



Monthly Communicable Disease Report Summit County March, 2024



Communicable Disease Investigations (Minus Tuberculosis)

- 122 communicable disease investigations were completed.
 - Note: After an investigation has been completed, some reported cases are determined to not be a case. Therefore, the number of cases investigated may not equal the number of reportable conditions in the table below.
 - Disease investigations included: 22 Cases of Hepatitis B - Chronic, 15 cases of CPO-Enterobacter, 10 cases of Giardia, 10 cases of Varicella, 7 cases of Lyme Disease, 7 cases of Salmonella, 7 cases of Strep Pneumo, 5 cases of CPO-Acinetobacter, 5 cases of Legionella, 4 cases of CPO-Pseudomonas, 4 cases of Strep - Group A, 3 cases each of C.Auris, C.Auris-Colonization Screening, Staph Aureus- intermediate resistance to vancomycin (VISA) and Yersiniosis, 2 cases each of Amebiasis, Campylobacter, CPO-Colonization Screening- Acinetobacter, E. Coli and Shigellosis and 1 case each of Chikungunya, Coccidiomycosis, Haemophilus Influenzae and Tetanus.

Tuberculosis

- 1 new confirmed case of TB was reported.
- 12 cases being provided Direct Observed Therapy.
- 12 total TB cases currently being followed .
- Contact tracing of these new TB cases yielded 0 new contacts.

Outbreaks

- 4 New Outbreaks were identified.
 - The cause of these outbreaks include: Influenza and Suspect/Confirmed Noro Virus
 - The location type of outbreaks include: Long Term Care Facilities and Primary School
- 25 Ongoing open COVID outbreaks continue to be investigated.

Epicenter

- Epicenter is an electronic surveillance system which provides instant notification of unusual symptomatic activity at local emergency departments.
- 5 Epicenter alerts were issued this month
 - Reasons for these alerts included: Diarrhea (4), Edema (1)

Influenza Surveillance

Surveillance for the 2023-2024 season resumed on October 1, 2023. Reports will be available on a weekly basis. Reports from current and previous influenza seasons are available on the SCPH website:
<https://www.scph.org/flu-surveillance-reports>

Vector-borne Surveillance

Vector borne surveillance concluded for the season on October 21, 2023 and reports for 2023 are available. Copies of the reports for 2023 and previous years may be accessed at: <https://www.scph.org/vector-surveillance-reports>

Situational Awareness:

Contact tracing for an active Tuberculosis case at a large manufacturing facility.

Communicable Disease Reports Received, March 2024

| Reportable Condition | March 2024 | February 2024 | Year-to- Date 2024 | Year-to- Date 2023 |
|--|---------------|------------------|-----------------------|-----------------------|
| Amebiasis | 2 | 3 | 11 | 3 |
| Anaplasmosis- <i>Anaplasma phagocytophilum</i> | 0 | 0 | 0 | 0 |
| Babesiosis | 0 | 0 | 0 | 0 |
| Botulism - infant | 0 | 0 | 0 | 0 |
| Botulism, food borne | 0 | 0 | 0 | 0 |
| Brucellosis | 0 | 0 | 0 | 1 |
| C. auris | 1 | 3 | 6 | 0 |
| C. auris - Colonization Screening | 5 | 1 | 7 | NR |
| COVID-19 | 561 | 1,030 | 3,191 | 5,011 |
| CPO | 11 | 11 | 26 | NR |
| CPO - Colonization Screening | 2 | 0 | 2 | NR |
| Campylobacteriosis | 2 | 6 | 15 | 13 |
| Chikungunya virus | 1 | 0 | 1 | 0 |
| Chlamydia infection | 247 | 204 | 707 | 741 |
| Cholera | 0 | 0 | 0 | 0 |
| Coccidioidomycosis | 1 | 0 | 1 | 3 |
| Creutzfeld-Jakob Disease | 0 | 0 | 0 | 0 |
| Cryptosporidiosis | 0 | 3 | 4 | 5 |
| Cyclosporiasis | 0 | 0 | 0 | 0 |
| Dengue | 0 | 0 | 0 | 0 |
| <i>E. coli</i> , Shiga Toxin-Producing (O157:H7, Not O157, Unknown Serotype) | 2 | 0 | 9 | 3 |
| Ehrlichiosis- <i>Ehrlichia chaffeensis</i> | 0 | 0 | 0 | 0 |
| Giardiasis | 10 | 8 | 27 | 16 |
| Gonococcal infection | 85 | 82 | 271 | 305 |
| <i>Haemophilus influenzae</i> infection | 0 | 1 | 7 | 4 |
| Hantavirus infection | 0 | 0 | 0 | 0 |
| Hemolytic uremic syndrome (HUS) | 0 | 0 | 0 | 0 |
| Hepatitis A | 0 | 0 | 1 | 2 |
| Hepatitis B - acute | 0 | 1 | 3 | 1 |
| Hepatitis B - chronic | 5 | 11 | 20 | 28 |
| Hepatitis B - perinatal (see Notes on page 3) | 1 | 0 | 1 | 1 |
| Hepatitis C- acute | 0 | 1 | 2 | 0 |
| Hepatitis C- chronic | 33 | 33 | 93 | 106 |
| Hepatitis C - perinatal infection | 0 | 0 | 2 | 1 |
| Hepatitis E | 0 | 0 | 0 | 0 |
| HIV/AIDS | 10 | 4 | 18 | 8 |
| Influenza - ODH Lab Results | 4 | 5 | 20 | 6 |
| Influenza-associated hospitalization | 70 | 107 | 282 | 41 |
| Influenza-associated pediatric mortality | 0 | 0 | 0 | 0 |
| LaCrosse virus disease | 0 | 0 | 0 | 0 |
| Legionellosis | 5 | 3 | 11 | 3 |
| Listeriosis | 0 | 0 | 0 | 0 |
| Lyme Disease | 8 | 2 | 12 | 12 |

