

**Madison County Communicable Disease Activity: Week 4, ending 1/26/19**

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

COMMUNICABLE DISEASES: Madison County

**Communicable Diseases**

**Reported:** 3 Chlamydia, 1 chronic Hepatitis C, and 1 Pertussis

**Primary Care Providers**

**Reported\*:** Fever, respiratory illness, influenza-like illness (ILI), upper respiratory illness (URI), influenza (flu), strep throat, sore throats, coughs, sinus infections, bronchitis, and COPD exacerbations.

**Colleges Reported\*:** Fever, respiratory illness, ILI, URI, and flu

**Syndromic Surveillance in Emergency Department—1/18/19-1/27/19:**

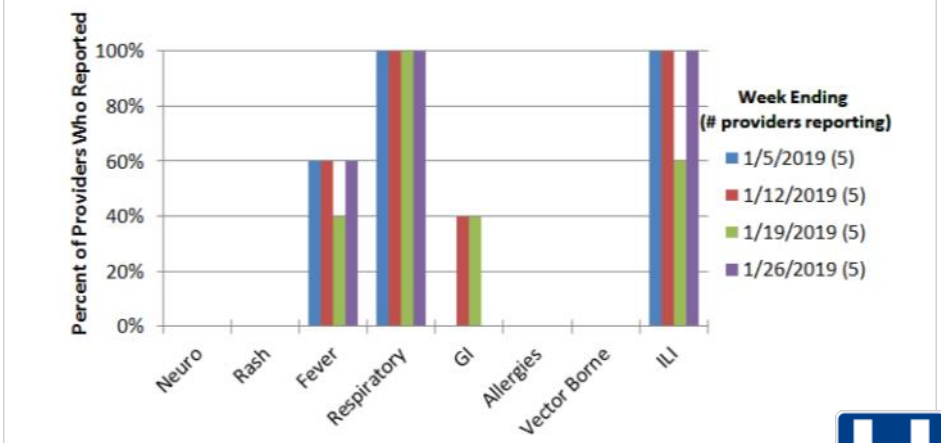
Mild to moderate sensitivity for neurologic symptoms

**Medicaid Over-the-Counter (OTC) & Script Medication Alerts—1/4/19 to**

**1/13/19:** Mild to moderate sensitivity for 1st and 2nd Generation Cephalosporins and Fluoroquinolones (antibiotics), and influenza agents (flu antivirals)

<sup>1</sup>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)

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



**Hospitals Reported:**

Neurologic illness<sup>1</sup>, fever, respiratory illness, GI, ILI, and pneumonia



**Issue Highlight: Know When to Test Your Private Water System**

Approximately 23,500 Madison county residents rely on Individual Water Supplies (IWS). IWS should be tested yearly for at least bacteria.

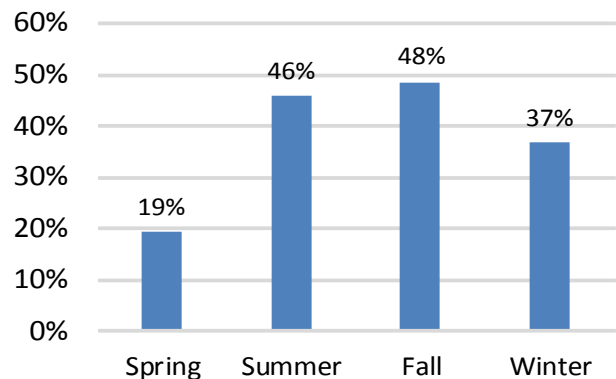


**Results from the Madison County well testing program indicate:**

- The best time to test your IWS is when it's most vulnerable to contamination.
- The summer and fall seasons are the most likely time to have bacteria detected in the well.

Contact Madison County health Department's Water specialist about available free individual water supply assessment and testing. Call 315-366-2626 or email [health@madisoncounty.ny.gov](mailto:health@madisoncounty.ny.gov).

