

**Madison County Communicable Disease Activity: Week 16, ending 4/21/18**

\*Information denoted with an asterisk is subjective and provided on a voluntary basis.

**COMMUNICABLE DISEASES: Madison County**

**Communicable Diseases**

**Reported: 1 campylobacter**, 8 chlamydia, 1 new chronic Hepatitis C, 1 Lyme disease, and 2 pertussis

**Primary Care Providers**

**Reported\*:** Rash, respiratory illness, gastrointestinal illness (GI), upper respiratory illness (URI), strep throat, allergies, and pink eye (Fig. 1).

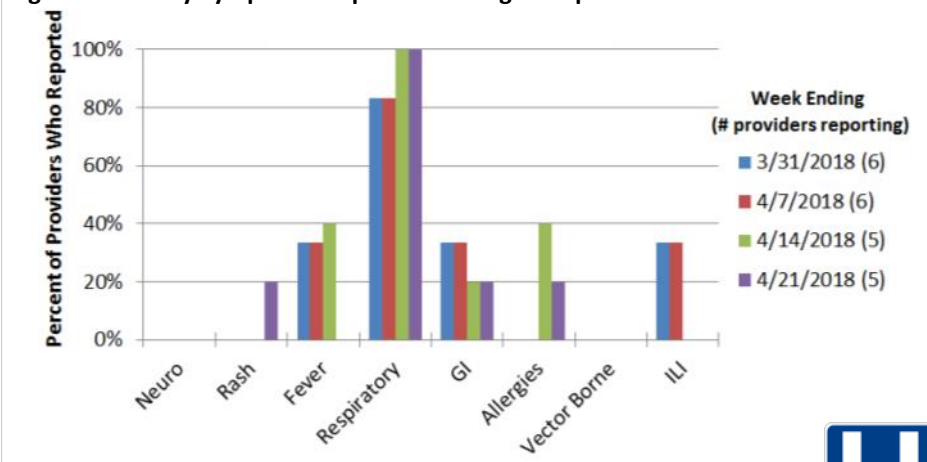
**College Health Centers**

**Reported\*:** Respiratory illness, GI, allergies, sore throats, strep throat, and mononucleosis (mono)

**Syndromic Surveillance in Emergency Department—4/12/18 to 4/21/18:** No clusters of illnesses reported

**Medicaid Over-the-Counter (OTC) & Script Medication Alerts—3/30/18 to 4/8/18:** Mild/Moderate sensitivity for Antihistamines, Herpes Agents, Macrolide Antibiotics, Systemic and Topical Nasal Products

**Figure 1: Weekly Symptoms Reported Among a Proportion of Healthcare Providers**



**Hospitals**

**Reported:** Rash, fever, respiratory illness, gastrointestinal illness (GI), upper respiratory illness (URI), flu, influenza-like illness (ILI), and neurologic illness\*\*

\*\*Neurologic can include non-specific diagnosis of neurological infection (e.g. Meningitis, Encephalitis, etc.) or non-specific conditions (e.g. headache, numbness, dizziness, blurry/double vision, speech difficulty, confusion, disorientation, or anxiety)



**Issue Highlight: STD Awareness Month**

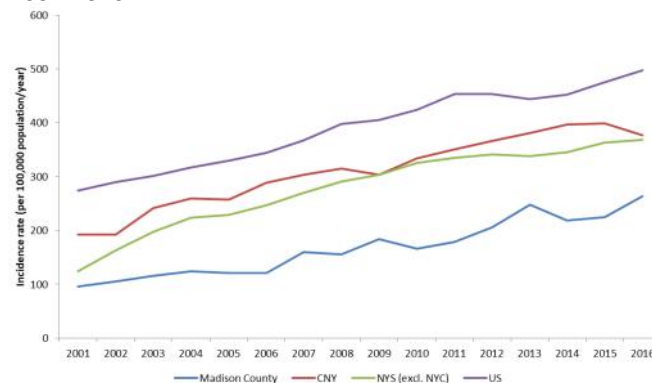
April is STD Awareness Month, and the Madison County Health Department is focused on **Chlamydia**.

- **Chlamydia is the most reported communicable disease in Madison County**
- Between 2001 and 2016 Madison County has seen a 180% increase in Chlamydia rates (Fig 2)
- Patient treatment and all sexual partners in the last six months is the most effective way to prevent transmission.

