

Madison County Communicable Disease Activity: Week 44, ending 11/3/18

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

COMMUNICABLE DISEASES: Madison County

Communicable Diseases Reported:

4 Chlamydia, 1 Gonorrhea, and 1 chronic Hepatitis C

Primary Care Providers Reported*:

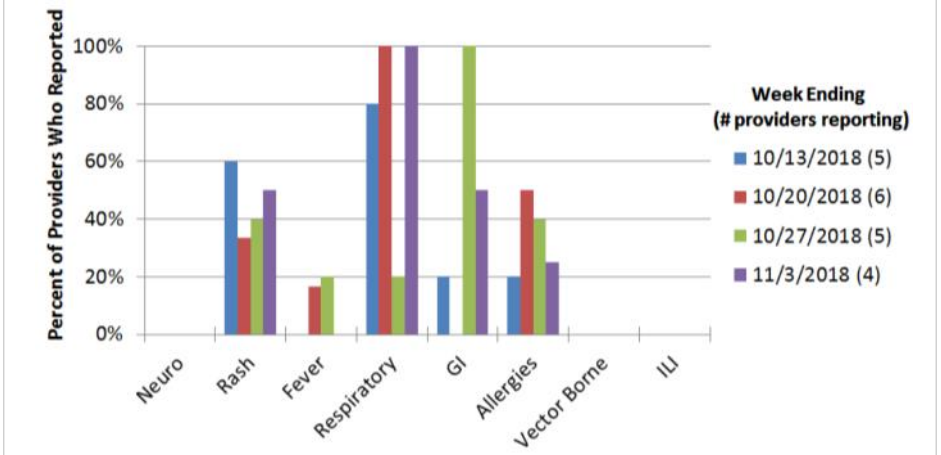
Rash, respiratory illness, gastrointestinal illness (GI), upper respiratory illness (URI), allergies, sore throats, bronchitis, sinus infections, and coxsackie virus (Fig. 1).

Colleges Reported*: Respiratory illness, strep throat, sore throats, upper respiratory illness, and mono

Syndromic Surveillance in Emergency Department—10/26/18-11/13/18: No clusters of illness reported

Medicaid Over-the-Counter (OTC) & Script Medication Alerts—10/12/18 to 10/21/18: No alerts reported

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

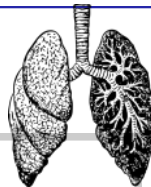


Hospitals Reported:

Neurologic illness¹, rashes, fever, respiratory illness, gastrointestinal illness, and influenza-like illness

¹Neurologic illness 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: LUNG CANCER



November is lung cancer awareness month:

- Cancer is the leading cause of premature death, with lung cancer being the leading cause of cancer-related death
- Lung cancer rates in Madison County (Figure 2):
 - Are significantly higher than New York State
 - Show an increasing trend among women
- Smoking is linked to about 80%-90% of all lung cancers
 - 21.1% of Madison County adults smoke cigarettes
- Radon exposure causes over 20,000 cases each year in the US

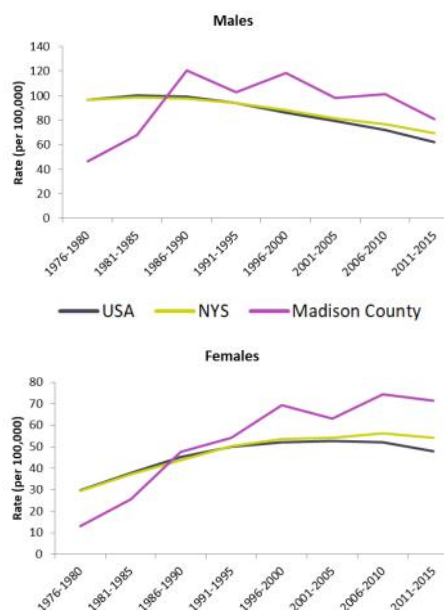


Figure 2. Lung cancer incidence rate among men and women in Madison County, New York State, and the United States, 1976-2015

Learn more — Check out the Madison County Lung Cancer Issue Profile:

<https://www.madisoncounty.ny.gov/DocumentCenter/View/7092/Madison-County-Lung-Cancer-Profile-2018-PDF>

