



Communicable Disease Report Summit County December, 2019



1. Monthly Highlights/Observations:

Tuberculosis- One suspected case of TB was investigated in December, which was confirmed as a case. 25 possible TB cases have been investigated so far in 2019: Twelve were determined to not be a case, nine cases were confirmed, and four 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 9 cases (5 cases of pulmonary TB and 4 extra pulmonary cases). 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 6 cases of hepatitis B, 2 *Haemophilis influenzae*, 1 pertussis, 1 Lyme disease, 1 Legionnaire's disease, 1 coccidioidomycosis, and 2 carbapenem resistant enterobacteriaceae (CP-CRE). 29 enteric cases (8 campylobacteriosis, 2 cryptosporidiosis, 1 *E. coli* (Shiga Toxin-Producing), 2 giardiasis, 5 hepatitis A, 6 salmonellosis, 1 vibriosis, and 3 yersiniosis) were investigated in December. ***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: Three outbreaks were reported to the CDU in December, and all were associated with enteric illness.

Hepatitis A Community Outbreak: As of December 23, the Ohio Department of Health reported 3,446 hepatitis A cases linked to the statewide outbreak in 2018-19. ***As of December 31, 2019, there were 194 reported hepatitis A cases in Summit County in 2018 and 2019, 147 of which were linked to the outbreak.*** SCPH continued preventative action by offering the hepatitis A vaccine to vulnerable populations: 757 vaccines were administered in 2019).

3. Epicenter: Epicenter is an electronic surveillance system which provides instant notification of unusual symptomatic activity at local Emergency Departments. 15 Epicenter alerts were issued during December for the following communicable disease symptoms: Congestion (6), Stiff Neck (2), Cough (3), Vomiting (2), and Constitutional (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 December intensified towards the end of the month, and there continues to be an increasing trend. There were 407 positive flu tests (142 type A and 265 type B) and 52 influenza related hospitalization at Summit County hospitals reported during November. Surveillance data from the 2019-2020 season and previous seasons are available in an influenza dashboard, which is located on the SCPH website: <https://www.scph.org/dashboards> The weekly influenza report may be accessed here: <https://www.scph.org/flu-surveillance-reports>

5. Vector-borne Surveillance: Vector borne disease surveillance ended on October 26, 2019, and the final report was issued on November 5. Surveillance for the 2020 season will begin in late May. Copies of the reports may be accessed at: <https://www.scph.org/vector-surveillance-reports>

Communicable Disease Reports Received, December 2019

Reportable Condition	December 2019	November 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	1	1	1
CP-CRE	2	6	25	22
Campylobacteriosis	8	5	121	99
Chlamydia infection	238	259	3,484	3,365
Cholera	0	0	0	0
Coccidioidomycosis	1	0	1	6
Creutzfeld-Jakob Disease	0	0	1	1
Cryptosporidiosis	2	1	30	38
Cyclosporiasis	0	0	8	24
Dengue	0	0	0	1
<i>E. coli</i> , Shiga Toxin-Producing (O157:H7, Not O157, Unknown Serotype)	3	0	35	26
Ehrlichiosis/ anaplasmosis	0	0	2	1
Giardiasis	2	1	50	50
Gonococcal infection	101	114	1,290	1094
<i>Haemophilus influenzae</i> infection	2	2	29	11
Hantavirus infection	0	0	0	0
Hemolytic uremic syndrome (HUS)	0	1	1	1
Hepatitis A	5	8	183	11
Hepatitis B - acute	0	0	35	34
Hepatitis B - chronic	6	15	133	108
Hepatitis B - perinatal (see Notes on page 3)	5	3	15	14
Hepatitis C- acute	2	1	32	15
Hepatitis C- chronic	39	44	608	651
Hepatitis C - perinatal infection	0	0	5	1
Hepatitis E	0	0	0	0
HIV/AIDS	1	6	53	56
Influenza - ODH Lab Results	0	1	4	0
Influenza-associated hospitalization	55	3	591	996
Influenza-associated pediatric mortality	0	0	0	1
LaCrosse virus disease	0	0	0	0
Legionellosis - Legionnaires' Disease	4	4	46	39
Listeriosis	0	0	3	2
Lyme Disease	1	6	33	29
Malaria	0	0	2	4
MERS	0	0	0	0
Measles	0	0	1	0
Meningitis - aseptic/viral	0	2	22	35
Meningitis-bacterial (Not <i>N. meningitidis</i>)	0	0	4	4
Meningococcal disease- <i>Neisseria meningitidis</i>	0	0	0	0

Communicable Disease Reports Received, December 2019

Reportable Condition	December 2019	November 2019	Year-to- Date 2019	Year-to- Date 2018
Mumps	0	0	2	1
Other arthropod-borne disease	0	0	0	0
Pertussis	1	1	52	77
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	3	65	68
Shigellosis	0	0	20	14
Spotted fever rickettsiosis, including RMSF	0	0	4	6
<i>Staphylococcal aureus</i> - intermediate resistance to vancomycin (VISA)	0	0	1	0
Streptococcal - Group A invasive	4	0	41	22
Streptococcal - Group B in newborn	0	1	5	4
Streptococcal toxic shock syndrome (STSS)	0	0	1	1
<i>Streptococcus pneumoniae</i> - invasive - unknown resistance	7	3	36	36
<i>Streptococcus pneumoniae</i> - invasive - resistant	3	0	17	19
Syphilis - all stages	7	2	57	75
Toxic Shock Syndrome (TSS)	0	0	0	0
Trichinellosis	0	0	0	0
Tuberculosis	1	1	9	14
Tularemia	0	0	0	0
Typhoid fever	0	0	0	1
Varicella	0	0	8	18
Vibriosis (not cholera)	1	0	3	1
West Nile virus infection	0	0	0	3
Yersiniosis	2	3	14	7
Zika virus infection	0	0	0	0
Total	509	497	7,184	7,111

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) 375-2662. This report was issued on January 3, 2020.