For more Information on Chlamydia and STD awareness month visit the CDC's website:

<https://www.cdc.gov/std/sam/index.htm>

**Figure 2: Chlamydia incidence rate (per 100,000/year), 2001-2016**



Annual reported Chlamydia rates in the US, New York State, Central New York region, and Madison County, 2001 – 2016. CNY counties: Cayuga, Cortland, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, St. Lawrence, Tompkins Source: NYSDOH. Health Commerce System. Communicable Disease Electronic Surveillance System (CESS); CDC. Sexually Transmitted Diseases Surveillance.

# Madison County Disease Surveillance & Risk Report

## Madison County Flu Activity: Week 16, ending 4/21/18: **Regional**

No Report

No Activity

Sporadic

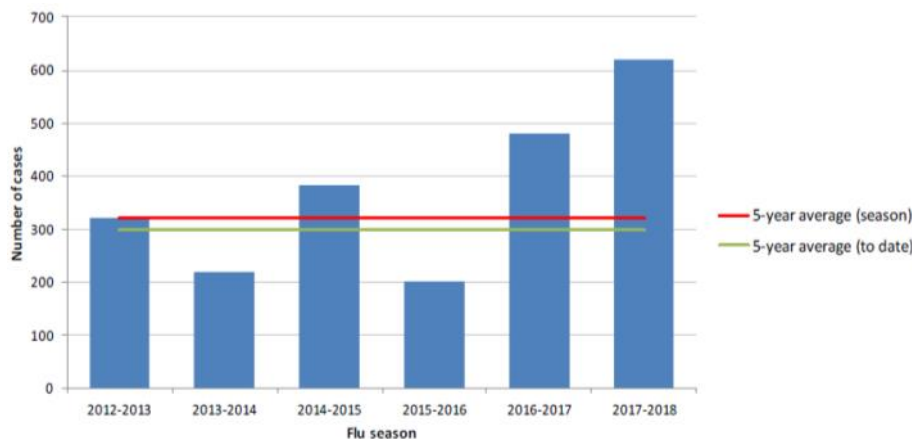
Local

**Regional**

Widespread

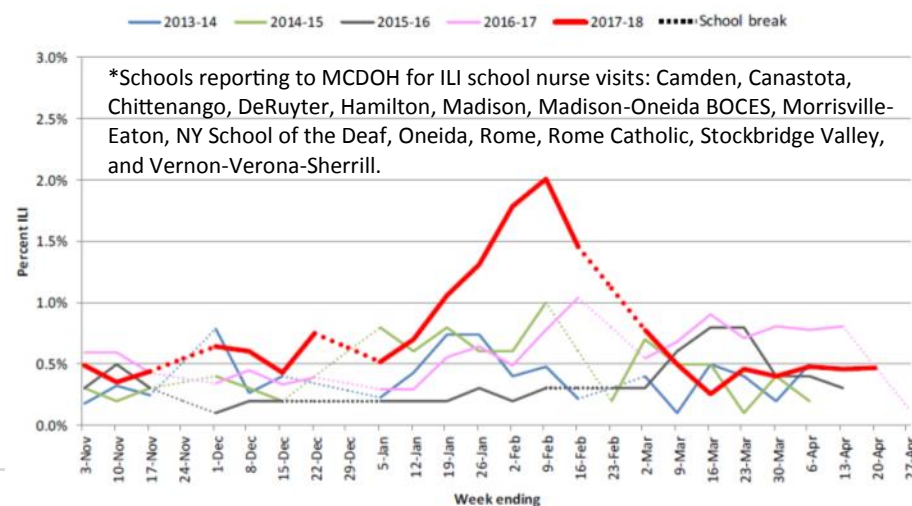
**Weekly Lab-confirmed flu:** 15 cases (15 flu Type A and 3 flu Type B) were reported; this is a 44% decrease from the previous week.

**Figure 3: Positive Influenza Laboratory Results Reported Weekly to Madison County, by Season**



**Schools Districts\*:** 0.5% of children seen by school nurses had symptoms of influenza-like illness; this is a *no change* from the previous week (0.5%) (Fig. 4).

**Figure 4: Proportion of ILI-related School Nurse Visits by Season\***



**College Health Centers\*:** Flu was reported

**Primary Care Providers\*:** Flu was reported

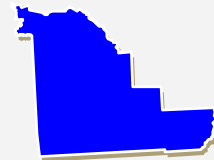
**Flu-Associated Pediatric Deaths:** No reports this season to date.

### Influenza-like or flu-like illness (ILI) includes:

- 1) a fever greater than 100°F measured with a thermometer AND
- (2) a cough AND/OR sore throat in the absence of a known cause other than influenza.

### Total Lab Confirmed Flu Reported to Date:

619 (397 Flu Type A-64% & 222 Type B-36%), this is 18% higher than average (298), to date.



