

Madison County Communicable Disease Activity: Week 2, ending 1/12/19

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

COMMUNICABLE DISEASES: Madison County

Communicable Diseases

Reported: 3 Chlamydia

Primary Care Providers

Reported*: Fever, respiratory illness, gastrointestinal illness (GI), influenza-like illness (ILI), strep throat, upper respiratory infections, ear infections, sinus infections, bronchitis, sore throat, and coughs

Colleges Reported*: No

reports due to winter break

Syndromic Surveillance in Emergency Department—1/4/19-1/13/19:

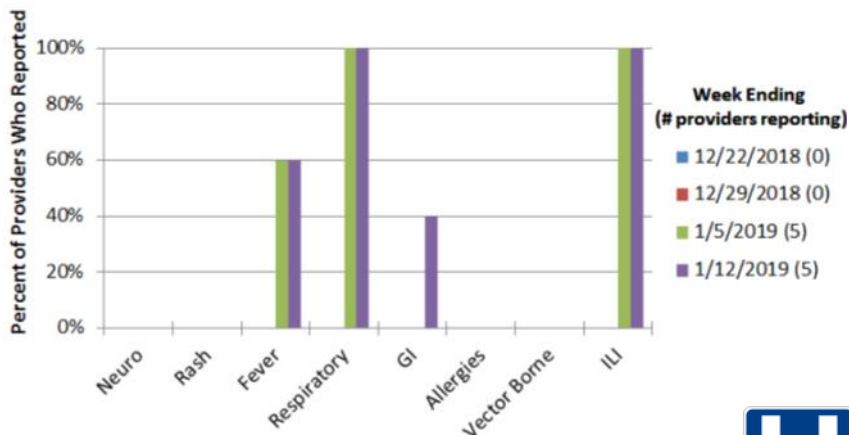
Mild to moderate sensitivity for gastrointestinal illness

Medicaid Over-the-Counter (OTC) & Script Medication Alerts—12/2/18 to

12/30/18: Mild to moderate sensitivity for 3rd and 4th generation Cephalosporins²; penicillinase-resistant antibiotics; systemic and topical nasal products; and moderate sensitivity for 1st and 2nd Generation Cephalosporins²; and Penicillin G and Ampicillins²

¹**Neurologic 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)

²**Antibiotics**

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

Neurologic illness¹, rashes, fever, respiratory illness, GI, ILL, and asthma

**Issue Highlight: Preventing HPV-Related Cancers in Males and Females**

HPV (human papillomavirus) is a common infection spread through sexual activity. It causes almost all cases of cervical cancer, and has been linked to other cancers among men and women. About 79 million Americans currently have HPV, but many people with HPV don't know they are infected.

The good news?

- The HPV vaccine (shots) can prevent HPV infection. The HPV vaccine is most effective when it is given before first sexual contact to prevent several types of cancer in males and females, all linked to HPV infection.

Madison County Health Department encourages:

- Parents to make sure pre-teens get the HPV vaccine at age 11 or 12
- Young adults to get the HPV vaccine if they didn't get it as pre-teens.
- Women to start getting regular cervical cancer screenings at age 21.
- Women up to age 26 and men up to age 21 can still get the vaccine.

About 11,000 women in the U.S. get cervical cancer that could have been prevented.

Learn more about the HPV vaccine and the cancers it can prevent at <https://www.cdc.gov/cancer/hpv/>

