

Madison County Communicable Disease Activity: Week 46, ending 11/17/18

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

COMMUNICABLE DISEASES: Madison County**Communicable Diseases**

Reported: 2 Chlamydia and 2 chronic Hepatitis C

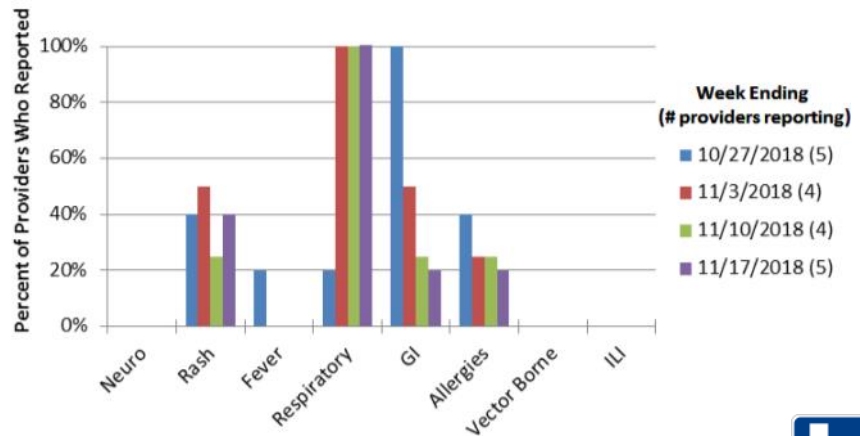
Primary Care Providers

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

Colleges Reported*: Respiratory illness, URI, coxsackie virus, and mono

Syndromic Surveillance in Emergency Department—11/9/18-11/17/18: No clusters of illness reported

Medicaid Over-the-Counter (OTC) & Script Medication Alerts—10/26/18 to 11/04/18: No alerts reported

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

Neurologic illness, rashes, fever, respiratory illness, gastrointestinal illness, influenza-like illness (ILI), and asthma

**Issue Highlight: Type 2 Diabetes Rates in Madison County**

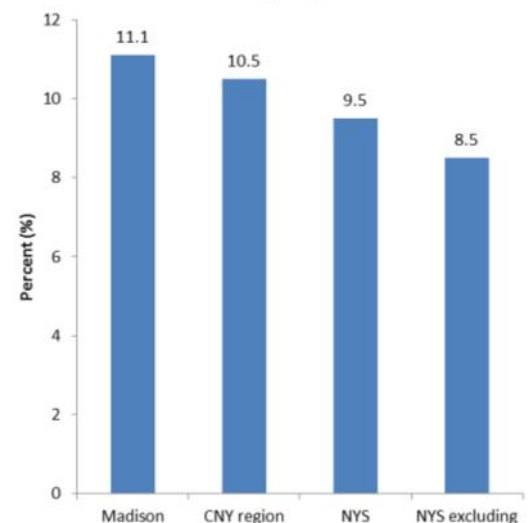
Diabetes is the 7th leading cause of death in the US (and may be underreported).

- Type 2 Diabetes accounts for 90-95% of all diagnosed cases of diabetes.
- The number of adults diagnosed with diabetes in the US has more than tripled in the last 20 years.
- In Madison County, 11.1% of adults have been diagnosed with diabetes (Figure. 2). In those over age 65, the percentage of Medicare beneficiaries diagnosed with diabetes was 23%.

(Source: <http://www.healthecnyc.org/indicators>)

The Madison County Rural Health Council holds Living Well with Diabetes workshops. Contact Stephanie at 315-454-2108 or email henry.s@mcruralhealthcouncil.org for more information or to register.

Visit cdc.gov/diabetes/basics/diabetes to learn more about diabetes.

Figure 2. Percentage of adults who have ever been diagnosed with diabetes, 2016 Madison County, CNY, and NYS

Source: <https://www.health.ny.gov/statistics/brfss/> 1

This report does *not* reflect the severity of flu activity.

