

Madison County Communicable Disease Activity: Week 49, ending 12/08/18

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

COMMUNICABLE DISEASES: Madison County

Communicable Diseases

Reported: 5 Chlamydia, 1 Giardiasis, 1 chronic Hepatitis C, 1 Step Pneumoniae, and 1 Yersiniosis

Primary Care Providers

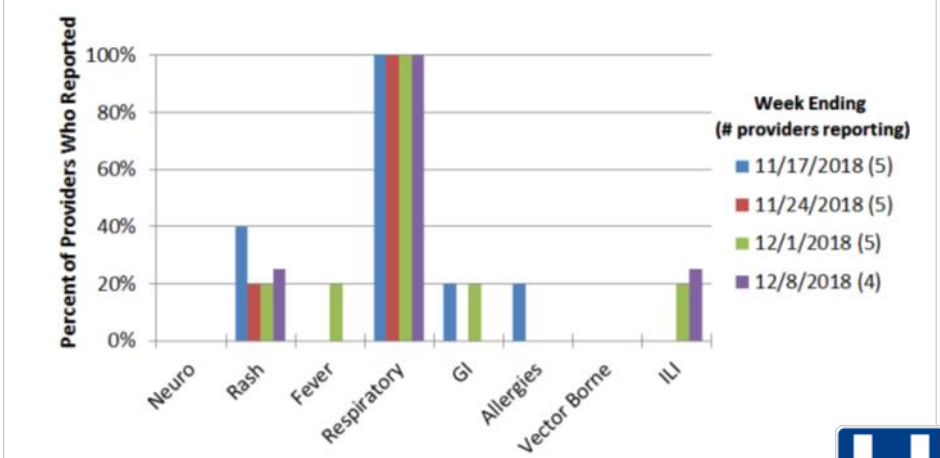
Reported*: Rash, respiratory illness, upper respiratory illness (URI), bronchitis, colds, sinusitis, influenza-like illness (ILI), flu, strep throat, coughs, ear infections, and sore throats (Fig. 1).

Colleges Reported*: Gastrointestinal illness (GI), ILI, URI, and strep throat

Syndromic Surveillance in Emergency Department—11/30/18-12/08/18: Mild to moderate sensitivity for rash and respiratory symptoms

Medicaid Over-the-Counter (OTC) & Script Medication Alerts—11/16/18 to 11/25/18: Mild to moderate sensitivity fluoroquinolones (antibiotics)

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



Hospitals Reported:

Neurologic illness¹, rashes, fever, respiratory illness, GI, and ILI



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: LEAD IN TOYS and JEWELRY

Children may be exposed to lead in metal and plastic toys, especially imported toys, antique toys, and toy jewelry.

Many children get toys and toy jewelry as gifts during the holiday season, but some toys may contain lead hazards. Lead is invisible to the naked eye and has no smell.

Children may be exposed to lead by simply handling toys normally; or by putting toys, fingers, and other objects in their mouths.

Toys imported into the United States and antique toys and collectibles often contain lead. To reduce children’s risk for exposure, the U.S. Consumer Product Safety Commission (CPSC) issues recalls of toys that could potentially expose children to lead.

Find current recalls here: <https://www.cpsc.gov/Recalls>



Learn more about lead in toys and jewelry: <https://www.cdc.gov/features/leadintoy/index.html>