Madison County Disease Surveillance & Risk Report

Madison County Flu Activity: Week 44, ending 11/3/18: No Activity

No Report

No Activity

Sporadic

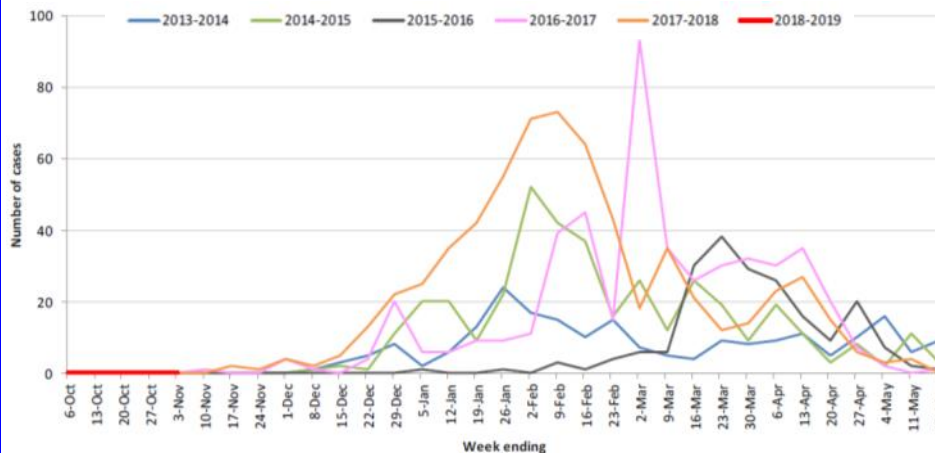
Local

Regional

Widespread

Weekly Lab-confirmed flu: No flu cases were reported; no change from the previous week.

Figure 3: Positive Influenza Laboratory Results Reported to MCDOH, by Season



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:

None to date

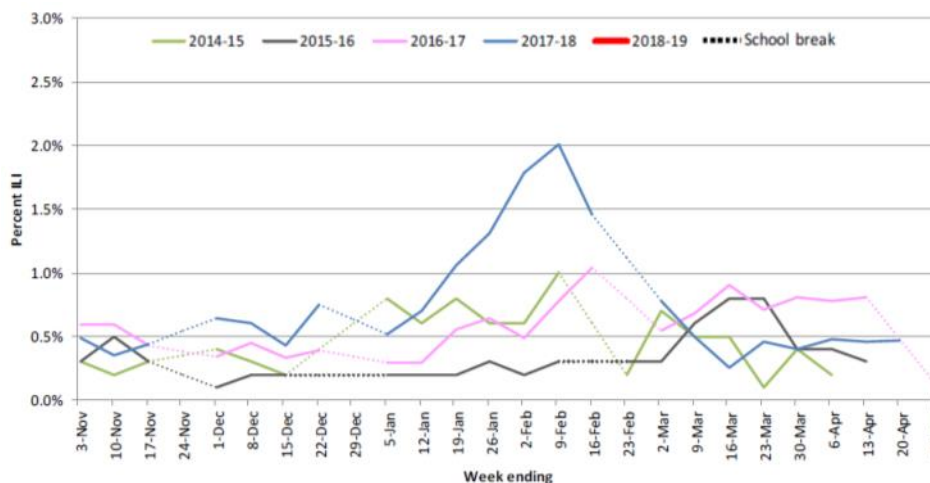
Incidence Rate (the

number of new flu cases): 0.0 per 100,000 population



Schools Districts*: 0.3% of children seen by school nurses had symptoms of influenza-like illness; this is the first reporting week for the season (Fig. 4).

Figure 4: Proportion of ILI-Related School Nurse Visits by Season, Reporting Schools



College Health Centers*: No ILI or flu was reported

Primary Care Providers*: No ILI or flu was reported

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

(Flu-associated deaths only in children younger than 18 years old are nationally notifiable.)

Hospitals:

ILI was reported; no flu reports



Flu-Related

Hospitalizations: No hospitalized patients with lab-confirmed flu were reported in Madison County; this is *no change* from the previous week (0). No hospitalizations have been reported this season to date.

