#### September – 2005

*EPI Gram* is a monthly publication of the Stark County Public Health Coalition. It is a summary of provisional communicable disease reports and other key public health indicators in Stark County, Ohio. This report includes confirmed, probable and suspect cases. Some reportable conditions may be under investigation, and at any given time, data may fluctuate from month to month for a specific disease category.

Please refer to "Case Definitions for Infectious Conditions Under Public Health Surveillance," MMWR (Morbidity and Mortality Weekly Report) 1997; 46 (No. RR-10), the Ohio Department of Health Infectious Disease Control Manual or visit www.cdc.gov/epo/dphsi/casedef/index.htm for case definitions.

Table 1 – Summary of Select Reportable Diseases for Sep 2005 in Stark County, Ohio (provisional data only)

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	Sep 2005	YTD 2005	YTD 2004	Sep 2005	YTD 2005	YTD 2004	Sep 2005	YTD 2005	YTD 2004	Sep 2005	YTD 2005	YTD 2004	Sep 2005	YTD 2005	YTD 2004	5 Year annual average
Amebiasis											1		0	1	0	0.2
Campylobacteriosis		1	2	1	14	4		1	3	1	24	20	2	40	29	54.6
Creutzfeldt-Jakob Dis											1		0	1	0	0.4
Cryptosporidiosis	1	1	1		2				1	2	4	8	3	7	10	10
E Coli 0157													0	0	0	2.6
E Coli		1	2									1	0	1	3	1.8
Enceph., WNV				1	1								1	1	0	2.8
Enceph., Other		1	1									2	0	1	3	3.2
Giardiasis	1	8	2	2	11	4	1	4	2	1	18	29	5	41	37	54.6
Haemo. Influz., Bac				2	4	3			1		2	4	2	6	8	4.6
Hepatitis A											2	1	0	2	1	10
Hepatitis B*		5	6	3	20	17		1	5	1	16	27	4	42	55	62.5
Hepatitis C*		18	14	12	105	106	1	23	15	4	72	92	17	218	227	340**
Kawasaki Syndrome		1				1						3	0	1	4	3
Legionellosis					4	3		1	1	3	6	3	3	11	7	9
Listeriosis												2	0	0	2	1.4
Lyme Disease						1					3		0	3	1	2.8
Malaria											1		0	1	0	1
Meningitis, Asep	6	13	3		3	7			2	13	26	24	19	42	36	52.6
Meningitis Bac.											1	2	0	1	2	4.4
Meningococcal Dis.												3	0	0	3	2.8
Pertussis		7		2	12	1		3	2	4	23	13	6	45	16	7.2
Salmonellosis			2	2	7	8		3	3	2	21	23	4	31	36	47.4
Shigellosis						2					4		0	4	2	11.6
Strep Inv A GAS		2			2	3					5	2	0	9	5	10.2
Strep B Newborn					2	1						2	0	2	3	1.4
Strep Pneu ISP		4	4	1	15	12		4	3		24	21	1	47	40	25
Strep TSS												2	0	0	2	0.6
Typhoid Fever			1										0	0	1	0.2
Varicella													0	0	0	**
Vibriosis												1	0	0	1	0.2
Yersinosis *This includes all benefities													0	0	0	0.8

<sup>\*</sup>This includes all hepatitis reports; acute, chronic, and status not known. \*\*Incomplete 5 yr average due to a change in reporting requirements.

Table 2 Summary of Air Quality Index, Pollen, and Mold Counts for Stark County, Ohio, including limited historical data.

·		Sep 2005			Oct 2004		
	Monthly High	Monthly Low	Monthly Mean	Monthly High	Monthly Low	Monthly Mean	Monthly Mean
Pollen Count	160	5	48	130	5	32	**
Mold Count	10,840	4,560	7,820	12,080	3,080	8,190	**
Air Quality Index	108	19	57	101	21	53	34

Pollen and Mold counts are derived from rotorod samples on the 2<sup>nd</sup> story roof of Canton City Hall. The readings are taken from a 24 hour period\24 hour avg. on all work days. \*\*Out of Season: No readings October- March The Air Quality Index (AQI) is derived by comparison to EPA standards from the following readings: Particulate Matter 10, Particulate Matter 2.5 continuous on CCHD 2<sup>nd</sup> floor roof top; Sulfur Dioxide at Malone College: and ozone monitors in Canton, Brewster, Alliance, and Middlebranch. This index is produced from March to October. AQI ratings are 151-200: unhealthy; 101-150: unhealthy for sensitive groups; 51-100: moderate; 0-50: good.

