

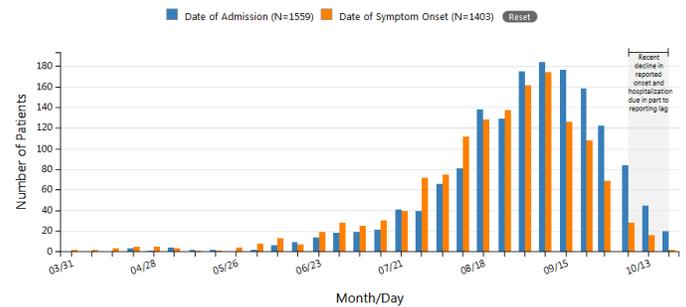
EPI Gram is a monthly publication of the Stark County Public Health Infrastructure Coalition. It contains a summary of provisional communicable disease reports and other key public health indicators, with summary tables for Stark County, Ohio. Some reportable conditions may be under investigation and, at any given time, data may fluctuate from month to month for a specific category. **If you have any questions please contact Avinash Joseph at 330.493.9914 or josepha@starkhealth.org, or Amanda Archer at 330.489.3327 or aarcher@cantonhealth.org.**



Monthly Highlight: Outbreak of Lung Injury Associated with the Use of E-Cigarette/Vaping Products

As of October 29, 2019, 1,888 cases of e-cigarette, or vaping, product use associated lung injury (EVALI) have been reported to CDC from 49 states (all except Alaska), the District of Columbia, and 1 U.S. territory. Thirty-seven deaths have been confirmed in 24 states (none in Ohio). The median age of deceased patients was 53 years and ranged from 17 to 75 years. Of the cases with data, 70% are male, median age is 24 years old (range: 13 to 75), with 79% being under 35 years. Of 867 cases with information available, nearly 86% reported using THC-containing products; 34% reported exclusive use of THC-containing products; 64% reported using nicotine-containing products; and 11% reported exclusive use of nicotine-containing products. Peak illness onset and hospital admissions were seen in September 2019. In Ohio, as of November 5th, 51 cases have been reported, along with 38 additional illness reports still under investigation. The median age is 21 years (range 15-65), 70% male, 90% hospitalized and zero deaths. Twenty one counties have reported cases. As of 10/05/2019, no cases from Stark County have been identified/reported.

Dates of symptom onset and hospital admission for patients with lung injury associated with e-cigarette use, or vaping — United States, March 31–October 26, 2019



The Ohio Department of Health (ODH) issued a health alert to healthcare providers asking them to report all suspected cases of serious pulmonary illness where the cause is unclear and includes a history of vaping to local or state public health officials for investigation. This alert was initially released in August, and updated in September to include an ODH Director’s Entry Journal requiring health care providers or any individual having knowledge, to report to their local health department (LHD) by the end of the next business day, all suspected cases of severe pulmonary disease of unclear etiology with a history of vaping in the past 90 days. Once reported, local health departments (LHD) will work with healthcare providers to complete the Clinician Report Form and obtain medical records, if necessary. LHDs will also work to interview the suspected case patient to obtain information about potential exposures related to vaping devices and products, using the ODH CDC Patient Interview Form (2019 Lung Injury Response).

According to the CDC, patient respiratory symptoms have included cough, shortness of breath, and fatigue. In some cases, symptoms worsened over a period of days or weeks and required hospitalization. Other symptoms reported by some patients included fever, chest pain, weight loss, nausea, and diarrhea. Chest radiographs show bilateral opacities, typically in the lower lobes and CT imaging of the chest shows diffuse ground glass opacities, often with subpleural sparing. Evaluation for infectious etiologies were negative in all patients. Some patients had progressive respiratory compromise requiring endotracheal intubation but subsequently improved with systemic steroids. More information can be found: [Outbreak of Lung Injury Associated with the Use of E-Cigarette, or Vaping, Products](#)

This complex investigation spans almost all states, involves over a thousand patients, and a wide variety of brands and substances and e-cigarette, or vaping, products. Case counts continue to increase and new cases are being reported, which makes it more difficult to determine the cause or causes of this outbreak. CDC recommends that you do not use e-cigarette, or vaping, products that contain THC. Additional prevention recommendations can be found [here: Prevention.](#)

