because they should already be age-appropriately immunized.

Dr. Mary Lou Lindegren et al concluded that providing measles vaccination in EDs during community outbreaks may increase coverage among a hard-to-reach population and may be a cost-effective means of preventing ongoing transmission of measles and associated hospitalizations.

There also may be patients who have a history of vaccination who may be vaccine eligible. In a related study published in the same issue, Dr. Karen Goldstein et al from the Wyler's Children's Hospital, Chicago, found that immunization information provided by accompanying adults (from recall or from immunization cards) is inadequate to determine accurately which preschoolers in the pediatric emergency departments are delayed in childhood immunizations."

According to the CDC, no cases of measles were reported in the United States for three consecutive weeks (November 7 to November 27, 1993), representing the first three-week period without measles since reporting began in 1912.<sup>3</sup> However, this does not indicate that measles has been eliminated; previous low-level measles activity has been followed by resurgence. High vaccination coverage levels among preschool and school-aged children need to be achieved and sustained in all communities to ensure the elimination of endemic measles transmission.

## REFERENCES

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## Distribution of HIV-Contaminated Blood Prompts Closer Monitoring of Blood Supply Programs

German health officials discovered in October 1993 that a small Germany blood supply company in Koblenz, UB Plasma, had distributed HIV-contaminated blood products to 88 hospitals and four companies in Germany. After it was determined that UB Plasma had knowingly failed to test all units of blood products for HIV prior to distribution, UB Plasma officials were arrested and the company has closed. The investigation began after German health officials noted that UB Plasma had sold 7,000 units of blood since 1992 but had purchased only 2,500 kits to screen for HIV.

The HIV scare spread rapidly beyond Germany when UB Plasma records showed shipments went to Austria, Greece, and Saudi Arabia, as well as to intermediary companies that may have sent products to France, the Netherlands, Britain, Portugal, Sweden, Italy, and Switzerland. A spokesperson for the U.S. armed forces stationed in Heidelberg has confirmed that no contaminated blood was given to Americans because they rely on their own blood sources, which are tested for HIV

Some critics argue that the German system is fundamentally flawed because it makes use of for-profit companies that may be tempted to take short-cuts. This incident also has health officials in Germany and some other European countries questioning the practice of payment for blood donations because the money attracts drug addicts and others at high risk for HIV infection.

FROM: *Time* November 15, 1993; New *York Times* November 23, 1993.

## CDC Data Confirm Low Risk of HIV Transmission from HCW to Patient

At the First National Conference on Human Retroviruses and Related Infections in Washington, DC, December 12-16, 1993, the CDC reported data from an ongoing evaluation of the risk of HIV transmission from infected healthcare workers (HCWs) to patients. The CDC analyzed data from investigations of 60 infected HCWs (30 dentists/dental students, 13 surgeons or obstetrician/gynecologists [OB/GYNs], 13 physicians/medical students, and four other HCWs), excluding the Florida dental practice where six patients are believed to have acquired HIV from a dentist with AIDS. As of July 1993, HIV test results were known for 19,876 patients. Of these, procedure data were available for 2,850 patients, including 425 patients (of four dentists) who underwent periodontal, root canal, or oral surgery procedures; 838 patients (of three OB/GYNs) of whom 174 (21%) had vaginal deliveries, 155 (18%) had cesarean sections, and 134 (16%) had major gynecologic surgery; and 1,587 patients (of a breast surgeon and an orthopedic surgeon) who underwent an invasive procedure. No seropositive persons were found among 12,369 patients of 49 HCWs; 92 HIV-infected persons were found among 7,507 patients of the 11 remaining HCWs. Of these 92 patients, eight were infected prior to receiving care; six were under investigation; and 30 had HIV genetic sequencing analysis performed, including 14 (25%) of 57 with established risk factors and 16 (76%) of 21 without an identified risk. When complete