On the cover: “Sightless Among Miracles,” bronze cast, by R. T. Wallen, American, 1995, located in the atrium of the World Bank, Washington, D.C. Reproduced with permission of the World Bank Art Program.

The bronze sculpture commemorates the global effort to eliminate onchocerciasis, commonly known as river blindness or “the lion’s stare.” The study depicts a young boy leading his father, blinded by the disease. The 8-foot statue, originally named “The Gift of Sight” was sculpted in clay in Alaska, and then cast in bronze in Colorado, using the lost wax process. The original casting of the statue was commissioned by Merck & Co. and placed in their world headquarters in 1995. Additional casts were later placed at the Carter Center (Atlanta, GA), the World Bank (Washington, D.C.), the World Health Organization (Geneva, Switzerland), the Royal Institute of the Tropics (Amsterdam, The Netherlands), and the headquarters of Lions Clubs International (Chicago, IL).

A debilitating and often blinding disease endemic to tropical areas of Africa, as well as Central and South America, onchocerciasis is caused by microfilariae (Onchocerca volvulus) which lives and reproduces for up to 14 years in the human body. It is transmitted to infected individuals by the bite of a small black fly which breeds in fast flowing rivers and streams, hence the name, “river blindness.” The disease robs people not only of their sight but also their livelihood, as entire communities often abandon fertile riverside areas to move to less productive areas away from black fly infestations. Food shortages and community disintegration are often the burdens placed on already impoverished populations. With over 80 million people at risk and 18 million actually infected, approximately 400,000 have been blinded by the disease.

In 1972, upon the recommendation of French scientists working in western Burkon Faso (then Upper Volta), the Onchocerciasis Control Program (OCP) was organized by Robert McNamara, then President of The World Bank. The international effort was formally launched two years later financed by the World Bank, the Food & Agriculture Organization of the United Nations, the United Nations Development Program, the World Health Organization, and a host of private sector companies and non-governmental organizations. Initially, spraying of larvicide for vector control was the primary weapon in the battle but was later replaced by more environmentally friendly insecticides and most recently by biological agents. In the 1980s, Merck & Co. developed the drug ivermectin, found to be effective at paralyzing and expelling the infant worms in the body and halting the progression of disease. It was apparent from the beginning that the target population would not be able to afford to pay for ivermectin; therefore, in 1987, Merck & Co. made the pledge to provide the drug free of charge for as long as needed to as many who needed it to treat river blindness. The medicine now reaches more than 16 million people who live in endemic areas. Today, the global partnership includes the original founders, the Carter Center, Lions Club International, and many of the governments of Africa and Latin America. The pending elimination of onchocerciasis is one of the true success stories in the battle against infectious diseases in the 20th and 21st centuries. (Mary & Michael Gizark, Cover Art Editors)
A National Outbreak of *Salmonella* Serotype Tennessee Infections From Contaminated Peanut Butter: A New Food Vehicle for Salmonellosis in the United States

Anandi N. Sheth, Mike Hoekstra, Nehal Patel, Gwen Ewald, Cathy Lord, Carmen Clarke, Elizabeth Villamil, Katherine Niksich, Cheryl Bopp, Thai-An Nguyen, Donald Zink, and Michael Lynch

This article describes a large, multi-state *Salmonella* outbreak due to contaminated peanut butter occurring in 2006–2007. This outbreak highlights the risk of salmonellosis from heat-processed foods of non-animal origin previously thought to be low risk for *Salmonella* contamination.

Coccidioidomycosis During Pregnancy: A Review and Recommendations for Management

Robert S. Bercovitch, Antonino Cataranzo, Brian S. Schwartz, Demosthenes Pappagianis, D. Heather Watts, and Neil M. Ampel

The severity and risk for dissemination of coccidioidomycosis are increased when infection is acquired during pregnancy. Azole antifungals are potentially teratogenic when given in the first trimester. These issues are reviewed and guidance regarding management of coccidioidomycosis during pregnancy is provided.

Treatment Outcomes of Isoniazid-Resistant Tuberculosis Patients, Western Cape Province, South Africa

Karen R. Jacobson, Danie Theron, Thomas C. Victor, Elizabeth M. Streicher, Robin M. Warren, and Megan B. Murray

Colistin-Resistant, *Klebsiella pneumoniae* Carbapenemase (KPC)–Producing *Klebsiella pneumoniae* Belonging to the International Epidemic Clone ST258

Tatiana Bogdanovich, Jennifer M. Adams-Haduch, Guo-Bao Tian, Minh Hong Nguyen, Eun Jeong Kwak, Carlene A. Muto, and Yohei Doi

Procalcitonin to Guide Duration of Antimicrobial Therapy in Intensive Care Units: A Systematic Review

Rajender Agarwal and David N. Schwartz

Procalcitonin measurement to guide antimicrobial therapy causes a significant reduction in the exposure to antimicrobials among patients admitted to the intensive care units (ICUs) and may also decrease the ICU length of stay.

Effects of Cessation of Breastfeeding in HIV-1–Exposed, Uninfected Children in Malawi

Taha E. Taha, Donald R. Hoover, Shu Chen, Newton I. Kumwenda, Linda Mipando, Kondwani Nkanauna, Michael C. Thrippen, Allan Taylor, Mary Glenn Fowler, and Lynne M. Mofenson

HIV-exposed, uninfected infants who do not breastfeed compared to those who breastfeed between 6 and 15 months experience substantially higher acute morbidity and cumulative mortality. Adequate monitoring of infant health and prolonged breastfeeding should be encouraged.

Enterovirus Coinfection During an Outbreak of Hand, Foot, and Mouth Disease in Shandong, China

Fan Yang, Jiang Du, Yongfeng Hu, Xiaofang Wang, Ying Xue, Jie Dong, Lilian Sun, Zhifang Li, Yufen Li, Shaoxia Sun, and Qi Jin

Apropos: The Challenge of Antimicrobial Resistance in Brazil

Subhash C. Arya and Nirmala Agarwal

Does Antimicrobial Stewardship Begin at the Dinner Table?

Myke R. Green and Michael Newton
ERRATUM

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ELECTRONIC ARTICLE

e8 Q Fever, Spotted Fever Group, and Typhus Group Rickettsioses Among Hospitalized Febrile Patients in Northern Tanzania

Malavika Prabhu, William L. Nicholson, Aubree J. Roche, Gilbert J. Kersh, Kelly A. Fitzpatrick, Lindsay D. Oliver, Robert F. Massung, Anne B. Morrissey, John A. Bartlett, Jocinta J. Onyango, Venance P. Maro, Grace D. Kinabo, Wilbrod Saganda, and John A. Crump

In a prospective cohort study of febrile patients in northern Tanzania, Q fever and spotted fever group rickettsiosis were common but were not diagnosed by physicians in the absence of specific clinical features and local diagnostic methods.

The electronic article listed above is freely available in this issue of Clinical Infectious Diseases online (http://cid.oxfordjournals.org/content/current).