



Communicable Disease Report Summit County May, 2021



Public Health
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1. Monthly Highlights/Observations:

Tuberculosis- One new suspected case of TB was reported in May, and 10 contacts continue to be investigated. SCPH CDU currently provides direct observed therapy (DOT) to 5 cases; one DOT case was opened in May. DOT clients receive daily to monthly visits via FaceTime calls 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 Communicable Disease Unit investigated 71 communicable disease cases: 2 cases of CP-CRE, 2 case of acute hepatitis B, 13 cases of chronic hepatitis B, 2 cases of chronic hepatitis C, 2 cases of perinatal hepatitis C, 1 case of legionellosis, 7 cases of Lyme disease, 1 case of MIS-C associated with COVID-19, 1 case of *Staphylococcus* scalded skin syndrome, 1 case of streptococcal toxic shock syndrome, 6 cases streptococcal disease Group A, 3 cases of *Streptococcus pneumoniae* infection, 7 cases of varicella infection, and 23 enteric cases (7 campylobacteriosis, 1 cryptosporidiosis, 2 *E. coli* infections, 1 giardiasis, 4 hepatitis A, 7 salmonellosis, and 1 shigellosis) in May. **Note:** *Since some reported cases end up being classified as "Not A Case" in ODRS, the investigation case totals may exceed the counts in the table.*

2. Outbreaks: 6 COVID-19 outbreaks were reported to the CDU in May, these were associated with day cares / preschools, schools, and sports teams. No non-COVID-19 outbreaks were reported in May.

COVID-19: There were 1,611 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. A preliminary total of 25,672 COVID-19 cases were reported in Ohio in May. 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. ESSENCE: ESSENCE is an electronic surveillance system which provides instant notification of unusual symptomatic activity at local Emergency Departments. No ESSENCE alerts were issued for Summit County during May. These alerts were investigated and were determined to be either associated with the surge of COVID-19 cases this month or not to be a public health concern. Epicenter was inactivated and replaced by the ESSENCE Surveillance System on January 1, 2021.

4. Influenza Surveillance: Surveillance for the 2020-2021 influenza season began on October 4 and ended on May 8, 2021; the final report was issued on May 22. Influenza activity in May continued to be minimal, with zero positive flu tests and zero hospitalizations at reporting Summit County labs and hospitals. Data from previous influenza 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 resumed on May 23, 2021 with the first report to be issued in mid-June. Copies of the reports for 2020 and previous years may be accessed at: <https://www.scph.org/vector-surveillance-reports>

Communicable Disease Reports Received, May 2021

Reportable Condition	May 2021	April 2021	Year-to- Date 2021	Year-to- Date 2020
Amebiasis	0	0	0	0
Babesiosis	0	0	1	1
Botulism - infant	0	1	1	0
Botulism, food borne	0	0	0	0
Brucellosis	0	0	0	0
COVID-19	1,611	3,316	20,178	1533
CP-CRE	2	1	8	9
Campylobacteriosis	7	2	17	22
Chlamydia infection	261	215	1,293	1,180
Cholera	0	0	0	0
Coccidioidomycosis	0	0	1	0
Creutzfeld-Jakob Disease	0	0	0	0
Cryptosporidiosis	1	2	5	7
Cyclosporiasis	0	0	0	0
Dengue	0	0	0	0
<i>E. coli</i> , Shiga Toxin-Producing (O157:H7, Not O157, Unknown Serotype)	2	1	4	7
Ehrlichiosis/ anaplasmosis	0	1	1	1
Giardiasis	1	3	13	9
Gonococcal infection	160	125	774	620
<i>Haemophilus influenzae</i> infection	0	0	0	5
Hantavirus infection	0	0	0	0
Hemolytic uremic syndrome (HUS)	0	0	0	0
Hepatitis A	2	4	9	15
Hepatitis B - acute	0	1	9	6
Hepatitis B - chronic	7	7	30	53
Hepatitis B - perinatal (see Notes on page 3)	2	2	12	1
Hepatitis C- acute	0	0	1	2
Hepatitis C- chronic	38	38	192	210
Hepatitis C - perinatal infection	2	0	2	0
Hepatitis E	0	0	0	0
HIV/AIDS	7	3	25	22
Influenza - ODH Lab Results	0	0	0	6
Influenza-associated hospitalization	0	0	0	565
Influenza-associated pediatric mortality	0	0	0	1
LaCrosse virus disease	0	0	0	0
Legionellosis	1	2	7	7
Listeriosis	0	0	1	0
Lyme Disease	7	2	16	7
MIS-C associated with COVID-19	1	3	16	NR
Malaria	0	0	1	0
MERS	0	0	0	0
Measles	0	0	0	0
Meningitis - aseptic/viral	0	0	4	5
Meningitis-bacterial (Not <i>N. meningitidis</i>)	0	1	4	2

Communicable Disease Reports Received, May 2021

Reportable Condition	May 2021	April 2021	Year-to- Date 2021	Year-to- Date 2020
Meningococcal disease- <i>Neisseria meningitidis</i>	0	0	0	0
Mumps	0	0	0	0
Pertussis	0	0	3	2
Powassan virus disease	0	0	0	0
Psittacosis	0	0	0	0
Q Fever	0	0	0	0
Rubella	0	0	0	0
<i>Salmonella typhi</i>	0	0	0	1
Salmonellosis	7	2	18	16
Shigellosis	1	1	3	2
Spotted fever rickettsiosis, including RMSF	0	0	0	0
<i>Staphylococcal aureus</i> - intermediate resistance to vancomycin (VISA)	0	0	0	0
Streptococcal - Group A invasive	6	0	13	15
Streptococcal - Group B in newborn	0	0	1	2
Streptococcal toxic shock syndrome (STSS)	0	1	1	0
<i>Streptococcus pneumoniae</i> - invasive - unknown resistance	3	1	4	18
<i>Streptococcus pneumoniae</i> - invasive - resistant	0	0	1	5
Syphilis - all stages	15	25	104	34
Toxic Shock Syndrome (TSS)	0	0	0	0
Trichinellosis	0	0	0	0
Tuberculosis	1	2	3	6
Tularemia	0	0	0	0
Typhoid fever	0	0	0	0
Varicella	4	1	6	4
Vibriosis (not cholera)	0	0	1	0
West Nile virus infection	0	0	0	0
Yersiniosis	0	3	7	4
Zika virus infection	0	0	0	0
Total	2,154	3,770	22,790	4,405

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 June 3, 2021.