



# Communicable Disease Report Summit County October, 2020



## 1. Monthly Highlights/Observations:

**Tuberculosis-** Two suspected cases of TB were reported and investigated in October. SCPH CDU continued to investigate local contacts for one TB case that was confirmed in 2017, and continued evaluation of three suspected cases. SCPH CDU currently provides direct observed therapy (DOT) to 13 cases (8 cases of pulmonary TB, 3 extra pulmonary cases and 2 pulmonary / extra pulmonary). One DOT case was initiated and one was closed in October. DOT clients receive daily to monthly visits depending on side effects and where client is in treatment. All cases are complex, which requires collaboration and coordination between multiple agencies and external community services.

The CDU also investigated 8 cases of hepatitis B, 1 case *Haemophilus influenzae* infection, 3 cases legionellosis, 5 cases Lyme disease, 1 case of pertussis, and 24 enteric cases (4 campylobacteriosis, 1 cryptosporidiosis, 1 cyclosporiasis, 6 giardiasis, 2 hepatitis A, 2 listeriosis, 7 salmonellosis, and 1 vibriosis) in October.

**2. Outbreaks:** 20 COVID-19 outbreaks were reported to the CDU in October, and were associated with long term care facilities, manufacturing sites, office environments, schools/universities, sports teams, fraternal organizations, first responders, municipal facilities, day cares / preschools, and group homes.

**COVID-19:** There were 2,201 confirmed or probable cases of COVID-19 reported in Summit County, all were investigated by the CDU staff. Investigation of COVID-19 cases includes (but is not limited to) patient interviews, contact tracing, and follow up with healthcare providers and employers. 67,255 COVID-19 cases were reported in Ohio in October. COVID-19 information, a weekly COVID-19 report, and a dashboard with data for Summit County and Ohio can be accessed here: <https://www.scph.org/covid>

**3. Epicenter:** Epicenter is an electronic surveillance system which provides instant notification of unusual symptomatic activity at local Emergency Departments. Sixteen Epicenter alerts were issued during October for the following communicable disease symptoms: Botulinic (6), Vision (6), and Cough (4). These alerts were investigated and were determined to not be of public concern.

**4. Influenza Surveillance:** Surveillance for the 2020-2021 influenza season began on October 4, and the initial reports were issued on October 30. Influenza activity in October was minimal, with 0 positive flu tests and no hospitalizations at Summit County hospitals. Data from the 2020-2021 season and previous seasons are available in an influenza dashboard, which is located on the SCPH website: <https://www.scph.org/dashboards> Weekly influenza reports may be accessed here: <https://www.scph.org/flu-surveillance-reports>

**5. Vector-borne Surveillance:** Vector borne surveillance ended on October 24, 2020, 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 71 WNV tests or arbovirus panels in 2020, with 3 positive results (4.2%). All positive tests were from previous infections. The same facilities completed 624 Lyme disease tests, with 105 (16.8%) positive or indeterminate results. So far in 2020, 36 Lyme disease, 1 ehrlichiosis, 2 LaCrosse virus disease and 1 babesiosis cases were reported in Summit County. During the 2020 season, 11,279 mosquitos were collected, identified and submitted to ODH as pooled samples by Summit County agencies. ODH Test results indicated that 2 of the 108 pooled samples tested positive for WNV. Copies of the reports may be accessed at: <https://www.scph.org/vector-surveillance-reports>

