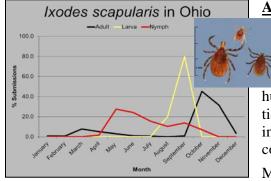
A Monthly Publication of the Stark Public Health Infrastructure Coalition

EPI Gram is a monthly publication of the Stark County Public Health Infrastructure Coalition. It contains a summary of provisional communicable disease reports and other key public health indicators, with summary tables for Stark County, Ohio. Some reportable conditions may be under investigation and, at any given time, data may fluctuate from month to month for a specific category.

Monthly Highlight: TB 3rd Quarter Report and Fall tick activity

The TB Registrar performs monitoring of all Tuberculosis (TB) cases reported in Stark County, OH. In addition to monitoring cases in our community, the Registrar provides quarterly statistics (see 3rd quarter report in the table to the right), facilitates obtaining medications and x-rays for those with a financial need, and is the county contact to resolve issues relating to TB. More information from our county TB Registrar can be found at http://starkhealth.org/pdfs/tb_control.pdf.

Stark County Tuberculosis Case Registry, Quarterly Report	1st	2nd	3rd	Year To Date
Suspect Cases Reported	10	11	11	32
Culture Confirmed Mycobacterium Tuberculosis	1	0	1	2
Culture Confirmed Mycobacterium Other Than TB	4	6	8	18
Not TB, Not Mycobacterium Other Than TB	2	2	2	6
Suspects Pending	3	3	0	N/A



Autumn tick exposure. The Ohio Department of Health Laboratory

identifies adult and larval stages of the Black-legged tick, *Ixodes scapularis*, primarily in the Fall months of September, October and November. This tick is known to transmit a Spirochete-type bacterium, *Borrelia burgdorferi*, the cause of Lyme disease in

humans. The adult tick is no larger than a sesame seed. Prior to 2011, the tick was rarely found in Ohio. However, by the end of 2011, it was found in 53 counties, including Stark County and 23 of those counties are considered to have an established Black-legged tick population.

More information on Lyme disease can be found at www.cdc.gov/lyme/.

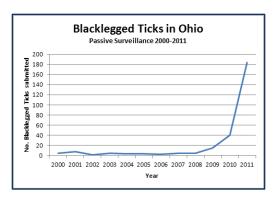


Table 1 Summary of Air Quality Index, Pollen, and Mold Counts for Stark County, Ohio, including historical data.

September 2012				October 2011					
	Monthly High	Monthly	Monthly	Counts in highest reported	Monthly Low Monthly Median		Monthly Monthly Low Monthly Median Counts in		Counts in highest reported health risk
	Wionuny Ingn	Low Median health ris		health risk category	High	Monuny Low	Wionung Wiedian	category	
Pollen Count	100	5	15	N/A	5	2	3	N/A	
Mold Count	12,900	1,430	4,200	6 Moderate	16,490	1,170	5,270	1 High	
Air Quality Index	55	5	33	2 Moderate	59	13	31	2 Moderate	

^{**}See the following websites for updated Air Quality Index and mold index terminology and color-coding https://pollen.aaaai.org/nab/index.cfm?p=reading_charts
Data source for this table is the Air Quality Division of the Canton City Health Department.

Table 2 Summaries of Select Vital Statistics for Stark County

	September 2012	YTD 2012	2011
Live Births	294	3183	4075
Births to Teens	20	298	399
Deaths	311	3152	4110

Table 3 Stark County Crude Birth and Death Rates

<u> </u>	2006	2007	2008	2009	2010
Birth	1191*	1190*	1166*	1139	1085
Death	1000*	1035*	1055*	1072	1094

^{*}Source: Ohio Department of Health Data Warehouse. Rates are per 100,000 population.

If you have any questions, including how to receive copies of this report, please contact Christina Henning at 330.489.3327 or Chenning@cantonhealth.org or Lauren Drinkard at 330.493.9928 or Drinkard@starkhealth.org.

Table 4: 2011 Jurisdictional Summary of Reportable Diseases in Stark County, OH

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	Alliance City		Canton City		Massillon City		Stark County		All Departments	
_	Sep	YTD	Sep	YTD	Sep	YTD	Sep	YTD	Sep	YTD
Brucellosis		0		0		0		1	0	1
Campylobacteriosis		4		20		2	1	23	1	49
Chlamydia infection	14	99	56	515	16	108	44	421	130	1143
Coccidioidomycosis		0		0		0		1	0	1
Cryptosporidiosis		4	2	5		2	4	22	6	33
Dengue		0		0		0		1	0	1
E Coli O157:H7		0		0		0	1	2	1	2
E Coli Unk Serotype	1	1		0		0		0	1	1
Giardiasis		0		5		0	4	24	4	29
Gonococcal infection	5	20	47	273	4	47	13	127	69	467
Haemophilus influenzae		0		1		0		4	0	5
Hepatitis A		1		1		0		1	0	3
Hepatitis B - Perinatal Infection		0		1		0	1	2	1	3
Hepatitis B - acute		0		1		0		1	0	2
Hepatitis B - chronic		1		8	1	3	3	16	4	28
Hepatitis C - acute	1	1		4	1	1		0	2	6
Hepatitis C - chronic		25	4	49	4	25	9	79	17	178
Influenza-associated hospitalization		1		4		2		11	0	18
LaCrosse Virus Disease		0		0		0		1	0	1
Legionnaires' Disease		0		4		0	1	8	1	12
Lyme Disease		1		0		1		8	0	10
Meningitis - aseptic/viral		1	1	4	2	3	3	14	6	22
Meningitis - bacterial (Not N. meningitidis)		0		2		0		1	0	3
Mycobacterial disease -		2		5		1	2	12	2	20
Pertussis		0		1		0	2	9	2	10
Salmonellosis	1	1		3		1		24	1	29
Shigella		0		0		1	1	2	1	3
Streptococcal - Group A - invasive		1		4		2		10	0	17
Streptococcus pneumoniae - invasive antibiotic resistance unknown or non-resistant		4		11		1	2	31	2	47
Streptococcus pneumoniae - invasive antibiotic resistant/intermediate		2		2		0	2	7	2	11
Syphilis, Total		1		2		4			0	7
Syphilis, Primary and Secondary									0	0
Typhoid Fever		0		0		0		1	0	1
Varicella	1	4		5	2	4	2	14	5	27
West Nile Virus		0		1		0		0	0	1
Yersiniosis		0		0		0	1	2	1	2
	<u> </u>									