**Incidence Rate** (the number of new flu cases): 20.4 per 100,000 population



### Hospitals:

ILI and flu was reported

### Flu-Related

**Hospitalizations:** Five hospitalized patients with lab-confirmed flu was reported in Madison County

FLU: Madison County

# Madison County Disease Surveillance & Risk Report

## New York State Flu Activity: Week 15, ending 4/14/18: **Widespread (decreasing)**

No Report

No Activity

Sporadic

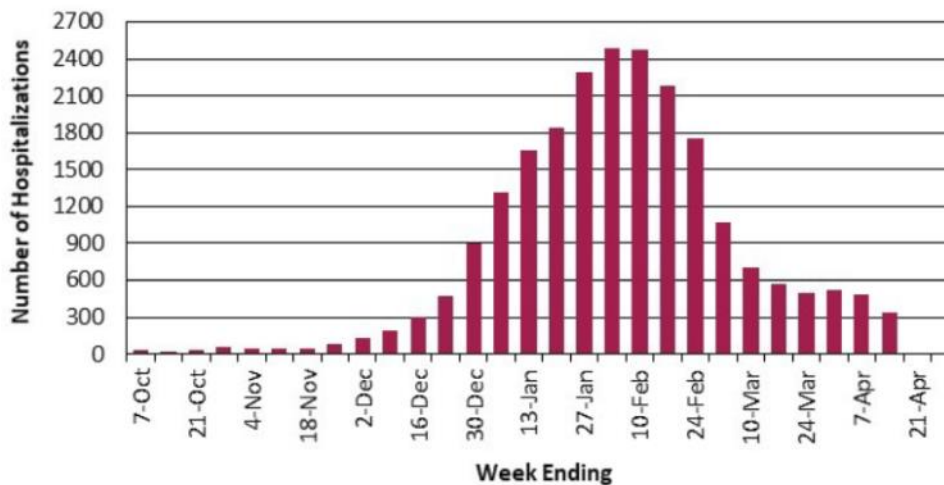
Local

Regional

**Widespread**

**Weekly Lab-Confirmed Flu:** 1,801 reports, a 21% decrease over last week (Figure 6). Flu was reported in 60 counties.

Figure 5: Patients Hospitalized with Lab-Confirmed Flu Reported to NYSDOH—By Week, 2017-18 (N=22,513)



**Flu-Related Hospitalizations:** 335 reports, a 30% decrease over last week (figure 5).

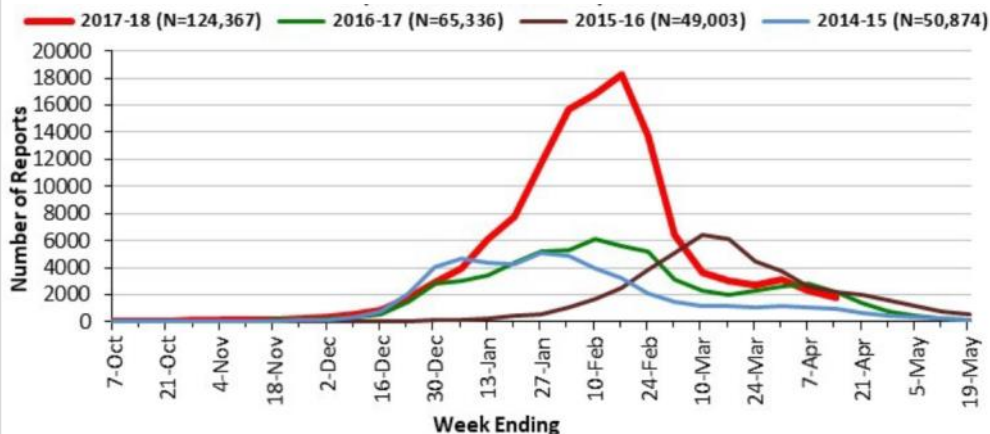
**ILInet Healthcare Providers:** 2.47% of weekly patient complaints were flu-like illness (ILI); this a decrease from the previous week and is below the regional baseline of 3.10%. (ILInet providers report the total number of patients seen and the total number of those with complaints of influenza-like illness (ILI) weekly in an outpatient setting.)

**Flu-Associated Pediatric Deaths:** One report this week. Six deaths were reported this season to-date.

Incidence (the # of new cases) of lab-confirmed flu is calculated based on lab-confirmed influenza cases per 100,000 population.

**Incidence ranged from: 0-52.66 cases per 100,000 population.**

Figure 6: Positive Flu Lab Results Reported to NYS, by Season



# Madison County Disease Surveillance & Risk Report

## National Flu Activity: Week 15, ending 4/14/18: *Local (decreasing)*

No Report

No Activity

Sporadic

Local

Regional

Widespread

Flu activity **decreased** in the U.S.