FLU: Madison County

Madison County Disease Surveillance & Risk Report

New York State Flu Activity: Week 43, ending 10/27/18: **Sporadic**

No Report

No Activity

Sporadic

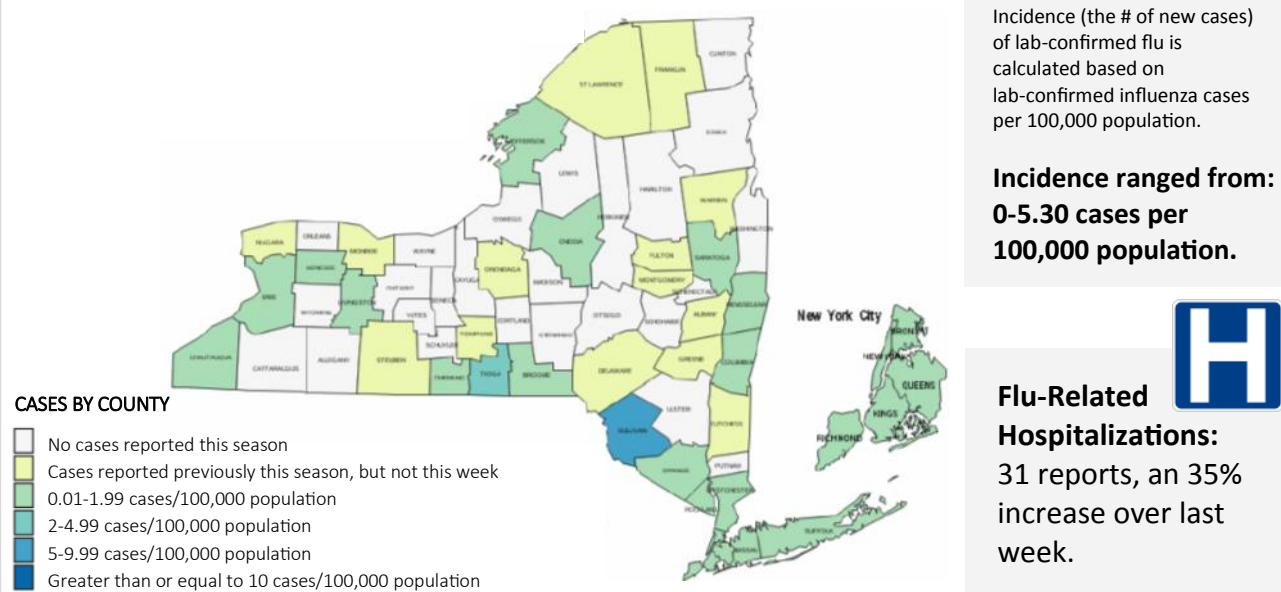
Local

Regional

Widespread

Weekly Lab-Confirmed Flu: 105 reports, a 35% *increase* over last week (Figure 5). Flu was reported in 23 counties.

Figure 5: Lab-Confirmed Flu Reported by County to NYS, for the week ending October 27, 2018.

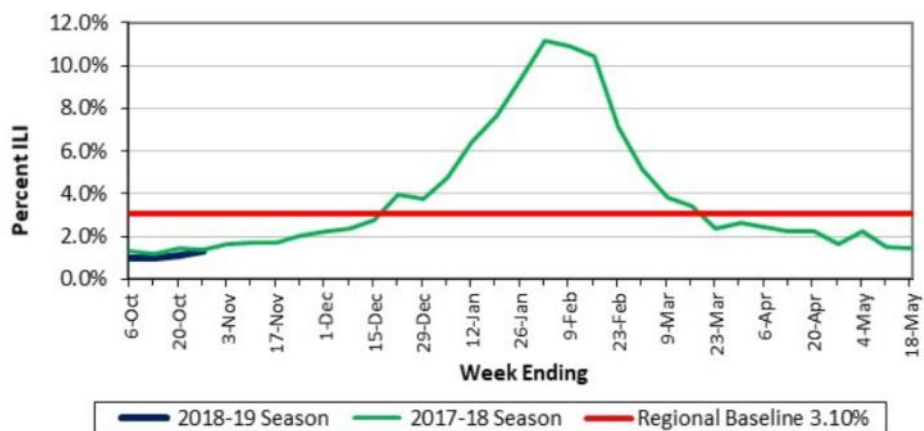


FLU: New York State

ILInet Healthcare Providers: 1.3% of weekly patient complaints were flu-like illness (ILI); this is an *increase* from the previous week and is *below* the regional baseline of 3.10% (Figure 6). (*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: No reports this week. One death was reported this season to date.

