**News**

**New Virus Hits 12 Globally With New British Case**

15 February 2013 (Reuters Health [Kate Kelland])—A fourth person in Britain has contracted a potentially fatal severe acute respiratory syndrome (SARS)-like virus, but health officials said the risk to the population remained very low.

Confirming the third British case this week of infection with the new virus—known as novel coronavirus, or NCoV—the Health Protection Agency (HPA) said the patient was one of a cluster of 3 in the same family.

This latest case brings the total number of confirmed cases globally to 12, of which 4 have been diagnosed in Britain, the HPA said. Of the total, 5 have died [editor’s note: as of 20 February 2013, 6 had died]. Most of the infected lived or had recently been in the Middle East.

NCoV was identified when the World Health Organization issued an international alert in September 2012 saying a virus previously unknown in humans had infected a Qatari man in Britain who had recently been in Saudi Arabia.

The virus belongs to the same family as SARS, a coronavirus that emerged in China in 2002 and killed about a tenth of the 8000 people it infected worldwide. Symptoms common to both viruses include severe respiratory illness, fever, coughing, and breathing difficulties.

Coronaviruses are typically spread like other respiratory infections, traveling in airborne droplets when an infected person coughs or sneezes.

**Editorial comment.** There have been a total of 12 cases and 3 clusters within the 12 cases: Saudi Arabia, 5 patients (3 deaths); Jordan, 2 patients (2 deaths); Germany, 1 patient (from Qatar); United Kingdom, 4 patients (1 death); of the 4 UK Patients: 1 from Qatar, 1 who had returned from Pakistan and Saudi Arabia, and 2 who were exposed to the patient who returned from Saudi Arabia. The 3 clusters are the present one in a family in the United Kingdom, a cluster with intensive care unit staff in a hospital in Jordan, and a family cluster in Saudi Arabia. Thus, while limited person-to-person transmission has occurred, it has not been widespread. A mutation in the virus or a super-spreader such as occurred with SARS could possibly change the dynamics. Bats have been demonstrated to carry a very similar coronavirus.

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**Botulism From Drinking Prison-Made Illicit Alcohol—Arizona, 2012**

(MMWR 62:88, 2013)—During 24–27 November 2012, the Arizona Department of Health Services was notified that 8 male inmates of a maximum-security prison had been hospitalized with suspected botulism. All 8 patients reported drinking pruno, an illicitly brewed alcoholic beverage that has been associated with botulism outbreaks in prisons. This was the second outbreak of botulism in the prison during 2012; in August, 4 inmates were hospitalized for botulism after drinking pruno.

The 8 male inmates, aged 20–35 years, all reported consuming pruno from a single batch on 23 November, and had symptom onset 24–26 November. All were hospitalized and received heptavalent botulinum antitoxin. Serum samples from all 8 patients tested positive for botulinum toxin type A. Because of respiratory muscle paralysis, 7 patients were intubated and were fed through percutaneous endoscopic gastrostomies. The 7 were intubated for a range of 11–14 days before receiving tracheostomies.

The outbreak batch of pruno tested positive for botulinum toxin type A. Pruno typically is made by fermenting fruit and sugar in water; other commonly used ingredients include potatoes, corn, bread, and rice. Both outbreaks in the prison were associated with pruno made with potatoes, as were outbreaks at prisons in California and Utah that have been reported since 2004.

In 2004, 4 inmates of a California prison were hospitalized with pruno-related botulism. In 2005, 1 inmate of a California prison was hospitalized with botulism. An outbreak of botulism related to pruno occurred in a Utah maximum-security prison in 2011 when 8 inmates were hospitalized. Since the recent outbreak of botulism, the prison has banned potatoes from the prison kitchen. Discussions are under way to ban sugar and other ingredients commonly used to make pruno that are available on the menu and in the prison store.

**Editorial comment.** The potatoes used in the pruno were probably the source of Clostridium botulinum. Potatoes have in the past been demonstrated to become contaminated with C. botulinum spores, which are commonly found in soil.

**Gilead Announces Sustained Virologic Response Rates From 2 Phase 3 Studies of Sofosbuvir for Hepatitis C**

4 February 2013 (Business Wire)—Gilead Sciences (Nasdaq: GILD) announced...
topline results from 2 phase 3 studies, FISSION and NEUTRINO, evaluating a 12-week course of the once-daily nucleotide sofosbuvir in combination with ribavirin (FISSION) and in combination with ribavirin and pegylated interferon (NEUTRINO) among treatment-naive patients with chronic hepatitis C virus (HCV) infection.