**Three-Years of Positive Coliform Bacteria Tests from Drilled Wells in Madison County, by Season (9/30/15-9/30/18) n=387**



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

# Madison County Disease Surveillance & Risk Report

## Madison County Flu Activity: Week 4, ending 1/26/19: *Regional*

No Report

No Activity

Sporadic

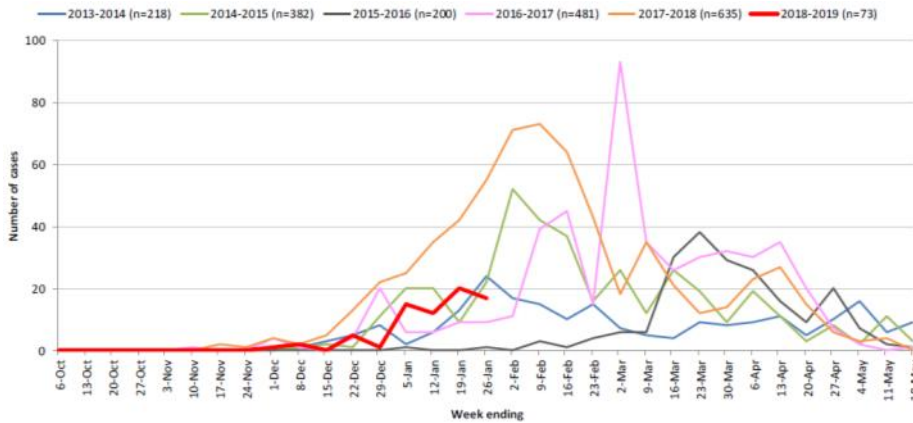
Local

**Regional**

Widespread

**Weekly Lab-confirmed flu:** 17 flu case were reported; this is a 15% decrease from the previous week (20), see Figure 3.

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



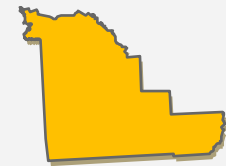
**Influenza-like or flu-like illness (ILI) includes:**

- 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:**

**73** (all flu type A)  
This is 18% lower than average, to date (89).

**Incidence Rate** (the number of new flu cases): 23.1 per 100,000 population



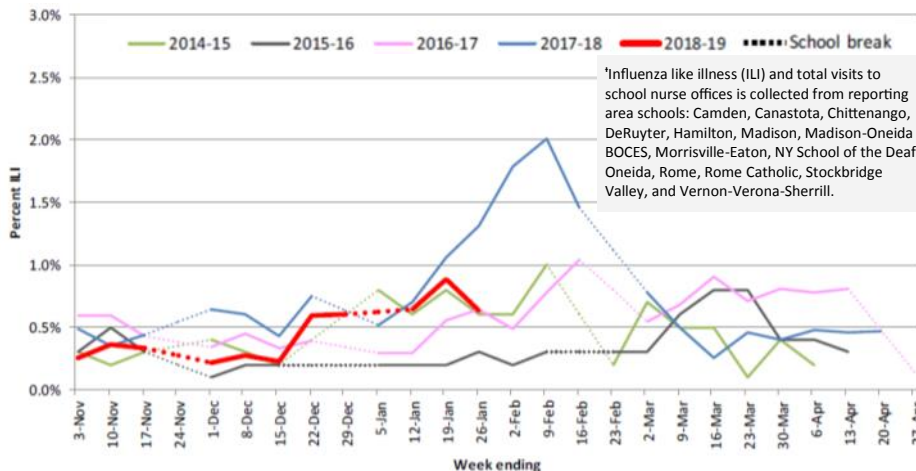
**Schools Districts\*:** 0.6% of visits to the school nurse were due to ILI; a decrease from the previous week (0.9%), see Figure 4.

**College Health Centers\*:** Flu and ILI were reported

**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: Proportion of ILI-related School Nurse Visits by Season, Reporting Schools**



**Hospitals:**

ILI and flu was reported



**Flu-Related**

**Hospitalizations:** No hospitalized patients with lab-confirmed flu were reported by hospitals in Madison County during week 3; this is a decrease from the previous week (1). Six 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 3, ending 1/19/19: **Widespread**

