



DuPage County Health Department R E V I E W

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Contact Information

Communicable Disease
(630) 682-7979, ext. 7553

Environmental Health
(630) 682-7979, ext. 7046

Immunizations
(630) 682-7400

Sexually Transmitted Diseases
(630) 682-7979, ext. 7575

HIV/AIDS
(630) 682-7979, ext. 7310

Tuberculosis
(630) 682-7522

School Health
(630) 682-7979, ext. 7300

Travel Clinic
(630) 682-7979, ext. 7590

Animal Control
(630) 407-2800

The purpose of this two-page surveillance update is to promote the control and prevention of **communicable disease (CD)** by providing clinically relevant information and resources to healthcare professionals in DuPage County.



Under the Microscope

HIV/AIDS

For questions or to report suspect or known cases of HIV/AIDS, please call the DuPage County Health Department HIV/AIDS Program at (630) 682-7979, ext. 7310.

December 1st marked the 19th observance of **World AIDS Day**, as an annual worldwide event established by the World Health Organization to increase awareness and education regarding human immunodeficiency virus (HIV) infection and acquired immunodeficiency syndrome (AIDS). The theme for this year is "Stop AIDS. Keep the Promise."¹

At the end of 2003, an estimated **1.0 - 1.2 million persons in the United States were living with HIV infection**. Of these, an estimated **25% were unaware of their infection**, underscoring a critical need to expand HIV testing.¹

To address this need, in September 2006, the Centers for Disease Control and Prevention (CDC) released **revised recommendations for HIV testing**.² These recommendations aim to **make HIV testing a routine part of medical care** and to further **improve rates of HIV diagnosis among pregnant women**. Earlier diagnosis of HIV infection will enable more persons to receive life-saving treatment, resulting in improved health and extended life. In addition, the majority of persons who learn they have HIV infection **adopt safer behaviors**, thereby **reducing HIV transmission to others**. Finally, making HIV testing a routine part of medical care might help **reduce the stigma** that some associate with an HIV test.

Key differences in the new recommendations for patients include:

- HIV screening for all patients aged **13 to 64 years in all healthcare settings** after the patient is notified that testing will be performed unless the patient declines (opt-out screening).
- HIV testing of people at high risk for HIV infection at least once a year.
- Screening should be incorporated into the general consent for medical care; separate written consent is not recommended.
- Including HIV screening in the routine panel of prenatal screening tests for all pregnant women, unless the patient declines (opt-out screening).

Several studies have demonstrated that **existing risk-based testing strategies are not sufficient in identifying HIV-infected persons**.³ While targeting HIV testing on the basis of risk behavior finds people who are infected with HIV, it also fails to identify many persons infected with HIV who are unaware they are at risk for infection, or who do not report risk behavior.³

These revised recommendations are based on the success of voluntary HIV screening in pregnant women for detecting maternal HIV infection and preventing mother-to-child transmission. Through the use of HIV screening and appropriate medical care, **the number of infants born with HIV infection decreased from a high of 1,650 HIV-infected infants born in 1991 to an estimated 144 - 236 infants born in 2002**.³ The number of estimated annual new HIV infections has remained stable at 40,000 for over a decade.³

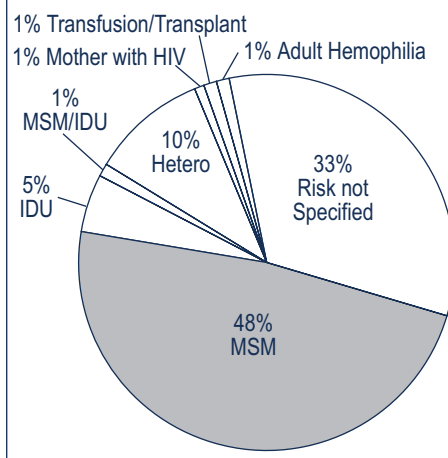
Cost-effectiveness models show that **HIV screening is cost-effective, even in healthcare settings in which HIV prevalence is low**.³ Because providers in busy healthcare settings often lack the time necessary to conduct risk assessments and explicit information regarding HIV prevalence for specific settings typically is not available, CDC's intention with its new recommendations is to decrease requirements that have been shown to be barriers to screening.

