
Balaclava (also spelled Balaklava) was the site of one of the battles in the Crimean War (1854–1856). In 1853, Russia occupied territories in the Crimea that had been under Turkey’s control, which caused Turkey to declare war on Russia, with Britain and France joining the war against Russia. The Battle of Balaclava (October 1854) was inconclusive. Throughout the Crimean War, the British public was scandalized by newspaper reports that a large number of British troops were dying of diseases such as typhus, cholera, malaria, and dysentery. On some of the major battlefields, only an estimated 1 of 6 deaths were from battle wounds. Battlefield hospital care improved greatly after the revelations of the unsanitary conditions during the Crimean War. This was the war that saw the participation of Florence Nightingale, who volunteered her nursing services in Turkey at this time. The war finally ended when Sevastopol fell to the Allied troops on 8 September 1855 and the new Russian Emperor, Alexander II, agreed to sign a peace treaty at the Congress of Paris in 1856.

Here, the Scottish war artist and correspondent William Simpson records the evacuation of the sick from Balaclava. Over 80 such prints of the war were gathered for the portfolio called “The Seat of War in the East.” Two thousand sets of war scenes were produced, which the artist dedicated to Queen Victoria, whose patronage he enjoyed throughout the rest of his career. (Mary and Michael Grizzard, cover-art editors)

ARTICLES AND COMMENTARIES

485 Molecular Identification of Trypanosoma cruzi Discrete Typing Units in End-Stage Chronic Chagas Heart Disease and Reactivation after Heart Transplantation
Juan Miguel Burgos, Mirta Diez, Carlos Vigiliano, Margarita Bisio, Marikena Risso, Tomás Duffy, Carolina Cura, Betina Brusse, Liliana Favaloro, Maria Susana Leguizamon, Raul Horacio Lucero, Ruben Laguens, Mariano Jorge Levin, Roberto Favaloro, and Alejandro Gabriel Schijman

Molecular strategies allowed identification of Trypanosoma cruzi lineage I in cardiac tissues with severe myocarditis from explant, blood, and reactivation lesion samples obtained from Argentinian patients with end-stage Chagas cardiomyopathy who underwent heart transplantation, challenging former assumption of its innocuousness in the southern cone of America.

496 Systematic Review and Meta-analysis: Renal Safety of Tenofovir Disoproxil Fumarate in HIV-Infected Patients
Ryan D. Cooper, Natasha Wiebe, Nathaniel Smith, Philip Keiser, Saraladevi Naicker, and Marcello Tonelli

Tenofovir use is associated with a statistically significant but clinically modest risk of kidney function loss. However, our findings do not support the need to restrict tenofovir use in jurisdictions where regular monitoring of renal function is impractical.

506 Withholding Antimalarials in Febrile Children Who Have a Negative Result for a Rapid Diagnostic Test
Valérie d’Acremont, Aggrey Malila, Ndeniria Sawai, Robert Tillya, Judith Kahama-Maro, Christian Lengeler, and Blaise Ganton

Presumptive treatment for malaria is widely used, especially in children. Withholding antimalarials in febrile children who had negative results for a rapid diagnostic test for malaria was safe, even in an area highly endemic for malaria. This study provides evidence for treatment recommendations based on parasitological diagnosis in children <5 years old.

512 Editorial Commentary: Risks and Benefits of Targeted Malaria Treatment Based on Rapid Diagnostic Test Results
Anders Björkman and Andreas Mårtensson

515 Tropheryma whipplei Bacteremia during Fever in Rural West Africa
Florenc Fennell, Oleg Medianiello, Cristina Socolovschi, Hubert Bassene, Georges Diatta, Hervé Richt, Adama Tall, Cheikh Sokhna, Jean-François Trape, and Didier Raoult

Tropheryma whipplei is an emerging pathogen that is associated with gastroenteritis and pneumonia that is commonly detected in stools in rural West Africa. Our findings also suggest that it causes unexplained cold season fever with cough in rural West Africa.

