

Communicable Disease Report Summit County February, 2021



1. Monthly Highlights/Observations:

Tuberculosis- No new suspected cases of TB were reported in February, and 5 contacts continue to be investigated. SCPH CDU currently provides direct observed therapy (DOT) to 2 cases. In January, 1 DOT therapy was initiated and 3 DOT cases were closed; 3 additional DOT cases were closed in February. 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 1 case of CP-CRE, 21 cases of hepatitis B (chronic or acute), 2 cases of hepatitis C, 2 cases of legionellosis, 3 cases of Lyme disease, 2 cases of bacterial meningitis, 5 cases of MIS-C associated with COVID-19, 2 cases streptococcal disease Group A, 1 case of varicella infection, and 15 enteric cases (3 campy1obacteriosis, 1 cryptosporidiosis, 2 giardiasis, 4 hepatitis A, 4salmonellosis, and 1 vibriosis) in February.

2. Outbreaks: 13 COVID-19 outbreaks were reported to the CDU in February, and were associated with long term care facilities, work environments, day cares / preschools, and sports teams. One GI-associated outbreak in a school / daycare setting was also reported.

COVID-19: There were 3,707 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 62,182 COVID-19 cases were reported in Ohio in February. 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: Epicenter 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 January. 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 the initial reports were issued on October 30. Influenza activity in February continued to be minimal, with one positive flu test (Type B) and zero hospitalizations at reporting Summit County labs and hospitals. Data from the 2020-2021 season and previous seasons are available in an influenza dashboard, which is located on the SCPH website: <u>https://www.scph.org/dashboards</u> Weekly influenza reports may be accessed here: <u>https://www.scph.org/flu-surveillance-reports</u>

5. Vector-borne Surveillance: Vector borne surveillance ended on October 24, 2020, and the final report was issued on November 5. Copies of the reports for 2020 and previous years may be accessed at: https://www.scph.org/vector-surveillance-reports

Communicable Disease Reports Received, February 2021						
Reportable Condition	Feb 2021	Jan 2021	Year-to- Date 2021	Year-to- Date 2020		
Amebiasis	0	0	0	0		
Babesiosis	0	0	0	1		
Botulism - infant	0	0	0	0		
Botulism, food borne	0	0	0	0		
Brucellosis	0	0	0	0		
COVID-19	3,707	8,367	12,074	NR		
CP-CRE	1	2	3	7		
Campylobacterosis	3	2	5	14		
Chlamydia infection	253	275	528	569		
Cholera	0	0	0	0		
Coccidioidomycosis	0	1	1	0		
Creutzfeld-Jakob Disease	0	0	0	0		
Cryptosporidiosis	1	0	1	7		
Cyclosporiasis	0	0	0	0		
Dengue	0	0	0	0		
E. coli, Shiga Toxin-Producing (O157:H7, Not O157,						
Unknown Serotype)	0	1	1	5		
Ehrlichiosis/ anaplasmosis	0	0	0	1		
Giardiasis	3	3	6	0		
Gonococcal infection	142	186	328	247		
Haemophilus influenzae infection	0	0	0	2		
Hantavirus infection	0	0	0	0		
Hemolytic uremic syndrome (HUS)	0	0	0	0		
Hepatitis A	2	1	3	9		
Hepatitis B - acute	4	3	7	1		
Hepatitis B - chronic	6	2	8	28		
Hepatitis B - perinatal (see Notes on page 3)	3	2	5	1		
Hepatitis C- acute	1	0	1	3		
Hepatitis C- chronic	40	36	76	107		
Hepatitis C - perinatal infection	0	0	0	0		
Hepatitis E	0	0	0	0		
HIV/AIDS	4	5	9	14		
Influenza - ODH Lab Results	0	0	0	1		
Influenza-associated hospitalization	0	0	0	438		
Influenza-associated pediatric mortality	0	0	0	0		
LaCrosse virus disease	0	0	0	0		
Legionellosis	1	1	2	3		
Listeriosis	1	0	1	0		
Lyme Disease	3	4	7	6		
MIS-C associated with COVID-19	5	5	10	NR		
Malaria	0	0	0	0		
MERS	0	0	0	0		
Measles	0	0	0	0		
Meningitis - aseptic/viral	0	2	2	4		
Meningitis-bacterial (Not N. meningitidis)	2	0	2	0		

Communicable Disease Reports Received, February 2021						
Reportable Condition	Feb 2021	Jan 2021	Year-to- Date 2021	Year-to- Date 2020		
Meningococcal disease-Neiserria meningitidis	0	0	0	0		
Mumps	0	0	0	1		
Pertussis	0	2	2	1		
Powassan virus disease	0	0	0	0		
Psittacosis	0	0	0	0		
Q Fever	0	0	0	0		
Rubella	0	0	0	0		
Salmonella typhi	0	0	0	1		
Salmonellosis	4	3	7	3		
Shigellosis	0	0	0	1		
Spotted fever rickettsiosis, including RMSF	0	0	0	0		
Staphylococcal aureus - intermediate resistance to						
vancomycin (VISA)	0	0	0	0		
Streptococcal - Group A invasive	2	2	4	6		
Streptococcal - Group B in newborn	0	1	1	0		
Streptococcal toxic shock syndrome (STSS)	0	0	0	0		
Streptococcus pneumoniae - invasive - unknown resistance	0	0	0	14		
Streptococcus pneumoniae - invasive - resistant	0	0	0	4		
Syphilis - all stages	25	13	38	20		
Toxic Shock Syndrome (TSS)	0	0	0	0		
Trichinellosis	0	0	0	0		
Tuberculosis	0	0	0	2		
Tularemia	0	0	0	0		
Typhoid fever	0	0	0	0		
Varicella	0	1	1	3		
Vibriosis (not cholera)	1	0	1	0		
West Nile virus infection	0	0	0	0		
Yersiniosis	0	1	1	1		
Zika virus infection	0	0	0	0		
Total	4,214	8,921	13,135	1,525		

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 March 9, 2021.