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

| | Sept 2019 | | | | October 2018 | | | |
|-------------------|--------------|-------------|----------------|---|--------------|-------------|----------------|---|
| | Monthly High | Monthly Low | Monthly Median | Counts in highest reported health risk category | Monthly High | Monthly Low | Monthly Median | Counts in highest reported health risk category |
| Pollen Count | 110 | 2 | 21.5 | N/A | 9 | 0 | 0 | N/A |
| Mold Count | 6500 | 1830 | 3390 | 1 (Moderate) | 9000 | 0 | 0 | 3 (Moderate) |
| Air Quality Index | 74 | 35 | 72.5 | 6 (Moderate) | 58 | 21 | 32 | 5 (Moderate) |

**See the following websites for updated Air Quality Index and mold index terminology and color coding: <http://www.airnow.gov/index.cfm?action=aqibasics.aqi> https://pollen.aaai.org/nab/index.cfm?p=reading_charts. Data source for this table is the Air Quality Division of Canton City Public Health

Table 2 Select Vital Statistics for Stark County

| | Sept 2019 | YTD 2019 | 2018 |
|-----------------|-----------|----------|-------|
| Live Births | 308 | 3113 | 4060 |
| Births to Teens | 23 | 203 | 230 |
| Deaths | 303 | 3174 | 4230* |

* Death data are preliminary

Table 3 Stark County Crude Birth Rate and Death Rates

| | 2014 | 2015 | 2016 | 2017 | 2018 |
|-------|------|------|------|------|-------|
| Birth | 11.3 | 11.2 | 11.3 | 10.7 | 10.9 |
| Death | 11.4 | 11.6 | 11.7 | 11.9 | 11.4* |

*Source: Ohio Department of Health Data Warehouse. Rates are per 1,000 population. 2018 death data are preliminary.

| Table 4: Jurisdictional Summary of Reportable Diseases in Stark County, OH (Provisional Data) | Alliance City | | Canton City | | Massillon City | | Stark County | | All Departments | |
|---|---------------|------------|-------------|-------------|----------------|------------|--------------|-------------|-----------------|-------------|
| | Sept | YTD | Sept | YTD | Sept | YTD | Sept | YTD | Sept | YTD |
| Campylobacteriosis | 0 | 0 | 3 | 14 | 0 | 4 | 6 | 54 | 9 | 72 |
| Chlamydia infection | 8 | 109 | 71 | 618 | 22 | 142 | 47 | 527 | 148 | 1396 |
| CP-CRE | 0 | 0 | 0 | 3 | 0 | 4 | 0 | 8 | 0 | 15 |
| Creutzfeldt-Jakob Disease | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 2 |
| Cryptosporidiosis | 0 | 3 | 0 | 3 | 0 | 0 | 8 | 33 | 8 | 39 |
| Cyclosporiasis | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 3 | 0 | 4 |
| E. coli, Shiga Toxin-Producing | 0 | 0 | 0 | 3 | 1 | 3 | 2 | 6 | 3 | 12 |
| Giardiasis | 0 | 0 | 1 | 4 | 0 | 2 | 2 | 9 | 3 | 15 |
| Gonococcal infection | 1 | 23 | 32 | 244 | 4 | 44 | 8 | 116 | 45 | 427 |
| Haemophilus influenzae (invasive disease) | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 3 | 1 | 4 |
| Hemolytic uremic syndrome (HUS) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 |
| Hepatitis A | 0 | 2 | 1 | 2 | 0 | 3 | 0 | 8 | 1 | 15 |
| Hepatitis B - Perinatal Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 |
| Hepatitis B (including delta) - acute | 0 | 1 | 0 | 3 | 0 | 2 | 0 | 0 | 0 | 6 |
| Hepatitis B (including delta) - chronic | 1 | 3 | 3 | 17 | 0 | 4 | 4 | 31 | 8 | 55 |
| Hepatitis C - acute | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 0 | 2 |
| Hepatitis C - chronic | 6 | 27 | 9 | 89 | 5 | 34 | 11 | 113 | 31 | 263 |
| Hepatitis C - Perinatal Infection | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 2 |
| Hepatitis E | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 2 |
| Immigrant Investigation | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 4 | 1 | 4 |
| Influenza - ODH Lab Results | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 |
| Influenza-associated hospitalization | 1 | 16 | 0 | 116 | 0 | 32 | 1 | 250 | 2 | 414 |
| Legionellosis - Legionnaires' Disease | 0 | 1 | 1 | 7 | 1 | 3 | 1 | 7 | 3 | 18 |
| Listeriosis | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 2 |
| Lyme Disease | 0 | 1 | 0 | 2 | 0 | 1 | 0 | 37 | 0 | 41 |
| Measles - imported from outside Ohio | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 |
| Meningitis - aseptic/viral | 0 | 2 | 1 | 3 | 0 | 3 | 2 | 4 | 3 | 12 |
| Meningitis - bacterial (Not N. meningitidis) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 |
| Mumps | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 |
| Pertussis | 0 | 2 | 0 | 10 | 2 | 4 | 1 | 21 | 3 | 37 |
| Salmonellosis | 0 | 1 | 1 | 4 | 2 | 6 | 3 | 23 | 6 | 34 |
| Shigellosis | 0 | 0 | 0 | 3 | 0 | 0 | 1 | 19 | 1 | 22 |
| Streptococcal - Group A -invasive | 0 | 0 | 0 | 2 | 0 | 1 | 1 | 9 | 1 | 12 |
| Streptococcal - Group B - in newborn | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 |
| Streptococcus pneumoniae - invasive antibiotic resistance unknown or non-resistant | 0 | 1 | 1 | 4 | 0 | 0 | 0 | 12 | 1 | 17 |
| Streptococcus pneumoniae - invasive antibiotic resistant/intermediate | 0 | 2 | 0 | 1 | 0 | 2 | 0 | 3 | 0 | 8 |
| Syphilis, Total | 0 | 2 | 1 | 14 | 0 | 1 | 2 | 10 | 3 | 27 |
| Syphilis, Primary, Secondary and Early Latent | 0 | 2 | 1 | 7 | 0 | 1 | 2 | 9 | 3 | 19 |
| Tuberculosis | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 2 |
| Varicella | 0 | 0 | 1 | 7 | 0 | 2 | 2 | 10 | 3 | 19 |
| Vibriosis (not cholera) | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 2 | 0 | 3 |
| Yersiniosis | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3 | 0 | 3 |
| Total | 17 | 198 | 127 | 1185 | 37 | 300 | 107 | 1349 | 288 | 3032 |