The revised HIV testing recommendations are intended for all healthcare providers in the public and private sectors, including those working in hospital emergency departments, urgent care clinics, inpatient services (including labor and delivery), substance abuse treatment clinics, public health clinics, community clinics, correctional healthcare facilities, and primary care settings.²

References:

1. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5547a1.htm>
2. <http://www.cdc.gov/hiv/topics/testing/resources/reports/pdf/rr5514.pdf>
3. http://www.cdc.gov/hiv/topics/testing/resources/qa/print/qa_professional.htm

Diagnosed HIV Cases in DuPage County by Risk Factor, 2001 - 2005 (n=146)



Please contact Peggy Iverson, BS at (630) 682-7979, ext. 7534 or piverson@dupagehealth.org to send suggestions or to be added to the distribution list.

DUPAGE COUNTY HEALTH DEPARTMENT

CASES¹ OF REPORTABLE DISEASES*

Required by the Illinois Department of Public Health (IDPH)

* Last updated July 2002

CD REVIEW

Volume 2, No. 12 December 2006

Vaccine Preventable Diseases	Report Within	2006			2005			2004		2003		2002		Median	
		Nov 2006	Jan-Nov	Jan-Nov	Jan-Nov	Total	Jan-Nov	Total	Jan-Nov	Total	Jan-Nov	Total	Jan-Nov	Total ('02-'05)	
Chickenpox in those < 20 yrs old	7 days	33	204	212	225	259	273	295	342	872	939	259	308		
Chickenpox in those ≥ 20 yrs old	24 hrs	0	8	7	7	11	13	10	10	25	28	10	12		
Diphtheria	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
<i>Haemophilus influenzae</i> , invasive disease	24 hrs	0	7	9	10	6	6	4	4	10	11	7	8		
Hepatitis A	24 hrs	0	8	8	9	24	27	20	20	11	11	11	16		
Hepatitis B	7 days	0	4	6	6	8	8	12	12	7	7	7	8		
Hepatitis B (carriers)	7 days	5	142	137	147	130	146	127	136	188	199	137	147		
Measles	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
Mumps	7 days	8	123	0	0	1	1	2	3	3	3	2	2		
<i>Neisseria meningitidis</i>	24 hrs	0	2	3	4	1	1	1	1	5	5	2	3		
Pertussis	24 hrs	1	24	26	29	123	127	12	13	10	12	24	24		
Poliomyelitis	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
Rubella	7 days	0	0	0	0	0	0	0	0	0	1	0	0		
<i>Streptococcus pneumoniae</i> , invasive disease	7 days	7	57	59	64	54	62	78	97	57	65	58	64		
Tetanus	7 days	0	0	0	0	0	0	0	0	0	0	0	0		
Amebiasis	7 days	0	1	0	0	3	3	2	2	5	5	2	3		
Anthrax	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
Blastomycosis	7 days	0	6	5	5	5	5	8	8	5	5	5	5		
Botulism, foodborne	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
Botulism, other	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
Brucellosis	7 days	0	0	0	0	0	0	0	0	1	1	0	0		
Campylobacteriosis	7 days	6	97	143	151	128	143	128	136	146	146	128	145		
Cholera	24 hrs	0	0	0	0	0	0	1	1	0	0	0	0		
Cryptosporidiosis	7 days	0	9	3	3	2	2	4	4	4	4	4	4		
Cyclosporiasis	7 days	0	0	2	2	23	23	0	0	0	0	0	1		
Diarrhea of the newborn	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
Ehrlichiosis	7 days	0	2	0	0	0	0	1	1	0	0	0	0		
Encephalitis ²	7 days	0	9	6	7	0	0	1	1	2	2	2	2		
Enteric <i>E. coli</i> infections ³	24 hrs	1	10	17	17	10	11	4	4	25	25	10	14		
Giardiasis	7 days	3	38	44	47	60	64	82	88	74	79	60	72		
Glomerulonephritis	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
Hantavirus pulmonary syndrome	7 days	0	0	0	0	0	0	0	0	0	0	0	0		
Hemolytic uremic syndrome	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
Hepatitis C (cases & carriers)	7 days	2	225	222	238	161	189	177	193	206	223	206	208		