Madison County Disease Surveillance & Risk Report

Madison County Flu Activity: Week 46, ending 11/17/18: No Activity

No Report

No Activity

Sporadic

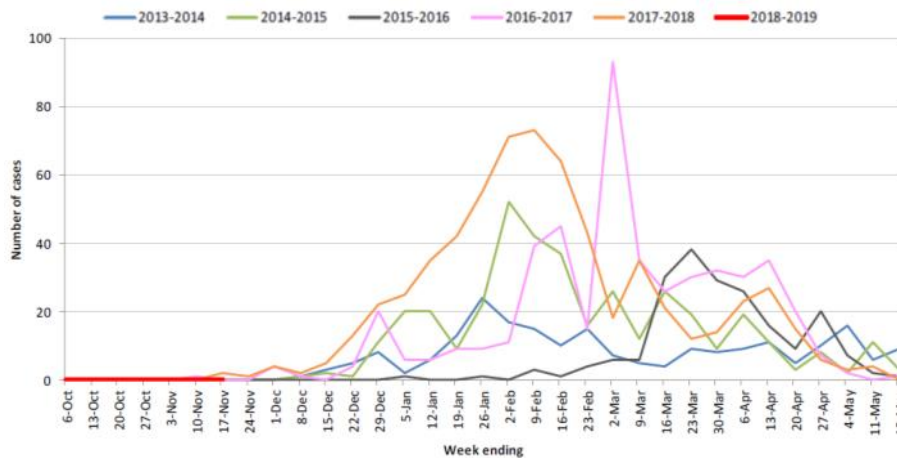
Local

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



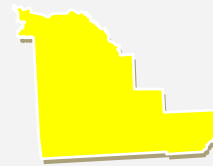
Influenza-like or flu-like illness (ILI) includes:

- 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:

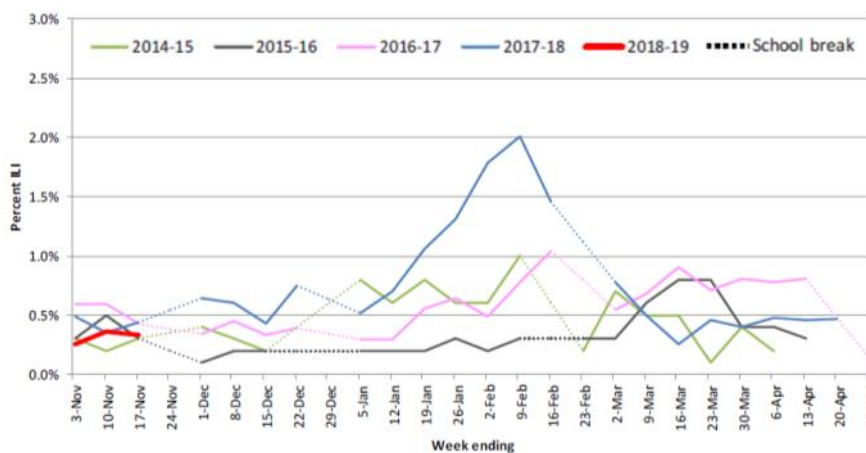
None to date

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 a slight decrease from the previous week (Fig. 4).

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



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.

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.)