Source: Ohio Disease Reporting System, downloaded 11/05/2019

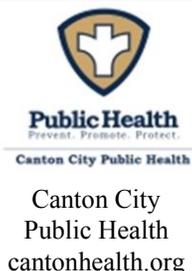


Table 5 – Summary Table of Diseases Reported in the Previous 5 years within Stark County (Provisional Data)

| | Sep-19 | Sep-18 | YTD 2019 | YTD 2018 | All of 2018 | 5 Yr Annual Average | Rate |
|---|--------|--------|----------|----------|-------------|---------------------|---------|
| Amebiasis | 0 | 0 | 0 | 0 | 0 | 0.4 | 0.107 |
| Anaplasmosis | 0 | 0 | 0 | 2 | 2 | 0.6 | 0.161 |
| Babesiosis | 0 | 0 | 0 | 2 | 2 | 0.8 | 0.214 |
| Brucellosis | 0 | 0 | 0 | 0 | 0 | 0.2 | 0.054 |
| Campylobacteriosis | 9 | 6 | 72 | 65 | 85 | 77.6 | 20.761 |
| Chlamydia | 148 | 144 | 1396 | 1266 | 1712 | 1720.0 | 460.169 |
| CP-CRE | 0 | 4 | 15 | 17 | 26 | 24.0 | 6.421 |
| Coccidioidomycosis | 0 | 0 | 0 | 0 | 0 | 0.4 | 0.107 |
| Creutzfeldt-Jakob Disease | 0 | 0 | 2 | 0 | 1 | 1.2 | 0.321 |
| Cryptosporidiosis | 8 | 3 | 39 | 27 | 33 | 33.8 | 9.043 |
| Cyclosporiasis | 0 | 0 | 4 | 8 | 8 | 3.0 | 0.803 |
| E. coli, Shiga Toxin-Producing | 3 | 1 | 12 | 13 | 17 | 14.0 | 3.746 |
| Giardiasis | 3 | 0 | 15 | 16 | 23 | 21.8 | 5.832 |
| Gonorrhea | 45 | 65 | 427 | 454 | 641 | 580.2 | 155.227 |
| Haemophilus influenzae , Invasive | 1 | 0 | 4 | 3 | 4 | 6.4 | 1.712 |
| Hemolytic Uremic Syndrome (HUS) | 0 | 0 | 1 | 0 | 0 | 0.2 | 0.054 |
| Hepatitis A | 1 | 3 | 15 | 9 | 12 | 7.6 | 2.033 |
| Hepatitis B, Perinatal | 0 | 0 | 1 | 0 | 1 | 1.8 | 0.482 |
| Hepatitis B, Acute | 0 | 2 | 6 | 9 | 11 | 6.4 | 1.712 |
| Hepatitis B, Chronic | 8 | 3 | 55 | 64 | 85 | 57.6 | 15.410 |
| Hepatitis C, Acute | 0 | 0 | 2 | 6 | 7 | 6.2 | 1.659 |
| Hepatitis C, Chronic | 31 | 21 | 263 | 238 | 300 | 313.0 | 83.740 |
| Hepatitis C - Perinatal Infection | 0 | 1 | 2 | 3 | 4 | 4.0 | 1.070 |
| Hepatitis E | 0 | 0 | 2 | 0 | 0 | 0.2 | 0.054 |
| Influenza-associated hospitalization | 2 | 2 | 414 | 582 | 595 | 379.0 | 101.398 |
| LaCrosse virus disease | 0 | 1 | 0 | 4 | 4 | 1.0 | 0.268 |
| Legionellosis | 3 | 5 | 18 | 22 | 33 | 18.0 | 4.816 |
| Listeriosis | 0 | 0 | 2 | 1 | 1 | 1.0 | 0.268 |
| Lyme Disease | 0 | 1 | 41 | 32 | 38 | 24.0 | 6.421 |
