



Monthly Communicable Disease Report Summit County August, 2022



Monthly Highlights/Observations:

1. Tuberculosis- 1 new suspected case of TB was reported in August, and 9 contacts from current and previous cases continue to be investigated. In addition, the program remains open to continue the tuberculosis screening process for up to 150 refugees, in collaboration with other agencies and healthcare providers. SCPH CDU currently provides direct observed therapy (DOT) to 1 case. Additionally, 1 DOT case was closed in August and 1 was opened. DOT clients receive daily to monthly visits via video calls depending on side effects and where the client is in treatment. All cases are complex, which requires collaboration and coordination between multiple agencies and external community services.

The Communicable Disease Unit investigated 91 communicable disease cases: 18 cases of Chronic Hepatitis B, 12 Cases of Campylobacter, 10 cases of Monkeypox, 6 cases of Salmonella, 5 cases of Streptococcal Group A and 5 cases of Streptococcus pneumoniae, 4 cases of CP-CRE, 4 cases of Legionella, 3 cases each of Cryptosporidiosis, Hepatitis A, Chronic Hepatitis C, and Pertussis, 2 cases each of Giardiasis, Acute Hepatitis B, Aseptic Meningitis, Shigellosis and Staphylococcal aureus (VISA) and 1 case each of Amebiasis, Coccidiomycosis, E. Coli, Varicella and Vibriosis. *Note: Since some reported cases end up being classified as "Not A Case" in ODRS or the case may have been previously reported, the investigation case totals may vary compared to the counts in the table.*

2. Outbreaks: 25 COVID-19 outbreaks were identified by the CDU in August, occurring in long term care, day care, workplace and Correctional institution settings. 2 non-COVID-19 outbreaks were investigated in August.

COVID-19: There were 4,396 confirmed or probable cases of COVID-19 reported in Summit County. COVID-19 information, a weekly COVID-19 report, and a dashboard with data for Summit County 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. 14 Epicenter alerts were issued during August. 13 of which were for the following communicable disease symptoms: Eyes (4), Diarrhea - Not Watery/Bloody (4), Congestion (1), Hemorrhaging (1), Fever (1), Respiratory (1), Paralysis (1). (1 alert was issued for Suspected Drug Overdose)

4. Influenza Surveillance: Surveillance for the 2021-2022 influenza season ended on May 7; the final report was issued on May 13, 2022. Influenza activity in May was classified as minimal: there were 161 positive flu tests (all type A) and 13 influenza hospitalizations at reporting Summit County labs and hospitals. Data from the 2019-20 and previous influenza seasons are available in an influenza dashboard, which is located on the SCPH website: <https://www.scph.org/dashboards> Weekly influenza reports for the 2021-22 season and previous seasons may be accessed here: <https://www.scph.org/flu-surveillance-reports>

5. Vector-borne Surveillance: Vector borne surveillance did resume on May 22, 2022 and the first report was issued in mid-June. Copies of the reports for 2022 and previous years may be accessed at: <https://www.scph.org/vector-surveillance-reports>

Communicable Disease Reports Received, August 2022

Reportable Condition	August 2022	July 2022	Year-to- Date 2022	Year-to- Date 2021
Amebiasis	1	1	7	2
Babesiosis	0	0	0	1
Botulism - infant	0	0	0	1
Botulism, food borne	0	0	0	0
Brucellosis	0	0	0	0
COVID-19	4,396	3,862	38,024	24,233
CP-CRE	4	1	16	11
Campylobacteriosis	11	13	67	45
Chlamydia infection	250	257	1,948	2,017
Cholera	0	0	0	0
Coccidioidomycosis	0	1	2	2
Creutzfeld-Jakob Disease	0	0	0	0
Cryptosporidiosis	3	4	17	13
Cyclosporiasis	0	1	1	10
Dengue	0	0	0	0
<i>E. coli</i> , Shiga Toxin-Producing (O157:H7, Not O157, Unknown Serotype)	1	4	20	11
Ehrlichiosis/ anaplasmosis	0	0	0	2
Giardiasis	1	3	41	28
Gonococcal infection	117	125	959	1,198
<i>Haemophilus influenzae</i> infection	0	1	5	1
Hantavirus infection	0	0	0	0
Hemolytic uremic syndrome (HUS)	0	0	0	0
Hepatitis A	2	0	4	11
Hepatitis B - acute	1	0	5	8
Hepatitis B - chronic	12	2	69	65
Hepatitis B - perinatal (see Notes on page 3)	4	1	12	11
Hepatitis C- acute	1	0	1	3
Hepatitis C- chronic	34	29	299	332
Hepatitis C - perinatal infection	0	0	3	2
Hepatitis E	0	0	0	0
HIV/AIDS	3	5	28	31
Influenza - ODH Lab Results	5	2	27	0
Influenza-associated hospitalization	0	0	32	0
Influenza-associated pediatric mortality	0	0	0	0
LaCrosse virus disease	0	0	0	3
Legionellosis	4	5	21	23
Listeriosis	0	0	2	2
Lyme Disease	20	17	70	68
MIS-C associated with COVID-19	0	0	8	16
Malaria	0	0	1	1
MERS	0	0	0	0
Measles	0	0	0	0
Meningitis - aseptic/viral	2	2	5	5
Meningitis-bacterial (Not <i>N. meningitidis</i>)	0	0	1	4

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Reportable Condition	August 2022	July 2022	Year-to- Date 2022	Year-to- Date 2021
Meningococcal disease- <i>Neisseria meningitidis</i>	0	0	0	0
Monkeypox (confirmed and probable)	10	0	10	NR
Mumps	0	0	0	0
Other arthropod-borne disease	0	0	0	NR
Pertussis	1	1	5	5
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	0
Salmonellosis	5	5	25	29
Shigellosis	2	0	6	9
Spotted fever rickettsiosis, including RMSF	0	0	0	1
<i>Staphylococcal aureus</i> - intermediate resistance to vancomycin (VISA)	0	0	0	0
Streptococcal - Group A invasive	5	2	17	18
Streptococcal - Group B in newborn	0	0	2	1
Streptococcal toxic shock syndrome (STSS)	0	0	0	2
<i>Streptococcus pneumoniae</i> - invasive - unknown resistance	5	4	25	8
<i>Streptococcus pneumoniae</i> - invasive - resistant	0	2	6	4
Syphilis - all stages	33	25	190	140
Toxic Shock Syndrome (TSS)	0	0	0	0
Trichinellosis	0	0	0	0
Tuberculosis	0	0	3	4
Tularemia	0	0	0	0
Typhoid fever	0	0	0	0
Varicella	0	0	7	6
Vibriosis (not cholera)	1	1	3	1
West Nile virus infection	0	0	0	0
Yersiniosis	0	1	6	9
Zika virus infection	0	0	0	0
Total	4,907	4,352	41,844	28,398

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, IDCM 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 reporting period. 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 the Communicable Disease Unit at (330) 375-2662.
This report was issued on September 2, 2022.*