FLU: Madison County

Madison County Disease Surveillance & Risk Report

New York State Flu Activity: Week 45, ending 11/10/18: **Sporadic**

No Report

No Activity

Sporadic

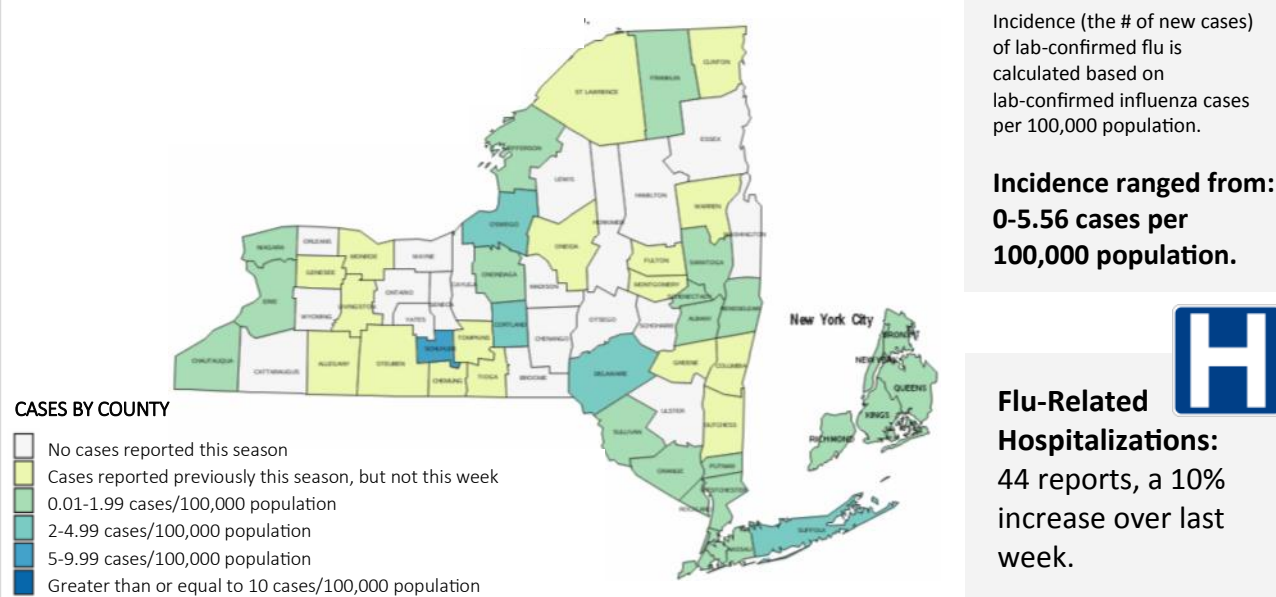
Local

Regional

Widespread

Weekly Lab-Confirmed Flu: 170 reports, a 42% *increase* over last week (Figure 5). Flu was reported in 26 counties.

Figure 5: Lab-Confirmed Flu Reported by County to NYS

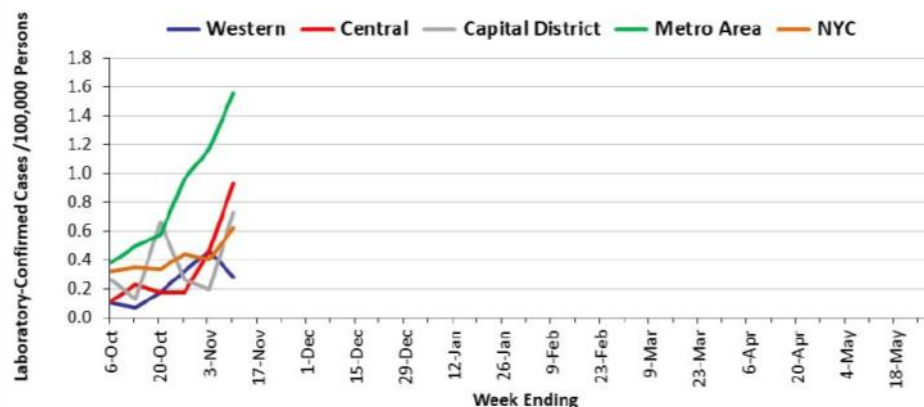


FLU: New York State

ILInet Healthcare Providers: 1.10% of weekly patient complaints were flu-like illness (ILI); this is a slight *decrease* 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: Incidence of Positive Influenza Laboratory Results Reported to NYSDOH, by Region—2018-19



Madison County Disease Surveillance & Risk Report

National Flu Activity: Week 45, ending 11/10/18: **Sporadic**

No Report

No Activity

Sporadic

Local

Regional

Widespread

Flu activity remained low, but with small increase in activity in the U.S.

Geographic Flu Activity Summary (Figure 7):

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

- Regional influenza activity was reported by three states
- Local influenza activity was reported by Guam and 10 states
- Sporadic influenza activity was reported by the District of Columbia, Puerto Rico, the U.S. Virgin Islands and 35 states
- No influenza activity was reported by two states

Flu Activity from ILINet Data (Figure 8):

One state (Georgia) experienced moderate ILI activity; New York City and five states experienced low ILI activity; the District of Columbia, Puerto Rico, and 44 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:

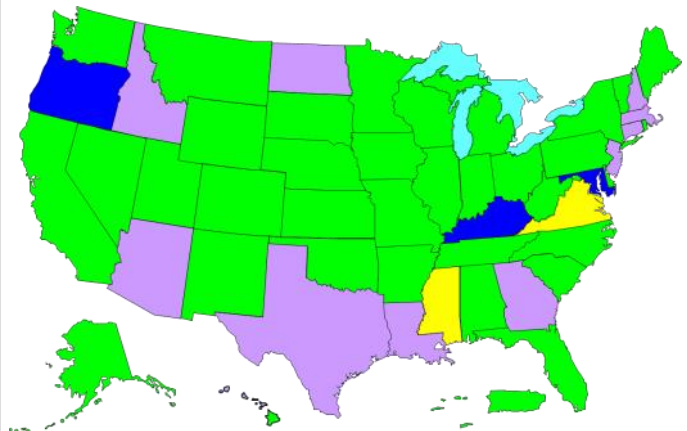
Outpatient illness visits reported through the Network was 1.9%, this percentage is a slight increase from the previous week but remains *below* the national baseline of 2.2%. One of 10 regions in the U.S. reported flu-like illness *at or above* their region-specific baselines.

Flu and Pneumonia-Associated Deaths:

5.4% of all deaths reported through the National Center for Health Statistics mortality surveillance data, occurring week 44, ending November 3rd, were attributed to pneumonia and flu; this is *below* the epidemic threshold of 6.2%.

Flu-Associated Pediatric Deaths: None were reported during week 45 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



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