| Malaria | 0 | 0 | 0 | 0 | 0 | 0.4 | 0.107 |
| Measles - imported from outside Ohio | 0 | 0 | 1 | 0 | 0 | 0.0 | 0.000 |
| Measles (indigenous to Ohio) | 0 | 0 | 0 | 0 | 0 | 2.0 | 0.535 |
| Measles - indigenous/imported Status Not Determined | 0 | 0 | 0 | 0 | 0 | 0.0 | 0.000 |
| Meningitis, Aseptic | 3 | 3 | 12 | 34 | 46 | 34.6 | 9.257 |
| Meningitis, Other Bacterial | 0 | 1 | 1 | 4 | 4 | 3.4 | 0.910 |
| Meningococcal Disease | 0 | 0 | 0 | 0 | 0 | 1.0 | 0.268 |
| Mumps | 0 | 0 | 1 | 2 | 2 | 3.2 | 0.856 |
| Pertussis | 3 | 5 | 37 | 38 | 54 | 50.4 | 13.484 |
| Q fever, chronic | 0 | 0 | 0 | 0 | 0 | 0.2 | 0.054 |
| Salmonellosis | 6 | 9 | 34 | 45 | 61 | 47.8 | 12.788 |
| Shigellosis | 1 | 0 | 22 | 24 | 25 | 26.2 | 7.010 |
| Spotted Fever Rickettsiosis | 0 | 2 | 0 | 5 | 5 | 2.2 | 0.589 |
| Staphylococcal aureus - intermediate resistance to vancomycin (VISA) | 0 | 0 | 0 | 0 | 0 | 0.2 | 0.054 |
| Streptococcal Dis, Group A, Invasive | 1 | 1 | 12 | 24 | 25 | 15.2 | 4.067 |
| Streptococcal Dis, Group B, in Newborn | 0 | 0 | 1 | 2 | 2 | 1.6 | 0.428 |
| Streptococcal Toxic Shock Syndrome | 0 | 0 | 0 | 0 | 0 | 0.8 | 0.214 |
| Streptococcus pneumoniae - inv antibiotic resistance unknown or non-resistant | 1 | 0 | 17 | 21 | 29 | 30.6 | 8.187 |
| Streptococcus pneumo - inv antibiotic resistant/intermediate | 0 | 0 | 8 | 5 | 10 | 13.4 | 3.585 |
| Syphilis, Total | 3 | 5 | 27 | 23 | 33 | 19.4 | 5.190 |
| Syphilis, Primary, Secondary and Early Latent | 3 | 4 | 19 | 13 | 20 | 11.8 | 3.157 |
| Toxic Shock Syndrome (TSS) | 0 | 0 | 0 | 0 | 0 | 0.2 | 0.054 |
| Tuberculosis | 0 | 0 | 2 | 1 | 5 | 2.4 | 0.642 |
| Varicella | 3 | 1 | 19 | 12 | 16 | 24.2 | 6.474 |
| Vibriosis - other (not cholera) | 0 | 0 | 3 | 0 | 1 | 2.2 | 0.589 |
| Vibrio parahaemolyticus infection | 0 | 0 | 0 | 0 | 0 | 0.0 | 0.000 |
| West Nile Virus | 0 | 7 | 0 | 8 | 8 | 2.2 | 0.589 |
| Yersiniosis | 0 | 1 | 3 | 2 | 3 | 6.4 | 1.712 |
| Zika virus infection | 0 | 0 | 0 | 0 | 0 | 1.0 | 0.268 |

Source: Ohio Disease Reporting System, downloaded 11/05/2019. Rates are per 100K population and based on 5 yr average incidence '14 – '18.