Items for this week’s EPI Update include:

- Iowa epidemiologist in Sierra Leone helping stop Ebola
- Fist bump curbs spreading germs
- Laboratory procedures when Ebola is suspected
- Get the latest IDPH information
- Meeting announcements and training opportunities

**Iowa epidemiologist in Sierra Leone helping stop Ebola**

An epidemiologist working at IDPH, Samir Koirala, has joined CDC’s team in Sierra Leone to help track and stop the spread of Ebola. According to Samir, “I am now in the city called Bo. We are doing fine so far. We are trying to find out the real situation here by talking with health officials and other international partners. We will be meeting with the key personnel here and discuss how we can help them with data management and contact tracing.” More updates to follow.

**Fist bump curbs spreading germs**

According to a new study, 12 times more germs are transmitted with a handshake than with a fist bump (a form of greeting when people gently touch the knuckles of their fists). According to this study, fist bumping is one of the simplest, no-cost behavior changes that can dramatically improve public health, and follows some national recommendations of banning handshakes around patients.

During the study a “donor” glove was dipped in *Escherichia coli*, dried, and then made contact with a sterile recipient glove. Three types of greetings were evaluated: the handshake, high five, and fist bump. The length of time and amount of contact area was also compared. The high five transmitted half the germs of a handshake, but still more than six times the amount of a fist bump.

For more information about the fist bump study, visit [www.apic.org/Resource_/TinyMceFileManager/Fist_bump_article_AJIC_August_2014.pdf](http://www.apic.org/Resource_/TinyMceFileManager/Fist_bump_article_AJIC_August_2014.pdf).

**Laboratory procedures when Ebola is suspected**

The current Ebola situation has resulted in the development of protocols and procedures to safely care for and treat patients with suspected Ebola virus disease (EVD). While there is concern, it should be remembered that every day, U.S. health care providers interact with patients in varying states of illness and that diagnostic specimens are routinely handled and tested in U.S. laboratories in a safe manner - just by following current infection control policies.
To provide additional guidance for specimen collection, transport, testing and submission for patients with suspected infection with Ebola Virus, CDC has released interim guidelines, recommends that the number of diagnostic tests be minimized, and the laboratory should be notified of any specimens being sent.

For more information about laboratory procedures when Ebola is suspected, visit www.cdc.gov/vhf/ebola/hcp/interim-guidance-specimen-collection-submission-patients-suspected-infection-ebola.html/.

Get the latest IDPH information
Nearly 75 percent of adults use some form of social media to stay connected personally and professionally. Staying tuned to the latest public health messages is easy with IDPH's Facebook and Twitter.

For more information on IDPH's Facebook and Twitter, visit www.facebook.com/IowaDepartmentOfPublicHealth and twitter.com/IAPublicHealth/.

Meeting announcements and training opportunities
IDPH hosted two webinars this week addressing the Ebola, Chikungunya, and Dengue viruses. The webinars were directed towards healthcare and emergency medical service providers, and local public health partners. Topics discussed included disease basics, epidemiology and Iowa-specific considerations.

To view the webinar, visit and register at www1.gotomeeting.com/register/191015617/.

Have a healthy and happy (State Fair) week!
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