



# Communicable Disease Report Summit County January, 2019



## January 2019 Report:

**1. Monthly Highlights/Observations: Tuberculosis-** No new cases of TB were reported in January. SCPH CDU continued to investigate contacts to previous pulmonary TB cases, including local contact investigations for two pulmonary TB cases that were diagnosed post-mortem. SCPH CDU currently provides DOT to 6 cases (2 cases of pulmonary TB and 4 extra pulmonary cases). DOT is accomplished by daily video phone calls or home visits, depending on where the patients is in treatment and how they are responding to the medications. All cases are complex and require resources (including obtaining the medications, collecting sputum samples), which requires collaboration and coordination between multiple agencies and external community services.

In addition to tuberculosis, the CDU investigated 2 cases of legionellosis, 3 *Haemophilis influenzae*, 18 pertussis, 1 Lyme disease, and 22 enteric cases (5 campylobacteriosis, 1 cryptosporidiosis, 1 *E. coli*, 1 giardiasis, 7 hepatitis A, 1 listeriosis, 4 salmonellosis, 1 shigellosis and 1 yersiniosis).

The Carbapenem Resistant Enterobacteriaceae (CP-CRE), the new reportable, is continuing to increase monthly since all local hospitals are sending isolates to ODH. After reviewing the cases, ODH sends feedback and additional instructions for LHD's. There were no new CP-CRE cases reported in January.

**2. Outbreaks:** There were no reported outbreaks in Summit County in January.

**Hepatitis A:** As of January 28, the Ohio Department of Health reported 1531 hepatitis A cases linked to the statewide outbreak in 2018-19. Of the 11 cases of hepatitis A reported in Summit County in 2018, 4 were linked to the outbreak. ***In January 2019 alone there were 7 reported cases in Summit County, 3 of which were linked to the outbreak and 3 are pending.*** SCPH continued preventative action by offering the combined hepatitis A/B vaccine (Twinrix) at needle exchange sites in January, and 8 vaccines were administered.

**3. Epicenter:** Epicenter is an electronic surveillance system which provides instant notification of unusual symptomatic activity at local Emergency Departments. Two Epicenter alerts were issued during January for the following communicable disease symptom: Stiff Neck (2). Both of these alerts were investigated and determined be not of public health concern.

**4. Influenza Surveillance:** Surveillance for the 2018-2019 influenza season began on October 7. Influenza activity decreased to low but elevated levels in January, and most indicators remain below the 5 year average and far below 2017-2018 levels. 417 positive flu tests (401 type A and 16 type B) and 78 hospitalizations at Summit County hospitals were reported in January (some of which were not Summit County residents). So far this season, there have been two reported deaths due to influenza, and there were 31 deaths from pneumonia in January. Surveillance data from the 2018-2019 season and previous seasons are available in an influenza dashboard, which is located on the SCPH website: <https://www.scph.org/dashboards>

**5. Vector-borne Surveillance:** Vector borne surveillance ended on October 27, 2018, and the final report was issued on November 2. Surveillance will resume in May, 2019.