Figure 6: Percent of Influenza-Like Illness (ILI) base on total ILINet Provider Patient Visits each week in NYS, by Season



Madison County Disease Surveillance & Risk Report

National Flu Activity: Week 43, ending 10/27/18: **Sporadic**

No Report

No Activity

Sporadic

Local

Regional

Widespread

Flu activity was **low** in the U.S.

Geographic Flu Activity Summary (Figure 7):

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

- Local influenza activity was reported by five states
- Sporadic influenza activity was reported by the District of Columbia, Puerto Rico, the U.S. Virgin Islands and 43 states
- No influenza activity was reported by two states
- Guam did not report

Flu Activity from ILINet Data (Figure 8):

New York City and two states experienced low ILI activity; the District of Columbia and 48 states experienced minimal ILI activity; and Puerto Rico had insufficient data.

(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:

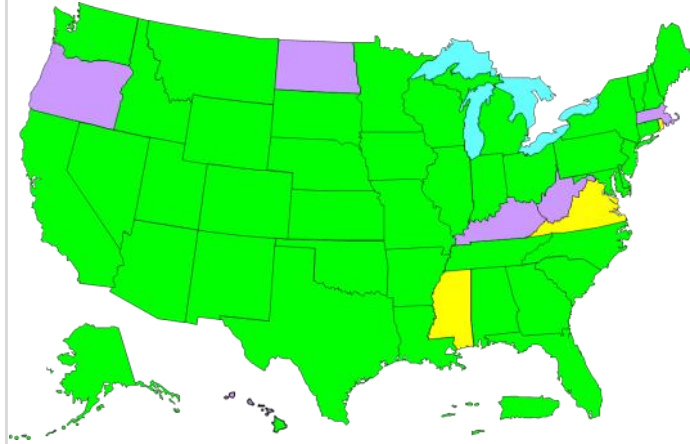
Outpatient illness visits reported through the Network was 1.7%, this percentage is a slight increase from the previous week but remains *below* the national baseline of 2.2%. All 10 regions in the U.S. reported flu-like illness *below* their region-specific baselines.

Flu and Pneumonia-Associated Deaths:

5.4% of all deaths reported through the National Center for Health Statistics mortality surveillance data, occurring week 42, ending October 20, were attributed to pneumonia and flu; this is *below* the epidemic threshold of 6.0%.

Flu-Associated Pediatric Deaths: One pediatric death was reported during week 43 for the 2018-19 flu season. Two flu-associated pediatric deaths have been reported this season to date.

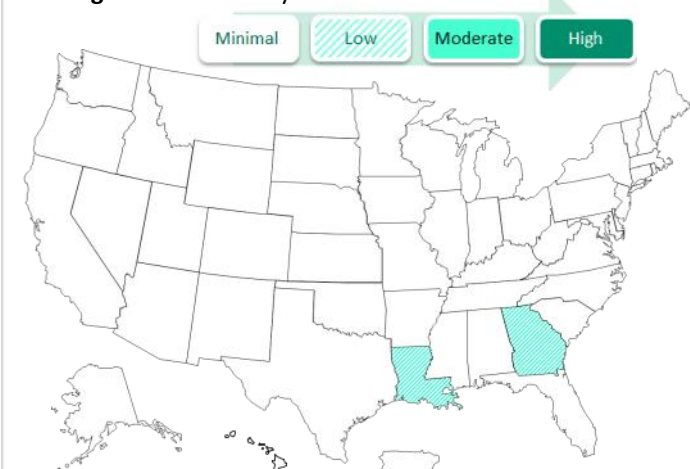
Figure 7: Geographic Spread of Influenza as Assessed by State and Territorial Epidemiologists
(This figure does not measure the severity of influenza activity.)



Overall Flu-Related Hospitalization Rate:
Data not yet available



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