In the FISSION study, patients with genotype 2 or 3 HCV infection were randomized to receive either a 12-week course of sofosbuvir plus ribavirin (RBV) or the standard of care with 24 weeks of pegylated interferon alfa-2a (peg-IFN) plus RBV. The study met its primary efficacy endpoint of noninferiority of sofosbuvir plus RBV to peg-IFN plus RBV, with 67% (170/253) of patients achieving a sustained virologic response (SVR) in the sofosbuvir plus RBV treatment group vs 67% (162/243) in the peg-IFN plus RBV treatment group. All common adverse events occurred more frequently in subjects receiving peg-IFN and RBV as compared to sofosbuvir and RBV. The most common adverse events in the sofosbuvir plus RBV arm occurring in >10% of the patients were fatigue, headache, nausea, insomnia, and dizziness.

In the NEUTRINO study, patients with genotype 1, 4, 5, or 6 HCV infection were treated with a 12-week course of sofosbuvir, RBV, and peg-IFN. This study met its primary efficacy endpoint of superiority, with 90% (295/327) of patients achieving SVR after completing therapy compared to a predefined historic control SVR rate of 60% (P < .001). In the NEUTRINO study, the most common adverse events occurring in ≥20% of patients were fatigue, headache, nausea, insomnia, and anemia.

Norbert Bischofberger, PhD, Executive Vice President of Research and Development and Chief Scientific Officer, Gilead Sciences, said, “The sofosbuvir regimens in these trials allowed us to shorten the duration of effective hepatitis C therapy to just 12 weeks for treatment-naive patients with genotypes 1 through 6.”

**Multistate Outbreak of Human Salmonella Typhimurium Infections Linked to Contact With Pet Hedgehogs — United States, 2011–2013**

(MMWR 62:73, 2013)—An outbreak of human *Salmonella* Typhimurium infections with a historically rare pulsed-field gel electrophoresis pattern has been linked to contact with pet hedgehogs. Only 1–2 cases have been reported via PulseNet (the national molecular subtyping network for foodborne disease surveillance) annually since 2002. Since 2011, an increasing number of cases have been detected. PulseNet identified 14 human isolates in 2011, 18 in 2012, and 2 already in 2013.

Since January 2012, a total of 20 persons infected with the outbreak strain of *Salmonella* Typhimurium have been reported from 8 states: Alabama (1), Illinois (1), Indiana (1), Michigan (3), Minnesota (3), Ohio (3), Oregon (1), and Washington (7). Illness onset dates ranged from 26 December 2011 to 31 December 2012. The median patient age was 13 years (range, <1–91 years); 55% of patients were female. Four patients were hospitalized. One death associated with *Salmonella* infection has been reported. Fourteen out of 15 patients (or their proxies) reported direct or indirect contact between the patient and a hedgehog during the week before illness onset. A trace-back investigation of hedgehogs purchased by breeders of the households of ill persons is currently being undertaken.

Salmonellosis is most commonly foodborne; however, contact with infected animals and their environments also can cause illness. Salmonellosis has been linked with pet hedgehogs previously. Children aged <5 years, elderly persons, and immunocompromised persons are at increased risk for severe illness. Infections can result from direct contact with hedgehogs during routine care and indirect transmission through contact with objects (eg, cages, toys, or bedding) or household surfaces that come in contact with infected hedgehogs.

Handwashing with soap and water after handling hedgehogs, especially before handling food or drinks, can reduce the risk for infection. Any equipment or materials associated with hedgehog care (eg, feed, water, and bathing containers) should be cleaned outside the home.

**Editorial comment.** People and animals become infected with *Salmonella* when the food they eat has been contaminated by feces. Virtually all members of the animal kingdom including birds, reptiles, amphibians, and fish can be contaminated with *Salmonella* that they have ingested and then in turn passed on to humans. (I will admit that this is the first I have heard of hedgehogs as pets.)

**Glaxo Wins Priority Status for New HIV Drug in the United States**

15 February 2013 (Reuters Health [Ben Hirschler])—The US Food and Drug Administration (FDA) has granted priority review status to dolutegravir, an experimental once-daily integrase inhibitor from GlaxoSmithKline to treat human immunodeficiency virus infection.

The FDA awards certain drugs priority status when they have the potential to offer significant improvement over existing treatments. Dolutegravir has performed strongly in several clinical trials. The FDA is due to give its verdict on whether to approve dolutegravir by 17 August, Glaxo said.

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