Communicable Disease Reports Received, March 2024

| Reportable Condition | March 2024 | February 2024 | Year-to- Date 2024 | Year-to- Date 2023 |
|---|---------------|------------------|-----------------------|-----------------------|
| MIS-C associated with COVID-19 | 0 | 0 | 0 | 0 |
| Malaria | 0 | 1 | 1 | 1 |
| MERS | 0 | 0 | 0 | 0 |
| Measles | 0 | 0 | 0 | 0 |
| Meningitis - aseptic/viral | 0 | 0 | 0 | 1 |
| Meningitis-bacterial (Not N. meningitidis) | 0 | 0 | 0 | 2 |
| Meningococcal disease- <i>Neisseria meningitidis</i> | 0 | 0 | 0 | 0 |
| Mpox (confirmed and probable) | 0 | 0 | 0 | 0 |
| Mumps | 0 | 0 | 0 | 0 |
| Pertussis | 0 | 0 | 1 | 2 |
| Powassan virus disease | 0 | 0 | 0 | 0 |
| Psittacosis | 0 | 0 | 0 | 0 |
| Q Fever | 0 | 0 | 1 | 0 |
| Rubella | 0 | 0 | 0 | 0 |
| Salmonella Paratyphi infection | 0 | 0 | 0 | 0 |
| Salmonella typhi | 0 | 0 | 0 | NR |
| Salmonellosis | 7 | 7 | 22 | 9 |
| Shigellosis | 1 | 1 | 4 | 1 |
| Spotted fever rickettsiosis, including RMSF | 0 | 0 | 0 | 0 |
| <i>Staphylococcal aureus</i> - intermediate resistance to vancomycin (VISA) | 0 | 1 | 1 | 0 |
| Streptococcal - Group A invasive | 4 | 7 | 12 | 12 |
| Streptococcal - Group B in newborn | 0 | 0 | 0 | 1 |
| Streptococcal toxic shock syndrome (STSS) | 0 | 0 | 0 | 0 |
| <i>Streptococcus pneumoniae</i> - invasive - unknown resistance | 4 | 3 | 10 | 8 |
| <i>Streptococcus pneumoniae</i> - invasive - resistant | 3 | 5 | 10 | 3 |
| Syphilis - all stages | 28 | 21 | 82 | 92 |
| Syphilis - Congenital | 0 | 1 | 1 | 2 |
| Tetanus | 0 | 0 | 0 | NR |
| Toxic Shock Syndrome (TSS) | 0 | 0 | 0 | 0 |
| Trichinellosis | 0 | 0 | 0 | 0 |
| Tuberculosis | 0 | 1 | 1 | 2 |
| Tularemia | 0 | 0 | 0 | 0 |
| Typhoid fever | 0 | 0 | 0 | 0 |
| Varicella | 4 | 2 | 7 | 1 |
| Vibriosis (not cholera) | 0 | 0 | 0 | 1 |
| West Nile virus infection | 0 | 0 | 0 | 0 |
| Yersiniosis | 3 | 0 | 3 | 3 |
| Zika virus infection | 0 | 0 | 0 | 0 |
| Total | 1,118 | 1,566 | 4,895 | 6,475 |

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 until serology indicates that the child has immunity. "

****A significant number of ER visits are expected to be unaccounted for due to limited reporting partner participation. As a result, epicenter figures should not be compared to previous year's reports.****

For questions or comments about this report, please contact the Communicable Disease Unit at (330) 375-2662. This report was issued on April 3, 2024.