522 Editorial Commentary: A New Piece Added to the Whipple Puzzle: Tropheryma whipplei Primary Infection with Bacteremia and Cough
Gilbert Greub

525 Increased Risk of Guillain-Barré Syndrome following Recent Herpes Zoster: A Population-Based Study across Taiwan
Jiunn-Horng Kang, Jau-Juan Sheu, and Heng-Ching Lin

The adjusted hazard of Guillain-Barré syndrome during a 2-month follow-up period was 18.37 times greater (95% confidence interval, 10.22–33.01 times greater) for patients with herpes zoster than for those without.

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Editorial Commentary: Varicella-Zoster Virus: Another Trigger of Guillain-Barré Syndrome?
Helmar C. Lehmann and Hans-Peter Hartung

Lumbar Puncture in Children from an Area of Malaria Endemicity Who Present with a Febrile Seizure
Moses Laman, Laurens Manning, Ilomo Hwaiwhange, John Vince, Susan Apiit, Trevor Mare, Jonathan Warnel, Harin Karunajeewa, Peter Siba, Ivo Mueller, and Timothy M. E. Davis

Most Papua New Guinean children who presented with a single seizure but no signs of meningism or coma had undergone a lumbar puncture, but none had acute bacterial meningitis. Lumbar puncture is not required in the initial diagnostic assessment of simple febrile seizures.

Pegylated Interferon Alfa-2a Monotherapy for Hemodialysis Patients with Acute Hepatitis C
Chen-Hua Liu, Cheng-Chao Liang, Chun-Jen Liu, Jou-Wei Lin, Shih-I Chen, Pei-Haur Hung, Hung-Bin Tsai, Ming-Yang Lai, Pei-Jer Chen, Ding-Shinn Chen, and Jia-Horng Kao

Pegylated interferon alfa-2a monotherapy is safe and efficacious for hemodialysis patients with acute hepatitis C who do not have spontaneous clearance of hepatitis C virus by 16 weeks. In contrast, patients with spontaneous viral clearance by 16 weeks have high sustained virologic response without treatment.

Systematic Review and Meta-analysis: Reminder Systems to Reduce Catheter-Associated Urinary Tract Infections and Urinary Catheter Use in Hospitalized Patients
Jennifer Meddings, Mary A. M. Rogers, Michelle Macy, and Sanjay Saint

Prompt removal of unnecessary urinary catheters through the use of reminders and stop orders is associated with fewer hospital-acquired catheter-associated urinary tract infections.

Review Article

Epidemiology of Opportunistic Fungal Infections in Latin America
Marcio Nucci, Flavio Queiroz-Telles, Angela M. Tobón, Angela Restrepo, and Arnaldo L. Colombo

This review discusses the epidemiology of opportunistic fungal infections in Latin America, including candidiasis, cryptococcosis, trichosporonosis, aspergillosis, and fusariosis. The epidemiologic features of some of these mycoses, including their incidence, are markedly different in Latin America than they are in other parts of the world.

Brief Report

The Decline of Pneumococcal Resistance after Cessation of Mass Antibiotic Distributions for Trachoma
Sara Haag, Tafele Lukew, Gabremaaskal Habtemarian, Wondu Alemayehu, Vicky Cevallos, Zhaoxia Zhou, Jennifer House, Kathryn Ray, Travis Porco, Tina Rutar, Jeremy Keenan, Thomas M. Lietman, and Bruce D. Gaynor

PHOTO QUIZ

A 53-Year-Old Woman with Rapidly Progressive Altered Mental Status and Ataxia
(Answer on pages 629–630)

INVITED ARTICLES

FOOD SAFETY
Clostridium difficile in Food and Domestic Animals: A New Foodborne Pathogen?
L. Hannah Gould and Brandi Limbago

A number of recent studies have reported isolation of Clostridium difficile from animals, retail meat, and other foods. We review the current literature and discuss the potential for foodborne transmission of this pathogen.