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

Madison County Disease Surveillance & Risk Report

Madison County Flu Activity: Week 2, ending 1/12/19: *Regional*

No Report

No Activity

Sporadic

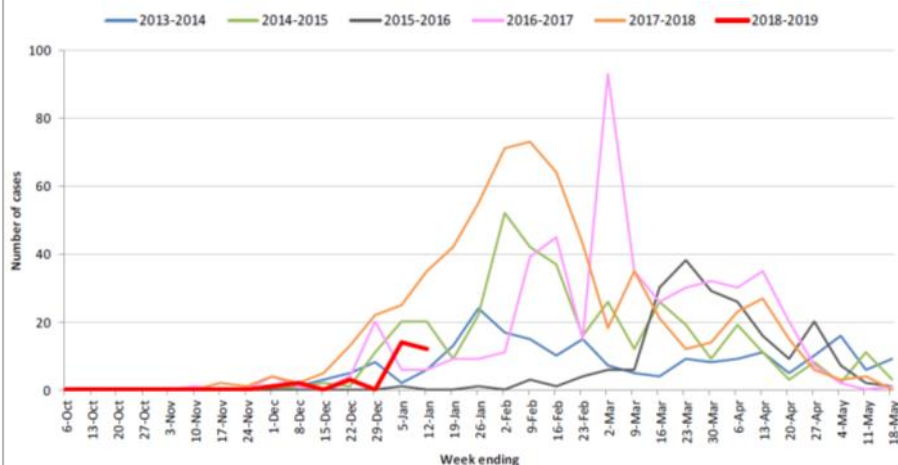
Local

Regional

Widespread

Weekly Lab-confirmed flu: 12 flu cases were reported; this is a 14% decrease from the previous week (14).

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



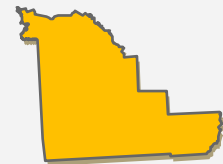
Influenza-like or flu-like illness (ILI) includes:

- 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:

32 (all flu type A)
This is 37% lower than average, to date (51).

Incidence Rate (the number of new flu cases): 16.3 per 100,000 population



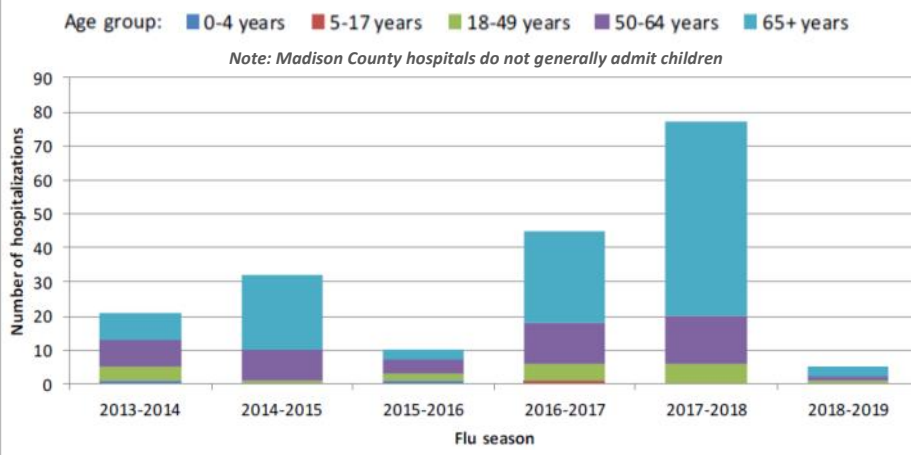
Schools Districts*: 0.6% of visits to the school nurse were due to ILI

College Health Centers*: No report due to the winter break

Primary Care Providers*: Flu and ILI were 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: Total Patients Hospitalized with Lab-Confirmed Influenza by Age and Season, Madison County Hospitals



Hospitals:

Flu and ILI were reported



Flu-Related Hospitalizations:

Two hospitalized patients with lab-confirmed flu were reported by hospitals in Madison County during week 1; this is an increase from the previous week (0). Five hospitalization have been reported this season to date.