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

Madison County Disease Surveillance & Risk Report

Madison County Flu Activity: Week 49, ending 12/08/18: Regional

No Report

No Activity

Sporadic

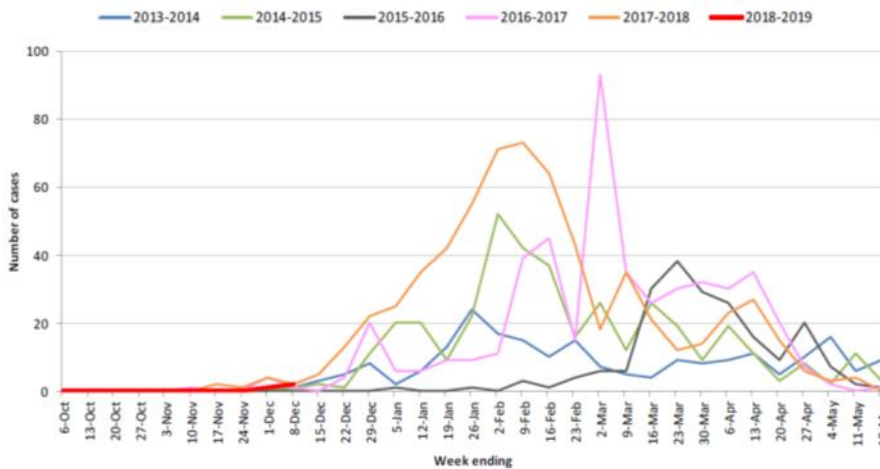
Local

Regional

Widespread

Weekly Lab-confirmed flu: Two flu case were reported; this is a 100% increase from the previous week (1).

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



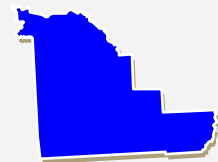
Influenza-like or flu-like illness (ILI) includes:

- 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: 3

This is 50% lower than average, to date (6).

Incidence Rate (the number of new flu cases): 2.7 per 100,000 population



Schools Districts*: 0.3% of children seen by school nurses had symptoms of influenza-like illness; this is a slight increase from the previous week (Fig.4).

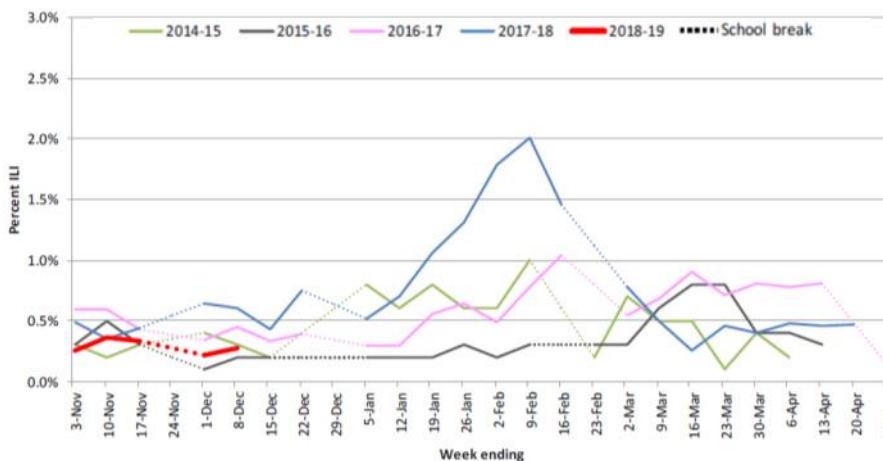
College Health Centers*: ILI was reported

Primary Care Providers*: ILI and 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.)

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



Reporting schools: Camden, Canastota, Chittenango, DeRuyter, Hamilton, Madison, Madison-Oneida BOCES, Morrisville-Eaton, NY School for the Deaf, Oneida (including St. Patrick's), Rome, Rome Catholic, Stockbridge Valley, and Vernon-Verona-Sherrill

Hospitals:

ILI was reported



Flu-Related

Hospitalizations: No hospitalized patients with lab-confirmed flu were reported by hospitals in Madison County during week 49; this is *no change* from the previous week (0). One hospitalization has been reported this season to date.

