



# Communicable Disease Report Summit County October, 2019



**1. Monthly Highlights/Observations: Tuberculosis-** One new case of TB was reported in October. 21 possible TB cases have been investigated so far in 2019: nine were determined to not be a case, six cases were confirmed, and six cases are waiting for the doctors' final determination. SCPH CDU continued to investigate local contacts for two pulmonary TB cases that were diagnosed post-mortem. SCPH CDU currently provides direct observed therapy (DOT) to 8 cases (3 cases of pulmonary TB, 4 extra pulmonary cases, and one combined pulmonary /extrapulmonary case). DOT clients receive daily to monthly visits depending on side effects and where client is in treatment. 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.

The CDU also investigated 15 cases of hepatitis B, 5 *Haemophilis influenzae*, 4 pertussis, 4 Lyme disease, 3 Legionnaire's disease, 2 aseptic/viral meningitis, 2 bacterial meningitis, 2 spotted fever rickettsiosis, and 5 carbapenem resistant enterobacteriaceae (CP-CRE). 41 enteric cases (11 campylobacteriosis, 4 cryptosporidiosis, 1 cyclosporiasis, 4 *E. coli*, 6 giardiasis, 8 hepatitis A, 6 salmonellosis, and 1 shigellosis) were investigated in October. ***There were no confirmed cases of measles reported in Summit County in 2019. There was one confirmed case of measles in Stark County in July, 2019; no other confirmed cases have been reported in Ohio.***

**2. Outbreaks:** No outbreaks were reported to the CDU in October.

**Hepatitis A:** As of November 4, the Ohio Department of Health reported 3,374 hepatitis A cases linked to the statewide outbreak in 2018-19. ***As of October 31, 2019, there were 182 reported hepatitis A cases in Summit County in 2018 and 2019, 143 of which were linked to the outbreak.*** SCPH continued preventative action by offering the hepatitis A vaccine to vulnerable populations: 125 vaccines were administered at seven different locations in Summit County in October (749 total in 2019).

**3. Epicenter:** Epicenter is an electronic surveillance system which provides instant notification of unusual symptomatic activity at local Emergency Departments. 5 Epicenter alerts were issued during October for the following communicable disease symptoms: Edema (2), Stiff Neck (1), and Nausea (2). These alerts were investigated and determined to be not of public health concern.

**4. Influenza Surveillance:** Surveillance for the 2019-2020 influenza season began on October 6, and the initial report was issued on October 25. Influenza activity in October was minimal, with 4 positive flu tests (2 type A and 2 type B) and no hospitalizations at Summit County hospitals during the month. Surveillance data from the 2019-2020 season and previous seasons will be 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 26, 2019, and the final report was issued on November 5. Season summary: there were 0 West Nile virus (WNV) cases reported in Summit County. Summit County health facilities performed 92 WNV tests or arbovirus panels in 2019, with 5 positive results (5.4%). All positive tests were from previous infections. The same facilities completed 722 Lyme disease tests, with 74 (10.5%) positive results. So far in 2019, 25 Lyme disease cases, 2 ehrlichiosis, 4 Rocky Mountain spotted fever cases and 2 malaria cases were reported in Summit County. During the 2019 season, 91,468 mosquitos were collected, identified and submitted to ODH as pooled samples by the SCPH Environmental Health division. ODH Test results indicated that 36 of the 2,317 pooled samples tested positive for WNV.

## Communicable Disease Reports Received, October 2019

Reportable Condition	October 2019	September 2019	Year-to- Date 2019	Year-to- Date 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	1
CP-CRE	5	1	17	14
Campylobacteriosis	11	6	108	87
Chlamydia infection	335	300	2,986	2,845
Cholera	0	0	0	0
Coccidioidomycosis	0	0	0	6
Creutzfeld-Jakob Disease	0	0	1	1
Cryptosporidiosis	4	1	27	32
Cyclosporiasis	1	0	8	24
Dengue	0	0	0	1
E. coli, Shiga Toxin-Producing (O157:H7, Not O157, Unknown Serotype)	4	1	32	25
Ehrlichiosis/ anaplasmosis	0	2	2	0
Giardiasis	6	10	47	42
Gonococcal infection	144	101	1,075	920
<i>Haemophilus influenzae</i> infection	5	2	25	9
Hemolytic uremic syndrome (HUS)	0	0	0	1
Hepatitis A	8	15	171	9
Hepatitis B - acute	5	1	35	23
Hepatitis B - chronic	10	5	112	93
Hepatitis B - perinatal (see Notes on page 3)	1	0	7	16
Hepatitis C- acute	1	1	30	12
Hepatitis C- chronic	64	40	526	571
Hepatitis C - perinatal infection	1	0	5	NR
Hepatitis E	0	0	0	0
HIV/AIDS	5	5	46	41
Influenza - ODH Lab Results	0	0	3	0
Influenza-associated hospitalization	0	0	533	1000
Influenza-associated pediatric mortality	0	0	0	1
LaCrosse virus disease	0	0	0	0
Legionellosis - Legionnaires' Disease	3	4	38	34
Listeriosis	0	0	3	1
Lyme Disease	4	2	26	27
Malaria	0	0	2	4
MERS	0	0	0	0
Measles	0	0	1	0
Meningitis - aseptic/viral	2	2	20	28
Meningitis-bacterial (Not N. meningitidis)	2	1	4	4
Meningococcal disease- <i>Neisseria meningitidis</i>	0	0	0	0

## Communicable Disease Reports Received, October 2019

Reportable Condition	October 2019	September 2019	Year-to- Date 2019	Year-to- Date 2018
Mumps	0	0	2	1
Other arthropod-borne disease	0	0	0	0
Pertussis	4	3	50	43
Powassan virus disease	0	0	0	0
Psittacosis	0	0	0	0
Q Fever	0	0	1	0
Rubella	0	0	0	0
Salmonellosis	6	6	56	57
Shigellosis	1	3	20	9
Spotted fever rickettsiosis, including RMSF	2	0	4	5
<i>Staphylococcal aureus</i> - intermediate resistance to vancomycin (VISA)	0	0	1	0
Streptococcal - Group A invasive	2	2	37	17
Streptococcal - Group B in newborn	0	0	4	1
Streptococcal toxic shock syndrome (STSS)	0	0	1	1
<i>Streptococcus pneumoniae</i> - invasive - unknown resistance	2	1	26	28
<i>Streptococcus pneumoniae</i> - invasive - resistant	0	2	14	12
Syphilis - all stages	7	6	46	67
Toxic Shock Syndrome (TSS)	0	0	0	0
Trichinellosis	0	0	0	0
Tuberculosis	1	0	6	12
Tularemia	0	0	0	0
Typhoid fever	0	0	0	1
Varicella	0	2	8	16
Vibriosis (not cholera)	0	0	2	1
West Nile virus infection	0	0	0	3
Yersiniosis	0	1	9	7
Zika virus infection	0	0	0	0
<b>Total</b>	<b>646</b>	<b>526</b>	<b>6,177</b>	<b>6,152</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 Joan Hall, MPH at (330) 926-5746 or the Communicable Disease Unit at (330) 375-26620 This report was issued on November 8, 2019.