FLU: Madison County

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

Madison County Disease Surveillance & Risk Report

New York State Flu Activity: Week 1, ending 1/5/19: **Widespread**

No Report

No Activity

Sporadic

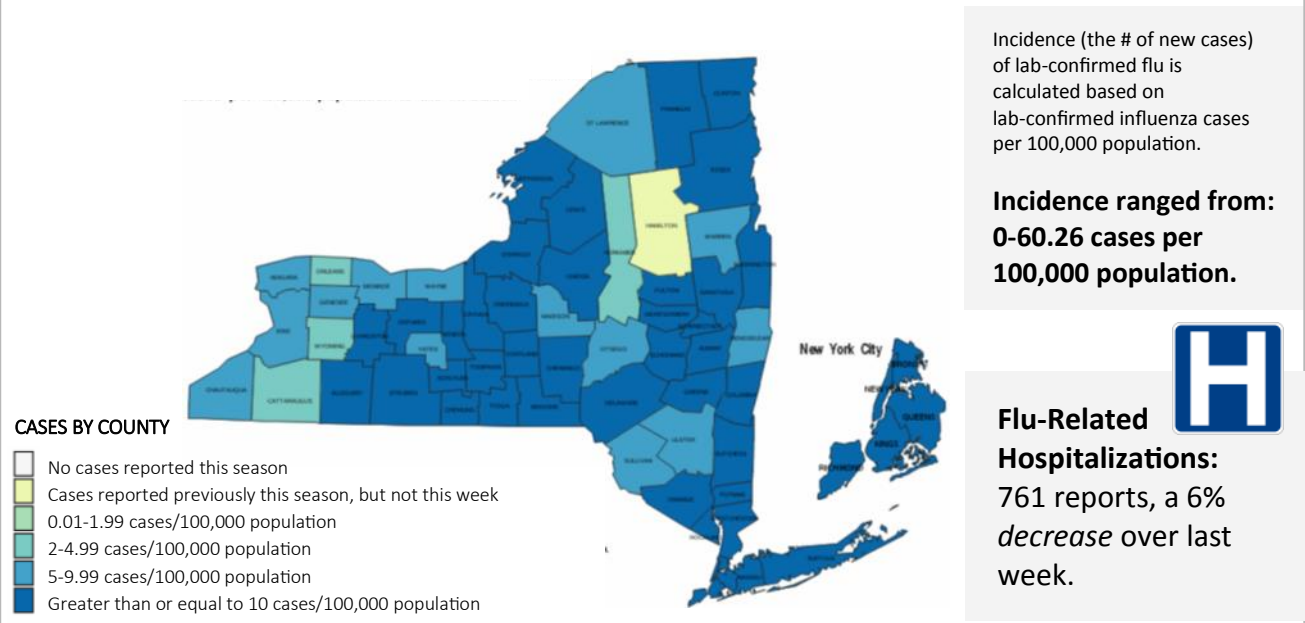
Local

Regional

Widespread

Weekly Lab-Confirmed Flu: 3,681 reports, a 17% increase over last week (Figure 5). Flu was reported in 61 counties.

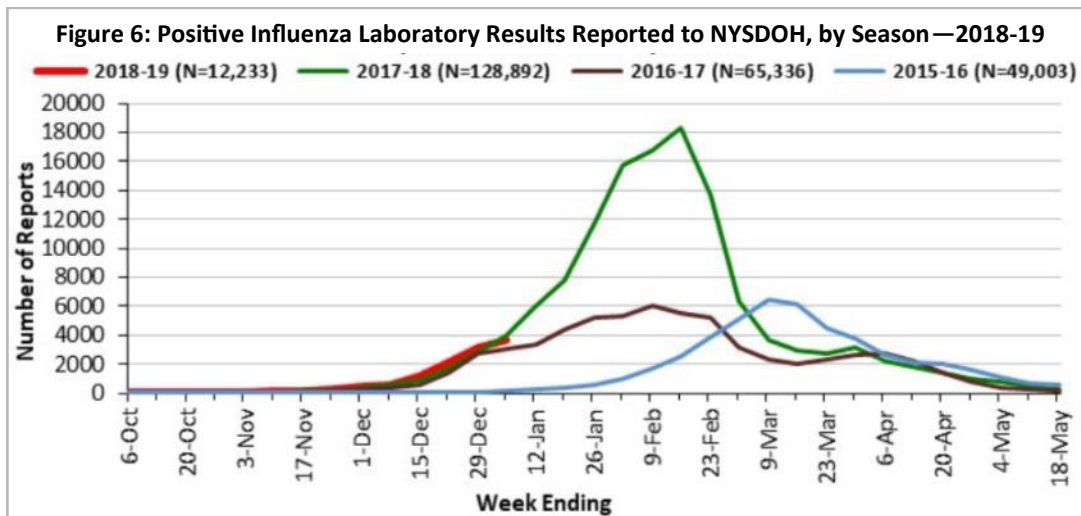
Figure 5: Lab-Confirmed Flu Reported by County to NYS



FLU: New York State

ILInet Healthcare Providers: 2.85% of weekly patient complaints were flu-like illness (ILI); this is an *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.