Table 3 Summary of Select Vital Statistics for Stark County, Ohio

	Alliance City Health District			Canton City Health District			Massillon City Health District			Stark County Health District			Total in Stark County		
	Sep	YTD 2005	2004	Sep	YTD 2005	2004	Sep	YTD 2005	2004	Sep	YTD 2005	2004	Sep	YTD 2005	2004
Number of Live Births*	28	296	384	539	2973	4081	0	1	4	6	138	223	573	3408	4692
Number of Teenage births*	6	46	65	60	323	379	0	0	0		17	39	66	386	483
Number of Deaths*	27	256	326	201	1633	1928	25	305	389	73	1069	1266	326	3263	3909

<sup>\*</sup>These numbers represent occurrences within the jurisdiction and are not indicative of births and deaths of residents of each jurisdiction, therefore jurisdictional rates are not computed.

The 2002 Birth Rate for Stark County was 0.01266, 0.10262 for 2003 and 0.01243 for 2004. The 2002 Death Rate for Stark County was 0.01091, 0.0111 for 2003 and 0.0104 for 2004 (crude rates are based on US Census 2000 Stark County population of 377,438).

## IN THE NEWS:

### **INFLUENZA:**

**National:** During week 41 (October 9 - October 15, 2005), influenza activity occurred at a low level in the United States. Laboratories reported 590 specimens tested for influenza viruses, and 1 (0.2%) was positive. The influenza virus identified was an influenza A virus that was not subtyped from the South Atlantic region. Also during week 41, Idaho reported local influenza activity. Eight states (Alaska, California, Florida, Hawaii, New York, North Dakota, Oregon, and Texas) and New York City reported sporadic influenza activity. Forty states (including Ohio) and the District of Columbia reported no influenza activity, and 1 state did not report.

## National Reporting Change: Influenza-Associated Pediatric Hospitalizations:

Laboratory-confirmed influenza-associated pediatric hospitalizations are monitored in two population-based surveillance networks: the Emerging Infections Program (EIP) and the New Vaccine Surveillance Network (NVSN). EIP's estimated rates of hospitalization for influenza will be reported every 2 weeks beginning October 28, 2005. NVSN's estimated rates of hospitalization for influenza will be reported every 2 weeks beginning November 25, 2005.

In years 2000-05, the end-of-season hospitalization rate for NVSN ranged from 3.7 (2002-03) to 12 (2003-04) per 10,000 children. The 2003-04 end-of-season hospitalization rate for EIP was 8.9 per 10,000 children aged 0-4 years and 0.8 per 10,000 for children aged 5-17 years. The 2004-05 NVSN end-of-season hospitalization rate for children aged 0-4 years was 7 per 10,000. The preliminary 2004-05 end-of-season hospitalization rate for EIP was 3.3 per 10,000 children aged 0-4 years and 0.6 per 10,000 for children aged 5-17 years. The difference in rates between NVSN and EIP may be due to different case-finding methods and the different populations monitored. For a summary of the methods used in each system, please refer to the surveillance methods in the <u>Flu Activity</u> section of the CDC influenza website.

**Local:** No local activity reported. Reporting The local health departments will be collecting reports (**note**: Influenza is a class B reportable condition) of influenza that will include school and medically originated reports. This data will be reported in this report and in a weekly report based on activity.

# Information Brief from the CDC: Preparing for the Next Pandemic

Many scientists believe it is only a matter of time until the next influenza pandemic occurs. The severity of the next pandemic cannot be predicted, but modeling studies suggest that the impact of a pandemic on the United States could be substantial. In the absence of any control measures (vaccination or drugs), it has been estimated that in the United States a "medium–level" pandemic could cause 89,000 to 207,000 deaths, 314,000 and 734,000 hospitalizations, 18 to 42 million outpatient visits, and another 20 to 47 million people being sick. Between 15% and 35% of the U.S. population could be affected by an influenza pandemic, and the economic impact could range between \$71.3 and \$166.5 billion.

If you have any questions, including how to receive other copies of this report, please contact Matt Tillapaw at (330) 493-9928 x287 or <u>Tillapawm@starkheatlh.org</u> or Christina Henning at (330) 489-3454 or <u>Henningc@cantonhealth.org</u>.