## Communicable Disease Reports Received, January 2019

Reportable Condition	January 2019	December 2018	Total Year-to-Date	January 2018
Amebiasis	0	0	0	0
Babesiosis	0	0	0	0
Botulism - infant	0	0	0	0
Botulism, food borne	0	0	0	0
Brucellosis	0	0	0	0
CP-CRE	0	4	0	0
Campylobacterosis	5	7	5	4
Chlamydia infection	288	290	288	280
Cholera	0	0	0	0
Coccidioidomycosis	0	0	0	2
Creutzfeld-Jakob Disease	0	0	0	0
Cryptosporidiosis	1	4	1	2
Cyclosporiasis	0	0	0	0
Dengue	0	0	0	0
E. coli, Shiga Toxin-Producing (O157:H7, Not O157, Unknown Serotype)	1	1	1	2
Ehrlichiosis/ anaplasmosis	0	1	0	0
Giardiasis	1	2	1	3
Gonococcal infection	86	77	86	79
Haemophilus influenzae	3	2	3	2
Hemolytic uremic syndrome (HUS)	0	0	0	1
Hepatitis A	7	1	7	0
Hepatitis B - acute	7	5	7	3
Hepatitis B - chronic	8	7	8	9
Hepatitis B - perinatal (see Notes on page 3)	2	0	2	0
Hepatitis C- acute	1	2	1	2
Hepatitis C- chronic	49	46	49	68
Hepatitis C - perinatal infection	1	0	1	0
Hepatitis E	0	0	0	0
HIV/AIDS	4	9	4	5
Influenza - ODH Lab Results	1	0	1	0
Influenza-associated hospitalization	60	31	60	475
Influenza-associated pediatric mortality	0	0	0	1
LaCrosse virus disease (other california serogroup virus diseases)	0	0	0	0
Legionellosis - Legionnaires' Disease	2	2	2	2
Listeriosis	1	0	1	0
Lyme Disease	1	0	1	1
Malaria	0	0	0	0
MERS	0	0	0	0
Measles	0	0	0	0
Meningitis - aseptic/viral	1	4	1	1
Meningitis-bacterial (Not <i>N. meningitidis</i> )	0	0	0	0

## Communicable Disease Reports Received, January 2019

Reportable Condition	January 2019	December 2018	Total Year- to-Date	January 2018
Meningococcal disease- <i>Neisseria meningitidis</i>	0	0	0	0
Mumps	0	0	0	0
Other arthropod-borne disease	0	0	0	0
Pertussis	18	24	18	4
Psittacosis	0	0	0	0
Q Fever	1	0	1	0
Rubella	0	0	0	0
Salmonellosis	4	7	4	2
Shigellosis	1	2	1	3
Spotted fever rickettsiosis, including RMSF	0	1	0	0
Streptococcal - Group A invasive	5	3	5	3
Streptococcal - Group B in newborn	0	2	0	0
Streptococcal toxic shock syndrome (STSS)	0	0	0	1
Streptococcus pneumoniae - invasive - unknown resistance	6	5	6	7
Streptococcus pneumoniae - invasive - resistant	1	4	1	3
Syphilis - all stages	4	4	4	9
Toxic Shock Syndrome (TSS)	0	0	0	0
Trichinellosis	0	0	0	0
Tuberculosis	0	0	0	1
Tularemia	0	0	0	0
Typhoid fever	0	0	0	0
Varicella	0	0	0	4
Vibriosis (not cholera)	0	0	0	0
West Nile	0	0	0	0
Yersiniosis	1	0	1	1
Zika virus	0	0	0	0
<b>Total</b>	<b>571</b>	<b>547</b>	<b>571</b>	<b>980</b>

### Notes:

1) This report includes the number of reports of disease received and investigated by Summit County Public Health (SCPH). This includes all reports that were determined to be probable, suspected, or confirmed. Based on case investigation, clinical diagnoses, epidemiological case definitions, and lab results, the case status may change.

2) The Total Year-to-Date column reflects all cases of disease where SCPH is identified as the local health department in the Ohio Disease Reporting System (ODRS) as of the date that data was extracted. This includes the cases of disease entered into ODRS after last month's report was generated which will now be included in the Previous Month Revised column. Data may also vary in response to recent changes in data extraction and analysis. Because case classifications can change over time, monthly figures should not be considered final until the annual report is complete.

3) The number of perinatal hepatitis B cases reflect the number of infants born to hepatitis B positive mothers during the time period indicated. These infants will be followed by the Perinatal Hepatitis B Prevention Program (PHBPP) until serology indicates that the child has immunity.

For questions or comments about this report, please contact Leanne Beavers BSN, RN at (330) 926-5617. This report was issued on **February 1, 2019**.