numbers include 5 deaths. In Virginia, 4 cases, including 1 fatal case, have been identified. Nationwide and in Virginia, additional suspect cases are being evaluated by their physicians and investigated by public health.

While only two facilities in the state are known to have received and used this product, we believe broad awareness of this cluster is indicated. Attached are the CDC Health Alert summarizing the outbreak, case definitions, diagnostic guidance, and interim treatment recommendations. Please review these documents and consider the information, particularly if you see patients who present with signs or symptoms of meningitis or basilar stroke and had a recent epidural spinal injection at one of the two facilities. Of note, presenting symptoms of some patients with meningitis have been mild and not classic for meningitis (e.g., new or worsening headache without fever or neck stiffness). CDC is encouraging physicians to have a low threshold for performing a diagnostic lumbar puncture (LP) in patients who received the implicated methylprednisolone product by spinal injection.

Once again, medical and public professionals in Virginia are working together to stop an outbreak by identifying those at risk and providing them with care to prevent morbidity and mortality. Thank you.

If you need more information or have questions regarding this situation, please call your local health department, www.vdh.virginia.gov/LHD. VDH will continue to provide new information as it becomes available, www.vdh.virginia.gov, and daily updates will be provided by the CDC, http://www.cdc.gov/HAI/outbreaks/meningitis.html.

Sincerely,

Karen Remley, MD, MBA, FAAP
State Health Commissioner