



Communicable Disease Report Summit County April, 2017



April Report:

1. Monthly Highlights/Observations:

The SCPH Communicable Disease Unit (CDU) continues to follow 5 cases of active pulmonary tuberculosis (TB), all on Direct Observed Therapy (DOT). The CDU also is investigating 5 suspected cases of TB and one complicated multi drug resistant (MDR) TB. An investigation of infant botulism in a 3 month old occurred and was determined to be a case of Guillian Barre Syndrome. Two cases of Legionella were investigated in April. A case of Q Fever is currently under investigation as well.

2. Outbreaks:

No outbreaks were reported in April, but two foodborne complaints involving two or more persons were investigated by the CDU.

3. Epicenter: Epicenter monitors local hospital Emergency Departments for unusual disease activity. During the month of April, there were 9 Epicenter alerts for the following symptoms/syndromes: Eye Anomaly (3), Congestion (3), Stiff Neck (1), and Diarrhea (2). Investigation of these alerts indicated that there were no concerns for an emerging public health threat.

4. Surveillance: Influenza surveillance started in October. The most current flu report was for weeks 27 and 28 (April 9th, 2017 - April 16th, 2017), and indicated a decline in flu activity in Summit County. Total number of influenza associated hospitalization (Summit County) for influenza season 2016-2017 = 355

5. Vector-borne Surveillance: Vector-borne disease surveillance will recommence around June 1, 2017.

Communicable Disease Reports Received, April 2017

Reportable Condition	Current Month Reported	Previous Month (Revised)	Total Year-to-Date	Total April 2016
Amebiasis	0	0	0	0
Babesiosis	0	1	1	0
Botulism - infant	0	0	0	0
Botulism, food borne	0	0	0	0
Brucellosis	0	0	0	0
Campylobacteriosis	1	3	7	3
Chlamydia infection	189	228	907	249
Cholera	0	0	0	0
Coccidioidomycosis	1	0	1	0
Creutzfeld-Jakob Disease	0	0	0	0
Cryptosporidiosis	0	0	1	3
Dengue	0	0	0	0
E. coli - O157:H7	0	0	0	0
E. coli - Not O157:H7	0	0	0	0
Ehrlichiosis-Ehrlichia chaffeensis	0	0	1	0
Giardiasis	1	3	14	2
Gonococcal infection	95	64	312	122
Haemophilus influenzae	1	2	3	0
Hepatitis A	0	2	3	3
Hepatitis B - acute	1	1	8	1
Hepatitis B - chronic	6	10	32	12
Hepatitis B - perinatal	1	5	7	2
Hepatitis C- acute	3	1	5	2
Hepatitis C- chronic	62	79	278	61
Hepatitis E	0	0	0	0
HIV/AIDS	3	2	15	10
Influenza - ODH Lab Results	0	0	0	0
Influenza-associated hospitalization	42	146	390	70
Influenza-associated pediatric mortality	0	0	0	0
LaCrosse virus disease (other california serogroup virus diseases)	0	0	0	0
Legionellosis - Legionnaires' Disease	1	0	3	0
Listeriosis	0	0	0	0
Lyme	0	2	6	5
Malaria	0	0	0	0
MERS	0	0	0	0
Measles	0	0	0	0
Meningitis - aseptic/viral	1	1	7	4
Meningitis-bacterial (Not N. meningitidis)	0	0	0	2
Meningococcal disease-Neisseria meningitidis	0	1	1	0
Mumps	0	0	0	2

Mycobacterial disease - other than tuberculosis	0	0	0	1
Other arthropod-borne disease	0	0	0	1
Pertussis	2	3	14	5
Q Fever	0	0	0	0
Rubella	0	0	0	0
Salmonellosis	3	3	9	2
Shigellosis	0	0	1	0
Spotted fever rickettsiosis, including RMSF	0	0	0	0
Streptococcal - Group A invasive	3	3	15	0
Streptococcal - Group B in newborn	0	1	1	0
Streptococcal toxic shock syndrome (STSS)	2	0	2	0
Streptococcus pneumoniae - invasive - unknown resistance	3	3	15	3
Streptococcus pneumoniae - invasive - resistant	0	0	2	1
Syphilis - all stages	5	5	27	7
Toxic Shock Syndrome (TSS)	0	0	0	0
Trichinellosis	0	0	0	0
Tuberculosis	0	0	1	0
Tularemia	0	0	0	0
Typhoid fever	0	0	0	0
Varicella	0	0	1	2
Vibriosis (not cholera)	0	1	1	0
West Nile	0	0	0	0
Yersiniosis	0	0	0	1
Zika virus	0	0	1	0
Total	426	570	2,092	576

Notes:

* This 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, confirmed or not-a-case. Based on case investigation, clinical diagnoses, epidemiological case definitions, and lab results, the case status may change.

* 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. Because case classifications can change over time, monthly figures should not be considered final until the annual report is complete.

For questions or comments about this report, please contact Bob Hasenyager, RS, MS, at 330.812.3857. This report was issued on April 3rd, 2017.