FLU: Madison County

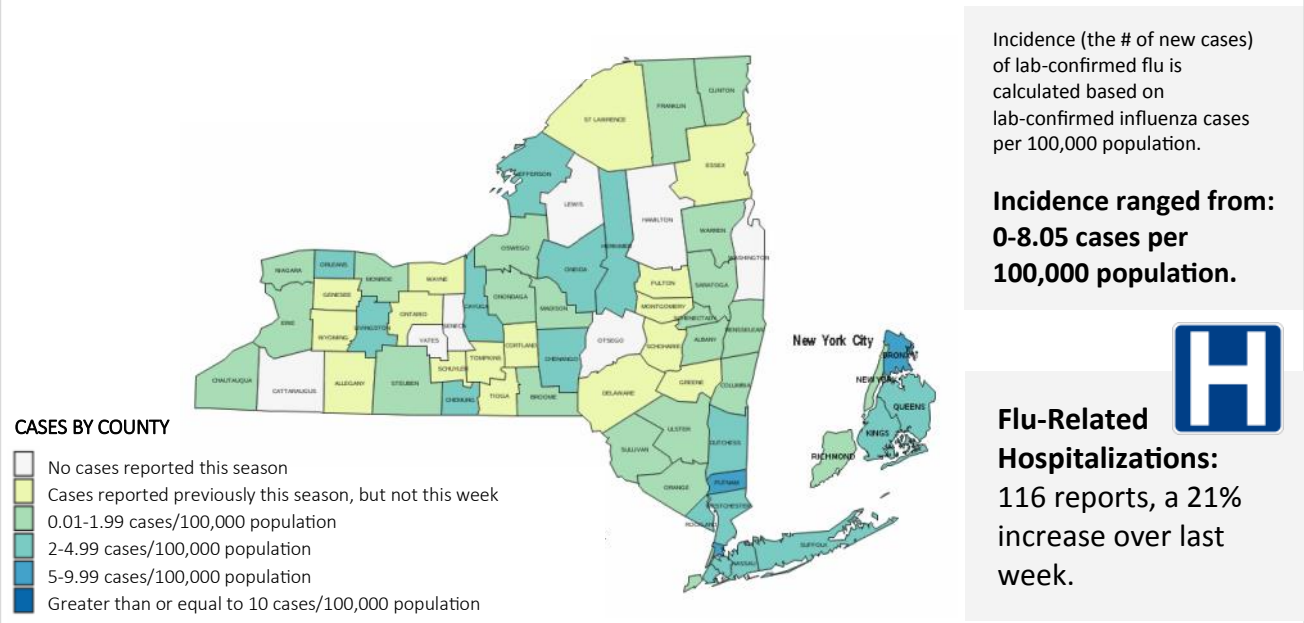
Madison County Disease Surveillance & Risk Report

New York State Flu Activity: Week 48, ending 12/01/18: **Regional**

No Report No Activity **Sporadic** Local **Regional** Widespread

Weekly Lab-Confirmed Flu: 461 reports, an 82% *increase* over last week (Figure 5). Flu was reported in 39 counties.

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

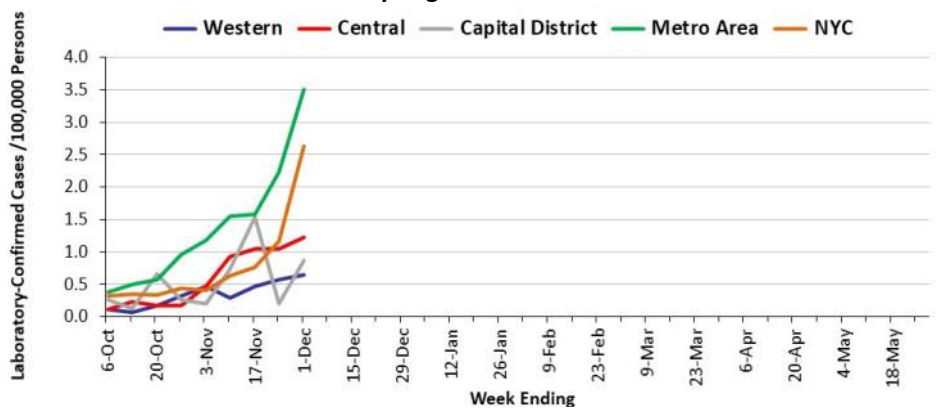


FLU: New York State

ILInet Healthcare Providers: 1.45% of weekly patient complaints were flu-like illness (ILI); this is a slight *increase* from the previous week and remains *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 48, ending 12/01/18: Local

