

Monthly Communicable Disease Report Summit County October, 2024



Communicable Disease Investigations (Minus Tuberculosis)

- 126 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: 21 cases of Lyme, 20 cases of Hepatitis B Chronic, 13 cases of Salmonella, 12 cases of Giardiasis, 11 cases of Campylobacter, 5 cases of Legionella, 5 cases of E. Coli, 4 cases of Varicella, 4 cases of Strep Pneumo, 3 cases each of: Pertussis, Cryptosporidiosis, CPO-Enterobacter, CPO-Acinetobacter, C. Auris Colonization and C. Auris. 2 cases of Meningitis-Aseptic and 2 cases of Anaplasmosis and 1 case each of the following: Meningitis-Bacterial, Hepatitis C Chronic, Hepatitis C Acute, Hepatitis B Acute, CPO-Colonization Acinetobacter, Brucellosis and Amebiasis.

<u>Tuberculosis</u>

- 0 new confirmed cases of TB reported.
- 5 cases are being provided Direct Observed Therapy.
- 5 total TB cases currently being followed.
- Contact tracing of these new TB cases yielded 0 new contacts.

Outbreaks

- 9 New Outbreaks were identified.
 - The cause of these outbreaks include: Mycoplasma Pneumonia and Scabies.
 - The location type of outbreaks include: Schools and Long Term Care
- 17 open COVID outbreaks continue to be investigated (1 new outbreak reported in October).

<u>Epicenter</u>

- Epicenter is an electronic surveillance system which provides instant notification of unusual symptomatic activity at local emergency departments.
- 56 Epicenter alerts were issued this month
 - Reasons for these alerts included: Fever (11), Cough (10), Respiratory (8), Gastrointestinal (7), Ear, Nose, Throat (4), Rash (4), Constitutional (3), Eyes (3), Exacerbation (2), Vomiting (2), Diarrhea (1), and Hemorrhaging (1).

Influenza Surveillance

Surveillance for the 2024-2025 flu season has begun and the first report will be issued by the end of October. Reports from previous influenza seasons are available on the SCPH website: https://www.scph.org/flu-surveillance-reports

Vector-borne Surveillance

Vector borne surveillance resumed for the season on May 19, 2024 the final report will be issued by the end of October. Copies of the reports for 2024 and previous years may be accessed at: https://www.scph.org/vector-surveillance-reports