### Geographic Flu Activity Summary (Figure 7):

(Geographic spread of influenza viruses, not a measure of severity.)

- **Widespread** influenza activity was reported by five states
- **Regional** influenza activity was reported by Guam, Puerto Rico and 16 states
- **Local** influenza activity was reported by 21 states
- **Sporadic** influenza activity was reported by the District of Columbia and six states
- No influenza activity was reported by the U.S. Virgin Islands and two states

### Flu Activity from ILINet Data (Figure 8):

One state experienced high ILI activity; Two states experienced moderate ILI activity; Six states experienced low ILI activity; and New York City, the District of Columbia, Puerto Rico, and 41 states experienced minimal ILI activity  
(This data is based on the percent of outpatient visits in a state due to ILI compared to the average percent of ILI visits during weeks with little or no influenza virus circulation.)

### U.S. ILINet Healthcare Providers:

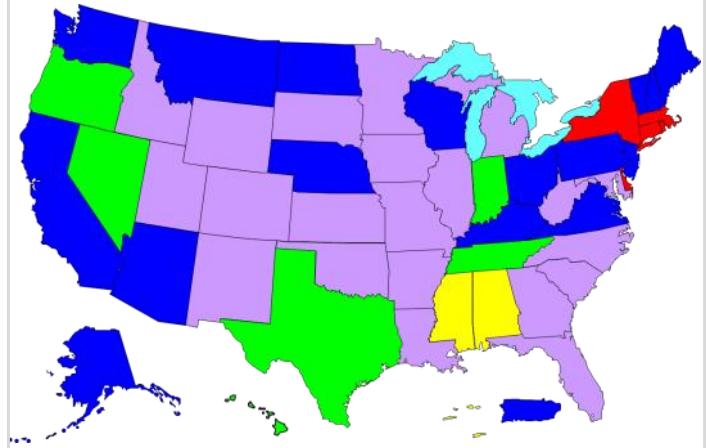
Outpatient illness visits reported through the Network was 1.8%, this percentage is *below* the national baseline of 2.2% and a decrease from the previous week. One of 10 regions in the U.S. reported flu-like illness *at or above* their region-specific baselines.

### Flu and Pneumonia-Associated Deaths:

7.1% of all deaths reported through the National Center for Health Statistics mortality surveillance data, occurring during week 13 ending 3/31, were attributed to pneumonia and flu; this is *below* the week 13 epidemic threshold of 7.2%.

**Flu-Associated Pediatric Deaths:** Five pediatric deaths were reported. 156 flu-associated pediatric deaths have been reported this season to date.

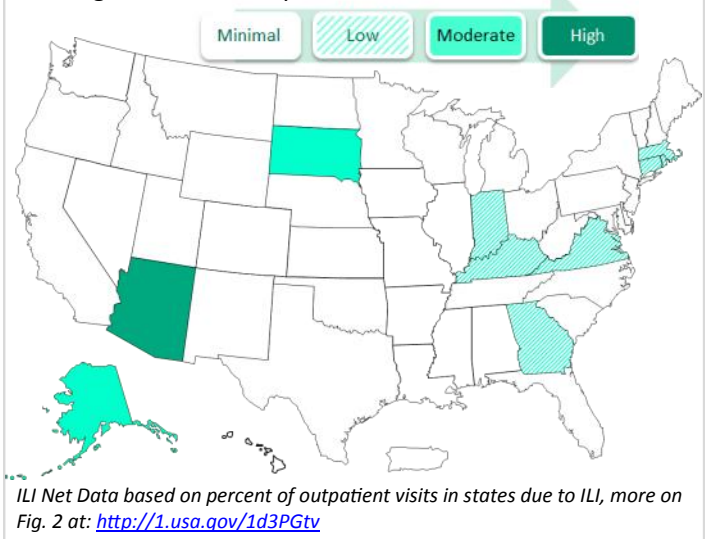
**Figure 7: Geographic Spread of Influenza as Assessed by State and Territorial Epidemiologists**  
(This figure does not measure the severity of influenza activity.)



**Overall Flu-Related Hospitalization Rate:**  
103.7 per 100,000 population.



**Figure 8: ILI Activity from ILINet Data**



ILI Net Data based on percent of outpatient visits in states due to ILI, more on Fig. 2 at: <http://1.usa.gov/1d3PGTv>

Sources: *FluView: Weekly U.S. Influenza and Surveillance Report*. Centers for Disease Control and Prevention. <http://1.usa.gov/1eDDFh>

FLU: United States