No Report

No Activity

Sporadic

Local

Regional

Widespread

Flu activity **increased slightly** 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 one state
- Regional influenza activity was reported by nine states
- Local influenza activity was reported by 18 states
- Sporadic influenza activity was reported by the District of Columbia, Puerto Rico, the U.S. Virgin Islands and 22 states
- Guam did not report

Flu Activity from ILINet Data (Figure 8):

Two states experienced high ILI activity; two states experienced moderate ILI activity; New York City and eight states experienced low ILI activity; and the District of Columbia, Puerto Rico and 38 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:

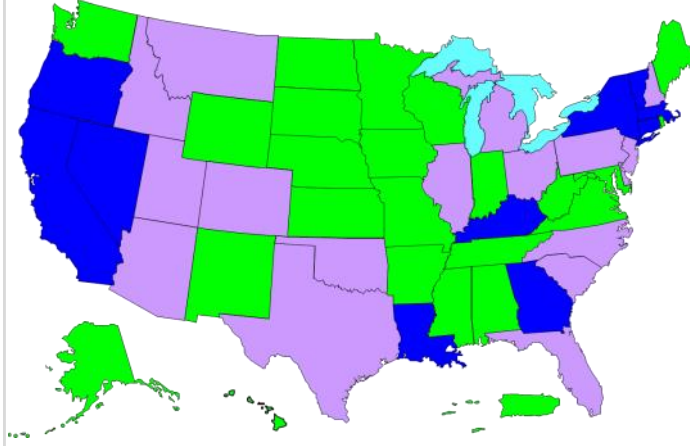
Outpatient illness visits reported through the Network was 2.2%, this percentage is *at* the national baseline of 2.2%. Four of 10 regions in the U.S. reported flu-like illness *at or above* their region-specific baselines.

Flu and Pneumonia-Associated Deaths:

5.7% of all deaths reported through the National Center for Health Statistics mortality surveillance data, occurring week 47, ending November 24th, were attributed to pneumonia and flu; this is *below* the epidemic threshold of 6.5%.

Flu-Associated Pediatric Deaths: None were reported during week 48. Five flu-associated pediatric deaths have been reported this season to date.

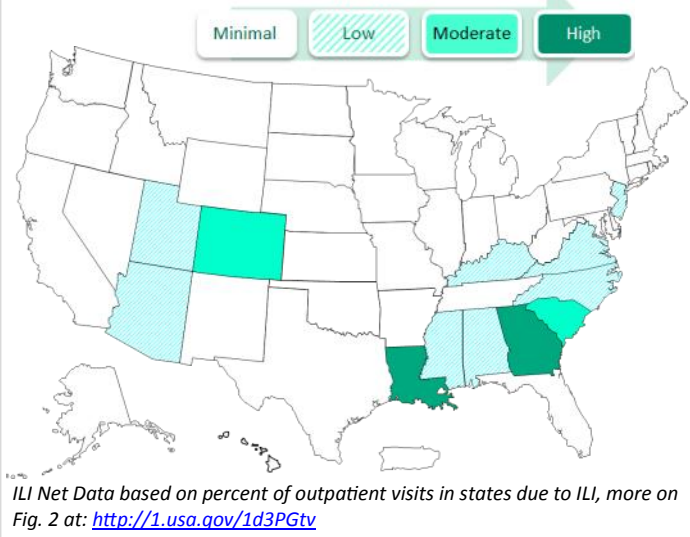
Figure 7: Geographic Spread of Influenza as Assessed by State and Territorial Epidemiologists (This figure does not measure the severity of influenza activity.)



Overall Flu-Related Hospitalization Rate:
1.3 per 100,000 population was reported



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