| Communicable Disease Reports Received, October 2024 | | | | | | |
|---|-----------------|-------------------|-----------------------|-----------------------|--|--|
| Reportable Condition | October 2024 | September 2024 | Year-to- Date 2024 | Year-to- Date 2023 | | |
| Amebiasis | 1 | 2 | 21 | 12 | | |
| Anaplasmosis- <i>Anaplasma phagocytophilum</i> | 1 | 1 | 3 | 1 | | |
| Babesiosis | 0 | 0 | 2 | 2 | | |
| Botulism - infant | 0 | 0 | 1 | 0 | | |
| Botulism, food borne | 0 | 0 | 0 | 0 | | |
| Brucellosis | 1 | 0 | 1 | 2 | | |
| C. auris | 3 | 3 | 21 | 3 | | |
| C. auris - Colonization Screening | 8 | 7 | 51 | 20 | | |
| Campylobacterosis | 10 | 10 | 84 | 85 | | |
| Chikungunya virus | 0 | 0 | 1 | 0 | | |
| Chlamydia infection | 231 | 208 | 2,257 | 2,394 | | |
| Cholera | 0 | 0 | 0 | 0 | | |
| Coccidioidomycosis | 0 | 0 | 3 | 4 | | |
| COVID-19 | 568 | 1,349 | 7,791 | 9,906 | | |
| СРО | 3 | 7 | 82 | 98 | | |
| CPO - Colonization Screening | 2 | 3 | 14 | 34 | | |
| Creutzfeld-Jakob Disease | 0 | 0 | 0 | 1 | | |
| Cryptosporidiosis | 3 | 1 | 20 | 16 | | |
| Cyclosporiasis | 0 | 0 | 2 | 3 | | |
| Dengue | 0 | 0 | 0 | 1 | | |
| Diphtheria | 0 | 0 | 1 | 0 | | |
| E. coli , Shiga Toxin-Producing (O157:H7, Not O157, Unknown | | | | | | |
| Serotype) | 5 | 3 | 30 | 13 | | |
| Ehrlichiosis- Ehrlichia chaffeensis | 0 | 1 | 1 | 2 | | |
| Giardiasis | 12 | 13 | 103 | 90 | | |
| Gonococcal infection | 97 | 93 | 907 | 880 | | |
| Haemophilus influenzae infection | 0 | 3 | 13 | 8 | | |
| Hantavirus infection | 0 | 0 | 0 | 0 | | |
| Hemolytic uremic syndrome (HUS) | 0 | 0 | 0 | 0 | | |
| Hepatitis A | 0 | 0 | 2 | 7 | | |
| Hepatitis B - acute | 1 | 0 | 4 | 6 | | |
| Hepatitis B - chronic | 9 | 8 | 71 | 98 | | |
| Hepatitis B - perinatal (see Notes on page 3) | 0 | 0 | 2 | 6 | | |
| Hepatitis C - perinatal infection | 0 | 0 | 5 | 0 | | |
| Hepatitis C- acute | 0 | 0 | 4 | | | |
| Hepatitis C- chronic | 22 | 32 | 226 | 258 | | |
| Hepatitis E | 0 | 0 | 0 | 1 | | |
| HIV/AIDS | 5 | 6 | 52 | 30 | | |
| Influenza - ODH Lab Results | 1 | 2 | 43 | 24 | | |
| Influenza-associated hospitalization | 1 | 1 | 315 | 49 | | |
| Influenza-associated pediatric mortality | 0 | 0 | 0 | 0 | | |
| LaCrosse virus disease | 0 | 0 | 0 | 0 | | |
| Legionellosis | 7 | 4 | 57 | 30 | | |
| Listeriosis | 0 | 0 | 1 | 1 | | |
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|---|-----------------|-------------------|-----------------------|-----------------------|--|--|
| Reportable Condition | October 2024 | September 2024 | Year-to- Date 2024 | Year-to- Date 2023 | | |
| Lyme Disease | 15 | 18 | 141 | 167 | | |
| MIS-C associated with COVID-19 | 0 | 0 | 0 | 0 | | |
| Malaria | 0 | 0 | 2 | 6 | | |
| MERS | 0 | 0 | 0 | 0 | | |
| Measles | 0 | 0 | 0 | 1 | | |
| Meningitis - aseptic/viral | 2 | 0 | 5 | 6 | | |
| Meningitis-bacterial (Not N. meningitidis) | 1 | 1 | 2 | 2 | | |
| Meningococcal disease-Neiserria meningitidis | 0 | 0 | 1 | 0 | | |
| Mpox (confirmed and probable) | 0 | 0 | 6 | 0 | | |
| Mumps | 0 | 0 | 0 | 0 | | |
| Pertussis | 2 | 2 | 15 | 8 | | |
| Powassan virus disease | 0 | 0 | 0 | 0 | | |
| Psittacosis | 0 | 0 | 0 | 0 | | |
| Q Fever | 0 | 2 | 3 | 0 | | |
| Rubella | 0 | 0 | 0 | 0 | | |
| Salmonella Paratyphi infection | 0 | 0 | 0 | 0 | | |
| Salmonella typhi | 0 | 0 | 0 | 0 | | |
| Salmonellosis | 12 | 10 | 83 | 61 | | |
| Shigellosis | 2 | 1 | 15 | 9 | | |
| Spotted fever rickettsiosis, including RMSF | 0 | 0 | 0 | 2 | | |
| Staphylococcal aureus - intermediate resistance to vancomycin | | | | | | |
| (VISA) | 0 | 0 | 1 | 0 | | |
| Streptococcal - Group A invasive | 0 | 1 | 18 | 46 | | |
| Streptococcal - Group B in newborn | 0 | 0 | 1 | 2 | | |
| Streptococcal toxic shock syndrome (STSS) | 0 | 0 | 0 | 0 | | |
| Streptococcus pneumoniae - invasive - unknown resistance | 2 | 3 | 27 | 25 | | |
| Streptococcus pneumoniae - invasive - resistant | 2 | 0 | 14 | 10 | | |
| Syphilis - all stages | 25 | 26 | 260 | 261 | | |
| Syphilis - Congenital | 3 | 2 | 6 | 3 | | |
| Tetanus | 0 | 0 | 0 | 1 | | |
| Toxic Shock Syndrome (TSS) | 0 | 0 | 0 | 0 | | |
| Trichinellosis | 0 | 0 | 0 | 0 | | |
| Tuberculosis | 0 | 1 | 4 | 12 | | |
| Tularemia | 0 | 0 | 0 | 0 | | |
| Typhoid fever | 0 | 0 | 0 | 0 | | |
| Varicella | 2 | 1 | 16 | 4 | | |
| Vibriosis (not cholera) | 0 | 0 | 6 | 6 | | |
| West Nile virus infection | 0 | 0 | 1 | 1 | | |
| Yersiniosis | 0 | 1 | 9 | 5 | | |
| Zika virus infection | 0 | 0 | 0 | 0 | | |
| Total | 1,059 | 1,826 | 12,827 | 14,723 | | |

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."
- **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 November 5, 2024.