



Monthly Communicable Disease Report Summit County September, 2024



Communicable Disease Investigations (Minus Tuberculosis)

- 158 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: 25 cases of Lyme, 19 cases of Hepatitis B - Chronic, 14 cases of C. Auris Colonization Screening, 14 cases of Giardiasis, 10 cases of Salmonella, 9 cases of Campylobacter, 8 cases of CPO-Enterobacter, 7 cases of Legionella, 6 cases of CPO-Acinetobacter, 5 cases of CPO-Pseudomonas, 3 cases each of: C. Auris, CPO-Acinetobacter Colonization Screening, Haemophilus Influenzae, Hepatitis C- Acute, Strep Pneumo and Varicella. 2 cases each of Amebiasis, Cryptosporidiosis, Mpox, Q Fever, Shigellosis and Strep Group A and 1 case each of Babesiosis, Ehrlichiosis-Ehrlichia chaffeensis, Hepatitis A, Meningitis- Bacterial, Pertussis and Yersiniosis.

Tuberculosis

- 1 new confirmed case of TB was 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

- 2 New Outbreaks were identified.
 - The cause of these outbreaks include: Mycoplasma Pneumonia and Hand, Foot, Mouth Disease.
 - The location type of outbreaks include: School Sports Team and Daycare.
- 23 open COVID outbreaks continue to be investigated (8 new outbreaks were reported in September).

Epicenter

- Epicenter is an electronic surveillance system which provides instant notification of unusual symptomatic activity at local emergency departments.
- 19 Epicenter alerts were issued this month
 - Reasons for these alerts included: Cough (11), Eyes (3), Fever (2), Paralysis (2), and Vomiting (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, September 2024

Reportable Condition	September 2024	August 2024	Year-to- Date 2024	Year-to- Date 2023
Amebiasis	2	2	20	9
Anaplasmosis- <i>Anaplasma phagocytophilum</i>	1	1	2	1
Babesiosis	0	1	2	2
Botulism - infant	0	1	1	0
Botulism, food borne	0	0	0	0
Brucellosis	0	0	0	2
C. auris	3	2	18	3
C. auris - Colonization Screening	7	10	42	19
Campylobacterosis	10	4	74	69
Chikungunya virus	0	0	1	0
Chlamydia infection	208	264	2,024	2,163
Cholera	0	0	0	0
Coccidioidomycosis	0	1	3	4
COVID-19	1,350	1,253	7,225	8,897
CPO	9	6	84	83
CPO - Colonization Screening	3	2	12	30
Creutzfeld-Jakob Disease	0	0	0	1
Cryptosporidiosis	1	4	17	14
Cyclosporiasis	0	2	2	3
Dengue	0	0	0	1
Diphtheria	0	0	0	0
<i>E. coli</i> , Shiga Toxin-Producing (O157:H7, Not O157, Unknown Serotype)	3	2	25	12
Ehrlichiosis- <i>Ehrlichia chaffeensis</i>	1	0	1	2
Giardiasis	13	5	91	62
Gonococcal infection	92	89	809	710
<i>Haemophilus influenzae</i> infection	3	0	13	8
Hantavirus infection	0	0	0	0
Hemolytic uremic syndrome (HUS)	0	0	0	0
Hepatitis A	0	1	2	6
Hepatitis B - acute	0	0	3	4
Hepatitis B - chronic	8	6	62	84
Hepatitis B - perinatal (see Notes on page 3)	0	0	2	6
Hepatitis C - perinatal infection	0	2	5	2
Hepatitis C- acute	0	0	3	0
Hepatitis C- chronic	32	18	203	236
Hepatitis E	0	0	0	1
HIV/AIDS	6	5	47	24
Influenza - ODH Lab Results	2	5	42	18
Influenza-associated hospitalization	1	0	314	49
Influenza-associated pediatric mortality	0	0	0	0
LaCrosse virus disease	0	0	0	0
Legionellosis	7	7	53	26
Listeriosis	0	0	1	1

Communicable Disease Reports Received, September 2024

Reportable Condition	September 2024	August 2024	Year-to- Date 2024	Year-to- Date 2023
Lyme Disease	18	12	126	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	0	1	3	4
Meningitis-bacterial (Not N. meningitidis)	1	0	1	2
Meningococcal disease- <i>Neisseria meningitidis</i>	0	0	1	0
Mpox (confirmed and probable)	0	0	6	0
Mumps	0	0	0	0
Pertussis	2	2	13	8
Powassan virus disease	2	0	3	0
Psittacosis	0	0	0	0
Q Fever	2	0	3	0
Rubella	0	0	0	0
Salmonella Paratyphi infection	0	0	0	0
Salmonella typhi	0	0	0	0
Salmonellosis	10	11	71	57
Shigellosis	1	2	13	9
Spotted fever rickettsiosis, including RMSF	0	0	0	1
<i>Staphylococcal aureus</i> - intermediate resistance to vancomycin (VISA)	0	0	1	0
Streptococcal - Group A invasive	1	0	18	42
Streptococcal - Group B in newborn	0	1	1	2
Streptococcal toxic shock syndrome (STSS)	0	0	0	0
<i>Streptococcus pneumoniae</i> - invasive - unknown resistance	3	0	25	21
<i>Streptococcus pneumoniae</i> - invasive - resistant	0	0	12	8
Syphilis - all stages	26	24	235	238
Syphilis - Congenital	2	0	3	3
Tetanus	0	0	0	1
Toxic Shock Syndrome (TSS)	0	0	0	0
Trichinellosis	0	0	0	0
Tuberculosis	1	0	4	8
Tularemia	0	0	0	0
Typhoid fever	0	0	0	0
Varicella	1	2	14	3
Vibriosis (not cholera)	0	1	6	5
West Nile virus infection	0	0	0	1
Yersiniosis	1	0	9	4
Zika virus infection	0	0	0	0
Total	1,833	1,749	11,773	13,143

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 October 4, 2024.