HEALTHCARE EPIDEMIOLOGY
Screening and Decolonization: Does Methicillin-Susceptible Staphylococcus aureus Hold Lessons for Methicillin-Resistant S. aureus?
Jean-Christophe Lucet and Bernard Regnier

HIV/AIDS

Human Immunodeficiency Virus Treatment-Induced Adipose Tissue Pathology and Lipoatrophy: Prevalence and Metabolic Consequences
Emma Hammond, Elizabeth McKinnon, and David Nolan

This large-scale study of 211 adipose tissue and body composition data for 225 patients among HIV-infected study participants demonstrated a high prevalence of adipose pathology and lipoatrophic fat loss associated with adverse metabolic outcomes, specifically in the context of stavudine- or zidovudine-based HIV treatment.

Clinical Impact and Cost of Monitoring for Asymptomatic Laboratory Abnormalities among Patients Receiving Antiretroviral Therapy in a Resource-Poor Setting
Serena P. Koenig, Bruce R. Schackman, Cynthia Riviere, Paul Leger, Macarthur Charles, Patrice Severe, Charlene Lastimosa, Nicole Colucci, Jean W. Rape, and Daniel W. Fitzgerald

Routine monitoring for asymptomatic laboratory abnormalities among patients receiving antiretroviral therapy in resource-poor settings is expensive, and the clinical benefit varies among tests. Each country should evaluate the cost-effectiveness of monitoring strategies, which will depend on the national antiretroviral therapy regimen and prevalence of comorbidities.

Editorial Commentary: The Need for Systematic Evaluations of Diagnostic Tests
Ilesh V. Jani
Is It Safe to Discontinue Primary *Pneumocystis jiroveci* Pneumonia Prophylaxis in Patients with Virologically Suppressed HIV Infection and a CD4 Cell Count <200 Cells/μL?

The Opportunistic Infections Project Team of the Collaboration of Observational HIV Epidemiological Research in Europe (COHERE)

In the COHERE collaboration, which includes >23,000 HIV-infected individuals, the incidence of primary *Pneumocystis jiroveci* pneumonia was <5 cases per 1000 person-years of follow-up in virologically suppressed patients receiving cART with CD4 cell counts of 101–200 cells/μL, irrespective of prophylaxis. Discontinuation of prophylaxis may be safe in these patients.

HIV-1 Reverse Transcriptase Connection Domain Mutations: Dynamics of Emergence and Implications for Success of Combination Antiretroviral Therapy

Viktor von Wyl, Maryam Ehteshami, Lisa M. Demeter, Philippe Bürgisser, Monique Nijhuis, Jori Symons, Sabine Yerly, Jörg Böni, Thomas Klimkait, Rob Schuurman, Bruno Ledergerber, Matthias Götte, Huldrych F. Günthard, and the Swiss HIV Cohort Study

This retrospective analysis of 334 HIV-1 sequences, including the reverse transcriptase connection domain, showed that connection domain mutations emerge frequently during exposure to nucleoside reverse transcriptase inhibitor monotherapy or dual therapy but rarely in the absence of established resistance mutations.

Alternative Epidemic of Different Types of Influenza in 2009–2010 Influenza Season, China

Peng Yang, Haikun Qian, Xiaoming Peng, Huijie Liang, Fang Huang, and Quanyi Wang

To our knowledge, this is the first study to evaluate independent risk factors and to determine a population of children in pediatric intensive care units (PICUs) who are at high risk for developing candidemia. Future efforts should focus on validation of these risk factors identified in a different PICU population and development of interventions for prevention of candidemia in critically ill children. (pp e38–e45)

Melioidosis Pericarditis Mimicking Tuberculous Pericarditis

Ploenchan Chetchotisakd, Siriluck Anunnatsiri, Songsak Kiatchoosakun, and Churairat Kularbkaew

Cases of melioidosis (n = 12) and tuberculous pericarditis (n = 33) during 1996–2006 were reviewed. Clinical presentations were similar, but pericardial pathological findings were not. Nine of 12 patients with melioidosis required pericardectomy. In areas where these diseases are endemic, pericardial fluid culture and pericardial biopsy can differentiate between melioidosis and tuberculosis. (pp e46–e49)

The articles listed above are freely available in this issue of Clinical Infectious Diseases online (http://www.journals.uchicago.edu/toc/cid/current).