AIDS

Infectious Agent: virus (human immunodeficiency virus)

Evidence of the Disease: pneumonia, certain types of cancer, and other illnesses typical of people with

failing immune systems

Treatment: no cure exists, but a combination of antiviral drugs can prolong a reasonable

quality of life for years

Transmission: intimate contact: vaginal, and oral sexual contact; blood-to-blood contact

through shared needles, needle-stick accidents, transfusions and transplants;

and mother-to-newborn infection

Preventive Measures: implement educational programs to promote "safer" sex and prevent drug

abuse; screen blood sources for HIV; follow appropriate hospital procedures to

prevent accidental spread of HIV

History: first recognized in 1979; currently a global epidemic

Cholera

Infectious Agent: bacteria (Vibrio cholerae)

Evidence of the Disease: diarrhea, dehydration

Treatment: fluids and antibiotics

Transmission: ingestion of bacteria in contaminated food and water

Preventive Measures: purify water; treat sewage; cook and promptly refrigerate food

History: present from antiquity; increasing number of worldwide cases in recent years

Creutzfeldt-Jakob Disease (CJD)

Infectious Agent: prion (scrapie PrP)

Evidence of the Disease: deteriorating mental capacity, loss of coordination

Treatment: none available at this time

Transmission: infectious cases: intimate contact with infected tissues

(most cases are due to unknown cause; a few are inherited)

Preventive Measures: none known at this time

History: first described in 1982

Ebola Hemorrhagic Fever

Infectious Agent: Ebola virus

Evidence of the Disease: headache; fever; vomiting; diarrhea; bleeding from the nose, mouth, eyes, and

other orifices

Treatment: no cure exists; treatment is to relieve symptoms

Transmission: intimate contact with infectious agent in blood

Preventive Measures: follow appropriate disease control procedures in hospitals; avoid burial cus-

toms that allow contact with tissues of deceased victims; initial victim in an outbreak likely was infected with the virus from an animal that carries the virus

with no ill effects; that animal "reservoir" is unknown at this time

History: first recognized in 1976; 18 outbreaks since then

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Guinea Worm Disease (Drancunculiasis)

Infectious Agent: helminth (the roundworm Dracunculus medinensis)

Evidence of the Disease: inflammation, severe joint pain, severe itching under the skin, skin ulcers

Treatment: antihelminthic drugs may hasten expulsion of worm

Transmission: ingestion of water contaminated by the copepod (the intermediate host) that

carries the larvae

Preventive Measures: purify water

History: present from antiquity; has decreased dramatically in the last half of the 20th

century

Influenza

Infectious Agent: influenza virus

Evidence of the Disease: headache, fever, chills, muscle aches; possibly sore throat, cough, chest pain

Treatment: relieve symptoms

Transmission: casual contact with the infectious agent in secretions or on droplets from

those who are infected

Preventive Measures: vaccine against current strains; wash hands frequently

History: present from antiquity; epidemics occur at regular intervals

Legionella pneumophi

Legionnaire Disease

Infectious Agent: bacteria (Legionella pneumophilia)

Evidence of the Disease: fever, cough, chest and abdominal pain, diarrhea

Treatment: antibiotics

Transmission: inhalation of bacteria on airborne particles, especially from water tanks

Preventive Measures: disinfect cooling tower waters

History: first recognized in 1976; occasional outbreaks since then

Lyme Disease

Infectious Agent: bacteria (Borrelia burgdorferi)

Evidence of the Disease: initially an expanding, ringlike rash, fever, fatigue, and headache; followed

weeks or months later by chronic arthritis

Treatment: antibiotics

Transmission: bites from infected ticks

Preventive Measures: wear socks, long pants, and long-sleeved shirts in tick-infested areas and

check carefully for ticks after leaving the area; a vaccine for individuals at high

risk of contracting the disease

History: first recognized as an infectious disease in 1975; infectious agent identified

in 1982

Malaria

Infectious Agent: protozoa (various *Plasmodium* species)

Evidence of the Disease: cyclic fever and chills, anemia

Treatment: antiprotozoan drugs

Transmission: bites from infected mosquitos

Preventive Measures: follow procedures to reduce mosquitos such as eliminating standing water and

spraying with insecticides; follow procedures to limit contact between humans and mosquitos such as installing screens and bed nets and using insect

repellant

History: present from antiquity; has increased in recent years

Streptococcal Pharyngitis ("Strep Throat")

Infectious Agent: bacteria (Streptococcus pyogenes)

Evidence of the Disease: painful, red and inflamed throat; tonsils may swell and become coated with

white patches

Treatment: antibiotics

Transmission: casual contact with infectious agent in secretions or on droplets

Preventive Measures: wash hands frequently; disinfect contaminated materials

History: present from antiquity

Plague

Infectious Agent: bacteria (Yersinia pestis)

Evidence of the Disease: bubonic form: swollen lymph nodes, fever, blocked circulation

pneumonic form: pneumonia, blood infection

Treatment: antibiotics

Transmission: usually bites from infected fleas carried by wild rodents; also inhalation of air-

borne bacteria from individual with pneumonic plague

Preventive Measures: eliminate rodents near human habitation; use insect repellants to avoid flea

bites; use insecticides to treat domestic animals likely to come in contact with

infected rodents

History: present from antiquity; responsible for several global epidemics including the

Black Death in 14th-century Europe

Pneumonia

Infectious Agent: several types of bacteria, viruses, and fungi

Evidence of the Disease: fever, cough, chest pain

Treatment: antimicrobials for bacterial and fungal pneumonias; treatment to relieve symp-

toms for viral pneumonias

Transmission: casual contact with infectious agent in secretions or on droplets from infected

individuals

Preventive Measures: use vaccines available to prevent some forms of pneumonia; improve social

conditions such as crowded living quarters

History: present from antiquity; remains the leading cause of death from infectious dis-

ease among the elderly

Evidence of the Disease: fever, fatigue, headache, nausea, muscle pain; in severe cases, paralysis

Treatment: generally none; respiratory assistance in acute paralytic cases

Transmission: ingestion of virus in contaminated food and water

Preventive Measures: vaccinate against current strains

History: present from antiquity; continues to be a problem in some developing coun-

tries although it has been eliminated in most countries

Schistosomiasis

Infectious Agent: helminth (several species of the flatworm *Schistosoma*)

Evidence of the Disease: may include a variety of symptoms such as fever, diarrhea, anemia, and liver

failure

Treatment: antihelminthic drugs may be effective if used early enough; cure not usually

possible once the parasites are established

Transmission: Schistosoma larvae enter human skin from snail-infested water (snails are

intermediate hosts)

Preventive Measures: reduce snail habitats (still pools of water); wear rubber boots in infested

waters; treat sewage (to prevent eggs from reaching water sources)

History: present from antiquity; increasing incidence in recent years

Tuberculosis

Infectious Agent: bacteria (Mycobacterium tuberculosis)

Evidence of the Disease: persistent cough, fever, fatigue, weight loss

Treatment: antibiotics

Transmission: inhalation of bacteria on airborne particles

Preventive Measures: improve social conditions such as crowded living quarters; vaccine available,

although its effectiveness varies among different populations

History: possibly present from antiquity, peaked in early 19th century and has declined

until a significant increase in late 1980s/early 1990s