Source: New York State Department of Health. *Influenza Surveillance, Activity and Reports, 2015-16.* <http://on.ny.gov/1GTxdpF>

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

Madison County Disease Surveillance & Risk Report

National Flu Activity: Week 1, ending 1/5/19: **Widespread**

No Report

No Activity

Sporadic

Local

Regional

Widespread

Flu activity **remains elevated** 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 30 states
- Regional influenza activity was reported by Puerto Rico and 17 states
- Local influenza activity was reported by two states
- Sporadic influenza activity was reported by the District of Columbia, the U.S. Virgin Islands and one state
- Guam did not report

Flu Activity from ILINet Data (Figure 8):

New York City and 15 states experienced high ILI activity; 12 states experienced moderate ILI activity; the District of Columbia, Puerto Rico and 8 states experienced low ILI activity; and 15 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:

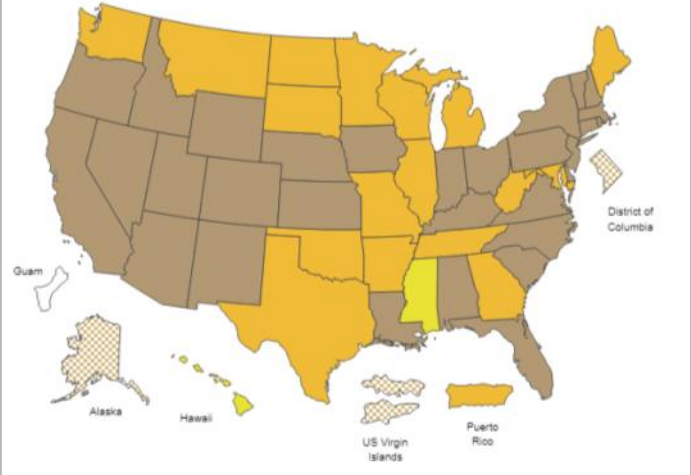
Outpatient illness visits reported through the Network was 3.5%, this percentage is *above* the national baseline of 2.2%. All 10 regions in the U.S. reported flu-like illness *at or above* their region-specific baselines.

Flu and Pneumonia-Associated Deaths:

6.4% of all deaths reported through the National Center for Health Statistics mortality surveillance data, occurring week 52, ending December 29th, were attributed to pneumonia and flu; this is *below* the week 52 epidemic threshold of 7.0%.

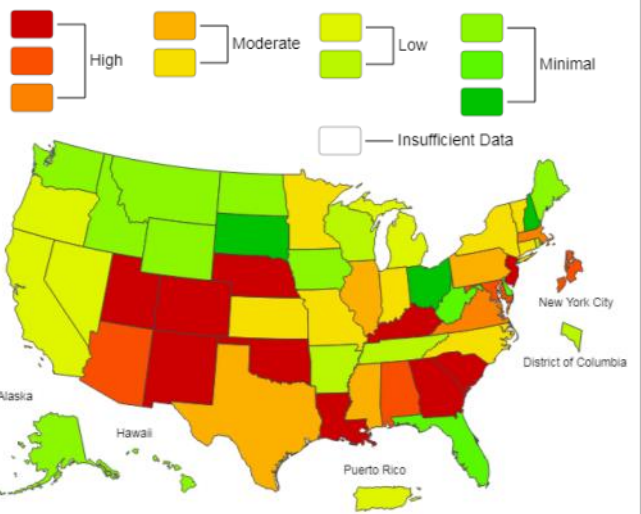
Flu-Associated Pediatric Deaths: Three deaths were reported during week 52. 16 flu-associated pediatric deaths have been reported this season to date.

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:
9.1 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