## Communicable Disease Reports Received, October 2020

| Reportable Condition   | Oct 2020 | Sept 2020 | Year-to-Date 2020 | Year-to-Date 2019 |
|--|----------|-----------|-------------------|-------------------|
| Amebiasis  | 0        | 0         | 0                 | 0                 |
| Babesiosis   | 0        | 0         | 1                 | 0                 |
| Botulism - infant  | 0        | 0         | 0                 | 0                 |
| Botulism, food borne   | 0        | 0         | 0                 | 0                 |
| Brucellosis  | 0        | 0         | 1                 | 0                 |
| COVID-19   | 2,201    | 979       | 7,830             | NR                |
| CP-CRE   | 0        | 0         | 1                 | 17                |
| Campylobacteriosis   | 4        | 9         | 57                | 108               |
| Chlamydia infection  | 290      | 280       | 2,610             | 2,986             |
| Cholera  | 0        | 0         | 0                 | 0                 |
| Coccidioidomycosis   | 0        | 1         | 1                 | 0                 |
| Creutzfeld-Jakob Disease   | 0        | 0         | 0                 | 1                 |
| Cryptosporidiosis  | 1        | 1         | 11                | 27                |
| Cyclosporiasis   | 1        | 0         | 7                 | 8                 |
| Dengue   | 0        | 0         | 0                 | 0                 |
| <i>E. coli</i> , Shiga Toxin-Producing (O157:H7, Not O157, Unknown Serotype) | 0        | 1         | 16                | 32                |
| Ehrlichiosis/ anaplasmosis   | 0        | 0         | 1                 | 2                 |
| Giardiasis   | 6        | 2         | 28                | 47                |
| Gonococcal infection   | 208      | 209       | 1,563             | 1075              |
| <i>Haemophilus influenzae</i> infection                                      | 1        | 0         | 6                 | 25                |
| Hantavirus infection   | 0        | 0         | 0                 | 0                 |
| Hemolytic uremic syndrome (HUS)  | 0        | 0         | 0                 | 0                 |
| Hepatitis A  | 2        | 2         | 25                | 171               |
| Hepatitis B - acute  | 1        | 0         | 10                | 35                |
| Hepatitis B - chronic  | 7        | 7         | 88                | 112               |
| Hepatitis B - perinatal (see Notes on page 3)                                | 2        | 1         | 10                | 7                 |
| Hepatitis C- acute   | 0        | 1         | 4                 | 30                |
| Hepatitis C- chronic   | 55       | 37        | 430               | 526               |
| Hepatitis C - perinatal infection  | 1        | 1         | 2                 | 5                 |
| Hepatitis E  | 0        | 0         | 0                 | 0                 |
| HIV/AIDS   | 6        | 4         | 41                | 46                |
| Influenza - ODH Lab Results  | 0        | 0         | 6                 | 3                 |
| Influenza-associated hospitalization   | 0        | 0         | 566               | 533               |
| Influenza-associated pediatric mortality                                     | 0        | 0         | 1                 | 0                 |
| LaCrosse virus disease   | 0        | 1         | 2                 | 0                 |
| Legionellosis  | 3        | 5         | 28                | 38                |
| Listeriosis  | 2        | 0         | 3                 | 3                 |
| Lyme Disease   | 5        | 5         | 38                | 26                |
| Malaria  | 0        | 0         | 0                 | 2                 |
| MERS   | 0        | 0         | 0                 | 0                 |
| Measles  | 0        | 0         | 0                 | 1                 |
| Meningitis - aseptic/viral   | 0        | 2         | 11                | 20                |
| Meningitis-bacterial (Not <i>N. meningitidis</i> )                           | 0        | 0         | 3                 | 4                 |
| Meningococcal disease- <i>Neisseria meningitidis</i>                         | 0        | 0         | 0                 | 0                 |

## Communicable Disease Reports Received, October 2020

| Reportable Condition  | Oct 2020     | Sept 2020    | Year-to-Date 2020 | Year-to-Date 2019 |
|---|--------------|--------------|-------------------|-------------------|
| Mumps   | 0            | 0            | 1                 | 2                 |
| Pertussis   | 1            | 2            | 5                 | 50                |
| Powassan virus disease  | 0            | 0            | 0                 | 0                 |
| Psittacosis   | 0            | 0            | 0                 | 0                 |
| Q Fever   | 0            | 0            | 0                 | 1                 |
| Rubella   | 0            | 0            | 0                 | 0                 |
| <i>Salmonella typhi</i>   | 0            | 0            | 1                 | NR                |
| Salmonellosis   | 7            | 4            | 56                | 56                |
| Shigellosis   | 0            | 1            | 5                 | 20                |
| Spotted fever rickettsiosis, including RMSF                                 | 0            | 0            | 0                 | 4                 |
| <i>Staphylococcal aureus</i> - intermediate resistance to vancomycin (VISA) | 0            | 0            | 0                 | 1                 |
| Streptococcal - Group A invasive  | 0            | 2            | 24                | 37                |
| Streptococcal - Group B in newborn  | 0            | 1            | 4                 | 4                 |
| Streptococcal toxic shock syndrome (STSS)                                   | 0            | 0            | 1                 | 1                 |
| <i>Streptococcus pneumoniae</i> - invasive - unknown resistance             | 3            | 1            | 26                | 26                |
| <i>Streptococcus pneumoniae</i> - invasive - resistant                      | 0            | 0            | 7                 | 14                |
| Syphilis - all stages   | 13           | 20           | 90                | 46                |
| Toxic Shock Syndrome (TSS)  | 0            | 0            | 0                 | 0                 |
| Trichinellosis  | 0            | 0            | 0                 | 0                 |
| Tuberculosis  | 0            | 0            | 10                | 6                 |
| Tularemia   | 0            | 0            | 0                 | 0                 |
| Typhoid fever   | 0            | 0            | 0                 | 0                 |
| Varicella   | 0            | 0            | 4                 | 8                 |
| Vibriosis (not cholera)   | 1            | 0            | 1                 | 2                 |
| West Nile virus infection   | 0            | 0            | 0                 | 0                 |
| Yersiniosis   | 0            | 1            | 8                 | 9                 |
| Zika virus infection  | 0            | 0            | 0                 | 0                 |
| <b>Total</b>  | <b>2,831</b> | <b>1,589</b> | <b>13,644</b>     | <b>6,177</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. NR = not reported in previous year.
- 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) 375-2662. This report was issued on November 6, 2020.