

Monthly Communicable Disease Report Summit County July, 2022



Monthly Highlights/Observations:

1. Tuberculosis- No new suspected cases of TB were reported in July, and 11 contacts from current and previous cases continue to be investigated. In addition, the CDU continued 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 one case; no DOT cases were opened or closed in July. 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 79 communicable disease cases: 14 cases of Campylobacter, 7 cases of Salmonella, 6 cases of Cryptosporidiosis, 6 cases of E. coli, 6 cases of Hepatitis B Chronic, 5 cases of Legionella, 4 cases of Monkeypox, 4 cases of Varicella, 3 cases of Giardia, 3 cases of Streptococcus pneumoniae, 3 cases of Strep-Group A, 2 cases each of Hepatitis C chronic, Lyme disease, Pertussis and Staph Aureus and 1 case each of Amebiasis, Babesiosis, CP-CRE, Enterobacter hormaechei, Haemophilus influenzae, Listeriosis, Aseptic Meningitis, MIS-C, Vibriosis and Yersiniosis. 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 exceed the counts in the table.

2. Outbreaks: 5 COVID-19 outbreaks were reported to the CDU in July, occurring in long term care, day care and day camp settings. 1 non-COVID-19 outbreak was investigated in July.

COVID-19: There were 3,825 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. Two Epicenter alerts were issued during July for the following communicable disease symptoms: Headache (1) and nausea (1)
- **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, July 2022

Reportable Condition	July 2022	June 2022	Year-to- Date 2022	Year-to- Date 2021
Amebiasis	1	0	6	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	3,825	3,185	33,588	21,151
CP-CRE	1	0	12	10
Campylobacterosis	13	9	56	36
Chlamydia infection	258	215	1,698	1,745
Cholera	0	0	0	0
Coccidioidomycosis	1	0	2	2
Creutzfeld-Jakob Disease	0	0	0	0
Cryptosporidiosis	4	2	14	8
Cyclosporiasis	1	0	1	7
Dengue	0	0	0	0
E. coli, Shiga Toxin-Producing (O157:H7, Not O157,				
Unknown Serotype)	4	5	19	10
Ehrlichiosis/ anaplasmosis	0	0	0	2
Giardiasis	3	2	40	23
Gonococcal infection	126	99	843	1,062
Haemophilus influenzae infection	1	1	5	0
Hantavirus infection	0	0	0	0
Hemolytic uremic syndrome (HUS)	0	0	0	0
Hepatitis A	0	0	2	10
Hepatitis B - acute	0	0	4	8
Hepatitis B - chronic	2	6	57	47
Hepatitis B - perinatal (see Notes on page 3)	1	2	8	11
Hepatitis C- acute	0	0	0	2
Hepatitis C- chronic	32	44	267	289
Hepatitis C - perinatal infection	0	1	3	2
Hepatitis E	0	0	0	0
HIV/AIDS	5	1	25	30
Influenza - ODH Lab Results	2	4	22	0
Influenza-associated hospitalization	0	1	32	0
Influenza-associated pediatric mortality	0	0	0	0
LaCrosse virus disease	0	0	0	2
Legionellosis	5	7	17	16
Listeriosis	0	0	2	2
Lyme Disease	17	13	50	55
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	1	3	5
Meningitis-bacterial (Not N. meningitidis)	0	0	1	4
meningition successful (Not 14. meningition)	0	0	-	

Communicable Disease Reports Received, July 2022 Year-to-June Year-to-**Reportable Condition July 2022** Date 2021 Date 2022 Meningococcal disease-Neiserria meningitidis NR Monkeypox Mumps Other arthropod-borne disease **Pertussis** Powassan virus disease **Psittacosis** Q Fever Rubella Salmonella typhi Salmonellosis **Shigellosis** Spotted fever rickettsiosis, including RMSF Staphylococcal aureus - intermediate resistance to vancomycin (VISA) Streptococcal - Group A invasive Streptococcal - Group B in newborn Streptococcal toxic shock syndrome (STSS) Streptococcus pneumoniae - invasive - unknown resistance Streptococcus pneumoniae - invasive - resistant Syphilis - all stages Toxic Shock Syndrome (TSS) **Trichinellosis Tuberculosis** Tularemia Typhoid fever Varicella Vibriosis (not cholera) West Nile virus infection Yersiniosis Zika virus infection 4.347 3,643 Total 37,079 24.791

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 August 2, 2022.