Source: Ohio Disease Reporting System, downloaded 10/15/2012.

Table 5 – 2011 Summary Table of Diseases Reported in the Previous 5 years within Stark County, OH.

Table 5 – 2011 Summary Table of Diseases	Neporteu ii	YTD	YTD	All of	5 Yr annual	inty, Ori.
(Provisional Data)	12-Sep	2012	2011	2011	average	Rate
Anaplasmosis	12 Sep	2012	2011	2011	0.2	0.05
Brucellosis		1			0	0
Campylobacteriosis	1	49	32	40	50	13.31
Chlamydia	130	1143	1089	1457	1269.6	338.03
Coccidioidomycosis	100	1	2005	1107	0	0
Creutzfeldt-Jakob Disease (CJD)		-	2	2	1.6	0.43
Cryptosporidiosis	6	33	13	16	21.2	5.64
Cytomegalovirus (CMV), Congenital	Ů			10	0.4	0.11
Dengue		1	2	2	0.6	0.16
Encephalitis, Post Other Infection		_	_	_	0.2	0.05
Encephalitis, Primary Viral					0.8	0.21
Escherichia coli , Shiga Toxin-Producing, Not O157:H7			2	2	1	0.27
Escherichia coli , Shiga Toxin-Producing, Unk Serotype	1	2	2	2	1.4	0.37
Escherichia coli O157:H7	1	1			2	0.53
Ehrlichiosis-Ehrlichia chaffeensis			1	1	0.2	0.05
Giardiasis	4	29	55	62	52.2	13.9
Gonorrhea	69	467	466	613	540.4	143.88
Haemophilus influenzae , Invasive Disease		5	5	8	7	1.86
Hemolytic Uremic Syndrome (HUS)				, , ,	0.6	0.16
Hepatitis A		3	1	1	2.4	0.64
Hepatitis B - Perinatal Infection	1	3	1	2	**	**
Hepatitis B, Acute	_	2	1	2	3.4	0.91
Hepatitis B, Chronic	4	28	19	24	36.4	9.69
Hepatitis C, Acute	2	6	4	6	4.2	1.12
Hepatitis C, Chronic	17	178	222	279	239.8	63.85
Hepatitis E		1.0		1	0.2	0.05
Herpes, Congenital					0.4	0.11
Influenza A - novel virus infection					0.4	0.11
Influenza-associated hospitalization		18	140	143	**	**
LaCrosse virus disease		1	1	1	0.6	0.16
Legionellosis	1	12	4	9	14.2	3.78
Listeriosis			1	2	2.4	0.64
Lyme Disease		10	10	12	4.2	1.12
Malaria			1	1	1.2	0.32
Meningitis, Aseptic	6	22	55	63	40.8	10.86
Meningitis, Bacterial, Not Neisseria meningitidis		3	2	3	2.6	0.69
Meningococcal Disease			1	1	1.2	0.32
Mumps					0.8	0.21
Mycobacterial disease - other than tuberculosis	2	20	20	23	24	6.39
Pertussis	2	10	10	11	34	9.05
Q Fever					0	0
Rheumatic Fever					0.2	0.05
Rocky Mountain Spotted Fever (RMSF)			2	2	0.6	0.16
Salmonellosis	1	29	24	32	36.4	9.69
Shigellosis	1	3		1	50	13.31
Streptococcal Disease, Group A, Invasive	-	17	18	22	10.6	2.82
Streptococcal Disease, Group B, in Newborn			2	3	3.6	0.96
Streptococcal Toxic Shock Syndrome (STSS)			2	2	1	0.27
Streptococcus pneumoniae - invasive antibiotic resistance			1			
unknown or non-resistant	2	47	29	37	30.8	8.2
Strep. pneumo invasive antibiotic resistant/intermediate	2	11	15	17	20.2	5.38
Syphilis, Total		7	8	13	11.2	2.98
Syphilis, Primary and Secondary			4	10	4.2	1.12
Toxic Shock Syndrome (TSS)					0.6	0.16
Tuberculosis		2	1	2	2.6	0.69
Typhoid Fever		1				
Varicella	5	27	18	33	68.6	18.26
Vibriosis - other (not cholera)			1	1	0.2	0.05
West Nile Virus		1	0	0	0	0
Yersiniosis	1	2	0	0	1.2	0.32
	1.5/0.010 B		0 000			

Source: Ohio Disease Reporting System, downloaded 10/15/2012. Rates are per 100,000 population and based on 5 year average.

^{**} Historical information unavailable.