Hepatitis, viral, other ⁴	7 days	0	0	0	0	1	1	0	0	0	0	0	0		
Histoplasmosis	7 days	0	1	0	0	5	6	1	2	4	4	1	3		
Legionnaires' disease	7 days	0	8	4	4	5	5	7	8	3	5	5	5		
Leprosy	7 days	0	1	0	0	0	0	0	0	0	0	0	0		
Leptospirosis	7 days	0	0	1	1	0	0	0	0	1	1	0	1		
Listeriosis	7 days	0	5	2	2	2	2	2	2	0	0	2	2		
Lyme disease	7 days	0	10	11	12	9	9	6	8	6	6	9	9		
Malaria	7 days	1	4	5	5	7	8	4	4	3	3	4	5		
Meningitis, aseptic ²	7 days	12	96	118	123	111	116	164	174	116	122	116	123		
Ophthalmia neonatorum	7 days	0	0	0	0	0	0	3	0	0	0	0	0		
Plague	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
Psittacosis	7 days	0	0	0	0	0	0	0	0	0	0	0	0		
Q fever ⁵	3 hrs	0	0	0	0	1	1	0	0	1	1	0	1		
Rabies, human case	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
Rabies, potential exposure	24 hrs	0	27	23	24	17	18	10	10	26	26	23	21		
Reye syndrome	7 days	0	0	0	0	0	0	0	0	0	0	0	0		
Rheumatic fever	24 hrs	0	1	1	1	0	0	0	0	0	0	0	0		
Rocky Mountain spotted fever	7 days	0	1	0	0	1	1	0	0	0	0	0	0		
Salmonellosis	7 days	4	92	114	119	100	107	96	99	104	111	100	109		
Shigellosis	7 days	1	25	33	35	15	15	43	44	42	44	33	37		
Smallpox	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
<i>Staphylococcus aureus</i> (in those < 28 days old)	7 days	0	4	3	3	4	4	2	2	1	1	3	3		
<i>Staphylococcus aureus</i> (vancomycin-resistant)	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
Streptococcal infections, group A invasive	24 hrs	2	17	6	10	14	15	18	23	12	12	14	14		
Streptococcal infections, group B invasive (in those < 3 mos old)	7 days	1	2	3	5	3	3	3	3	1	1	3	3		
Toxic shock syndrome ⁶	24 hrs	0	1	2	3	6	6	4	4	2	2	2	4		
Trichinosis	7 days	0	0	0	0	0	0	0	0	0	0	0	0		
Tuberculosis	7 days	1	45	27	29	39	46	47	62	27	32	39	39		
Tularemia	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
Typhoid fever	24 hrs	0	2	2	2	2	2	1	1	3	3	2	2		
Typhus	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0		
West Nile disease	7 days	0	42	47	47	5	5	3	3	51	51	42	26		
Yersiniosis	7 days	0	0	2	2	2	2	0	0	1	1	1	2		
STDs, HIV and AIDS															
AIDS (Jan - Sept) ⁷	7 days	---	18	23	30	16	20	20	22	19	28	19	25		
Chancroid	7 days	0	0	0	0	0	0	0	0	0	0	0	0		
Chlamydia	7 days	105	1234	1169	1215	880	948	835	939	841	904	880	944		
Gonorrhea	7 days	18	172	196	205	197	210	184	209	214	234	196	210		
HIV infection (Jan - Sept) ⁷	7 days	---	22	25	38	23	29	20	31	16	22	22	30		
Syphilis	7 days	2	23	14	15	8	9	18	18	8	10	14	13		

DuPage County healthcare providers and hospitals **must report any suspected or confirmed case of these diseases** to the local health authorities within the number of hours or days indicated.

REPORTING NUMBERS:

Communicable Diseases
(630) 682-7979, ext. 7553
24 hours: (630) 682-7400

Tuberculosis
(630) 682-7522

STDs
(630) 682-7979, ext. 7575

HIV/AIDS:
(630) 682-7979, ext. 7310

¹ Provisional cases, based on date of onset

² Excludes West Nile disease

³ O157:H7, STEC, EHEC, ETEC, EPEC

⁴ Includes hepatitis D and E

⁵ Q fever cases in 2002 and 2004 not related to any suspected bioterrorism threat or event

⁶ Includes streptococcal (reportable within 24 hours) and presumed staphylococcal (reportable within 7 days)

⁷ HIV/AIDS data are provided quarterly by IDPH and are provisional, based on date of diagnosis

Websites

CDC:
www.cdc.gov

IDPH:
www.idph.state.il.us

DuPage:
www.dupagehealth.org

Archived issues of *CD Review* are available at:

www.dupagehealth.org/health_data/cd-review.html