

in the immunization program, and health authorities must increase their efforts to convince parents of the need to immunize children against this disease. Measles, and all vaccines currently in the immunization program, can be given safely to children with minor illnesses such as colds, diarrhea, or fever³. Health station staff should use every possible opportunity to immunize. Parents who bring infants to the health station for minor illnesses should always show the child's immunization card, and any missed immunizations should be administered. By increasing efforts to educate parents about the importance and safety of immunizations, and by utilizing every available opportunity to immunize, local health authorities can play an important role in improving the success of the immunization program.

References

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Outbreak of Gastroenteritis due to *Vibrio parahemolyticus*- Feng-Shan City, Kaohsiung County

During the period April 9-10, 1986, an outbreak of gastroenteritis occurred among 400-450 persons attending a wedding banquet in Feng-Shan City, Kaohsiung County. The suspect meal was served from noon to 2 pm on April 9. Although a complete list of banquet attendees was unavailable, a door-to-door search in Feng-Shan City identified 114 persons who either attended the banquet or ate leftover food. Of these, 76 (67%) were ill. Symptoms included diarrhea (99%), abdominal pain (90%), vomiting (63%), and fever (29%). Onset of illness occurred during a 12-hour period from 8 pm the evening of the banquet to 8 am the following morning (Figure 1). The median incubation period was 14 hours (minimum=8 hours, maximum=20 hours). Stool specimens were collected from 17 ill persons. Fifteen (88%) were positive for *Vibrio parahemolyticus*; 13 were K-8 serotype, 2 were K-13 serotype. No leftover food from the banquet was available for laboratory testing.

Of 13 items served at the banquet, 8 contained seafood. Only two food items were significantly associated with illness: lobster (75 out of 104 persons exposed compared to 1 out of 10 persons not exposed were ill; chi-square=13.2) and crab (65 out of 87 exposed compared to 11 out of 27 not exposed were ill; chi-square=9.2). Attack rates among those exposed and not exposed to lobster and crab are compared in Table 2. Although relatively few persons were not exposed to lobster and crab, the data suggest lobster was the more important of the two vehicles; there was a large difference in attack rates between those exposed and not exposed to lobster independent of exposure to crab. There was also a difference in attack rates between those exposed and not exposed to crab independent of exposure to lobster, however, the difference was not so large. Because of the small numbers in the unexposed groups, these data must be interpreted cautiously, however, this type of analysis illustrates a useful way of looking for interactions between two variables.

Food handling techniques were reviewed to identify practices which could have led to