No Report

No Activity

Sporadic

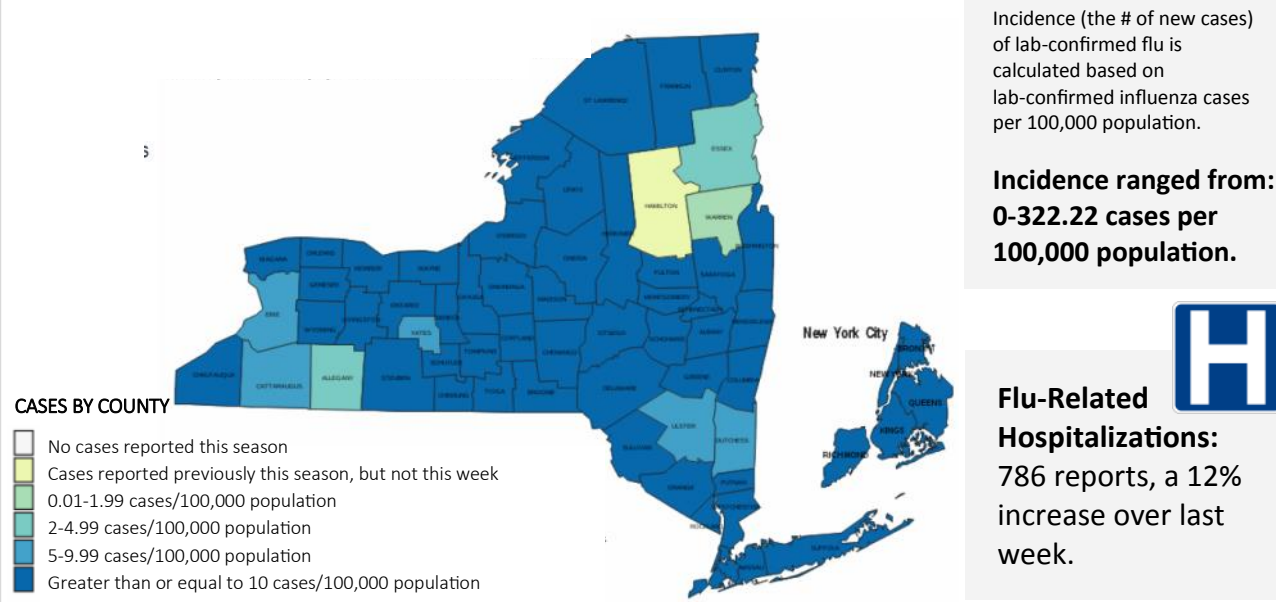
Local

Regional

**Widespread**

**Weekly Lab-Confirmed Flu:** 5,227 reports, a 38% increase over last week (Figure 5). Flu was reported in 61 counties.

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

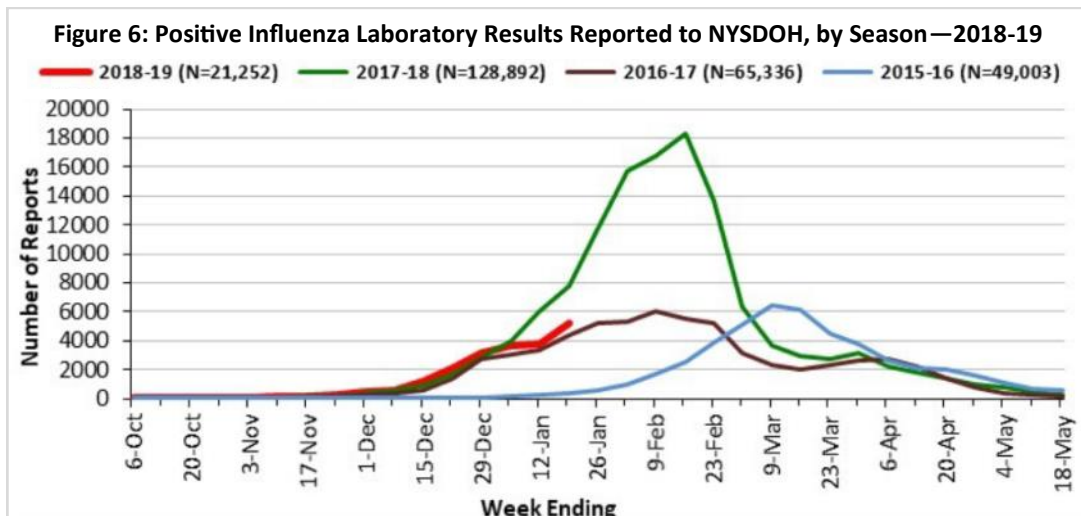


**Flu-Related Hospitalizations:** 786 reports, a 12% increase over last week.

FLU: New York State

**ILInet Healthcare Providers:** 3.15% of weekly patient complaints were flu-like illness (ILI); this is an increase from the previous week and is above 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 3, ending 1/19/19: **Widespread**

No Report

No Activity

Sporadic

Local

Regional

**Widespread**

Flu activity **increased** 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 36 states
- Regional influenza activity was reported by Puerto Rico and 11 states
- Local influenza activity was reported by three states
- Sporadic influenza activity was reported by the District of Columbia and the U.S. Virgin Islands.
- Guam did not report.

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

New York City and 18 states experienced high ILI activity; 10 states experienced moderate ILI activity; the District of Columbia and 8 states experienced low ILI activity; 14 states experienced minimal ILI activity; and data were insufficient to calculate an ILI activity level for Puerto Rico.

*(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:

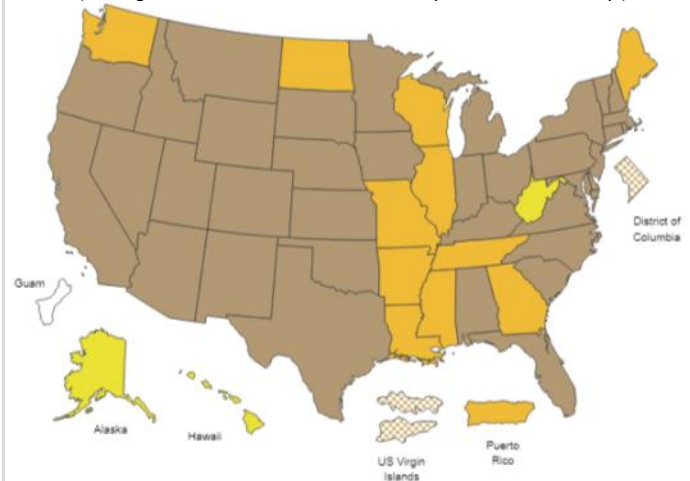
Outpatient illness visits reported through the Network was 3.3%, this percentage is *above* the national baseline of 2.2%. All 10 regions in the U.S. reported flu-like illness *at or above* their region-specific baselines.

### Flu and Pneumonia-Associated Deaths:

7.2% of all deaths reported through the National Center for Health Statistics mortality surveillance data, occurring week 2, ending January 12th, were attributed to pneumonia and flu; this is *above* the week 2 epidemic threshold of 7.1%.

**Flu-Associated Pediatric Deaths:** Three deaths were reported during week 3. 22 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.)



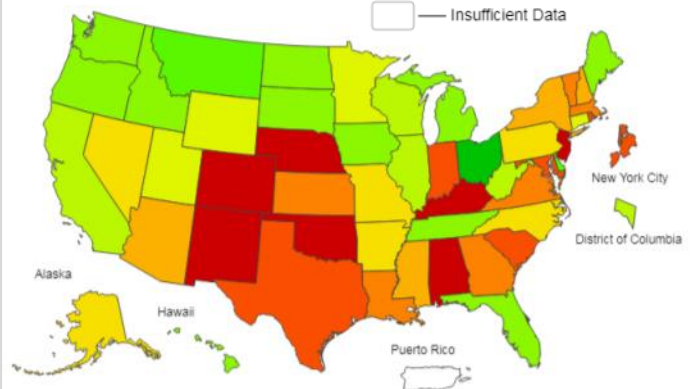
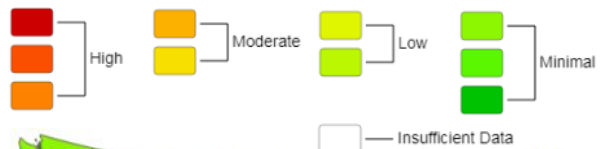
### Overall Flu-Related Hospitalization

**Rate:** 14.8 per 100,000 population was reported



**Hospitalizations by Age Group:** The highest rate was among adults aged 65 or older (38.3 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