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General Information

Communicable Disease and Epidemiology (630) 221-7553

Environmental Health (630) 682-7400

Immunizations (630) 682-7400

Sexually Transmitted Diseases (630) 221-7553

HIV/AIDS (630) 221-7553

Tuberculosis (630) 221-7522

School Health (630) 221-7300

Travel Clinic (630) 682-7400

Animal Care & Control (630) 407-2800

Please contact
Communicable Disease
and Epidemiology at
(630) 221-7553, or
ebarajas@dupagehealth.org
to send suggestions
or to be added to the
distribution list.

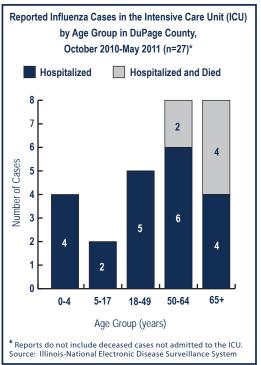
The purpose of this two-page surveillance update is to promote the control and prevention of **communicable disease (CD)** by providing clinically relevant information and resources to healthcare professionals in DuPage County.

Under the Microscope Influenza

To report a suspect or known case of influenza A, novel virus or ICU-hospitalization or pediatric death due to influenza, please contact the DuPage County Health Department at (630) 221-7553.

In the U.S., annual epidemics of influenza occur typically during the late fall through early spring. Influenza viruses can cause disease among persons in any age group, but rates of infection are highest among children, and rates of serious illness and death are highest among persons aged ≥65 years, children aged <2 years, and persons of any age who have medical conditions that place them at increased risk for complications from influenza.¹ In the U.S., on average 5% to 20% of the population develop illness from influenza and more than 200,000 people are hospitalized from seasonal flu-related complications.²

Influenza vaccination is the most effective method for preventing influenza virus infection and its potentially severe complications.³ Updates included in the 2011-2012 recommendations of the Advisory Committee on Immunization Practices (ACIP) are:



- 1. In 2010, the ACIP first recommended annual influenza vaccination for all persons aged ≥6 months in the U.S. **Vaccination of all persons aged ≥6** months continues to be recommended.⁴
- 2. The 2011–12 U.S. seasonal influenza vaccine virus strains are identical to those contained in the 2010–11 vaccine. These include A/California/7/2009 (H1N1)-like, A/Perth/16/2009 (H3N2)-like, and B/Brisbane/60/2008-like antigens. The influenza A (H1N1) vaccine virus strain is derived from a 2009 pandemic influenza A (H1N1) virus.⁴ Although influenza vaccine strains are unchanged from the previous season, annual vaccination is recommended even for those who received the vaccine for the 2010-2011 season. Several studies have demonstrated that postvaccination antibody titers decline over the course of a year.⁴
- 3. Children aged 6 months through 8 years require 2 doses of influenza vaccine (administered a minimum of 4 weeks apart) during their first season of vaccination to optimize immune response.⁴
- Considerations and an algorithm regarding vaccination of persons with egg allergy (see Figure 2, page 1131).⁴

All healthcare personnel (HCP) and persons in training for healthcare professions should be vaccinated against influenza annually, and should also follow handwashing, respiratory hygiene, and other infection control recommendations to prevent influenza transmission. Since July 2007, the Joint Commission has required accredited critical access hospitals, other hospitals, and long-term care centers to establish an annual influenza vaccination program that would, at minimum, offer onsite influenza vaccination, monitor vaccination coverage, and provide education to staff members and licensed independent practitioners. Since 2009, CDC's National Healthcare Safety Network (NHSN) has provided a web-based tool for surveillance of vaccination of HCP in

voluntarily enrolled healthcare facilities. **Beginning in 2013, the Centers for Medicaid & Medicare Services might require hospitals to report HCP influenza vaccination coverage as part of its Hospital Inpatient Quality Reporting Program.** Tracking vaccination coverage among HCP is needed as a measure of patient safety and to mark progress toward reaching the *Healthy People 2020* target of 90%.⁵

For healthcare facilities licensed by the Illinois Department of Public Health, per the Health Care Employee Vaccination Code adopted in 2009, "Each health care setting shall maintain a system to track the offer of vaccination to health care employees. The system shall include documentation that each person either accepted the offer or declined the offer by signing a declination statement pursuant to subsection (c)(2)." ⁶

Pneumococcal Vaccine

The time of administration of influenza vaccine should also be used as an opportunity to identify and vaccinate patients recommended to receive pneumococcal vaccine (e.g., children, persons who are immunocompromised, asplenic, long-term care facility residents, or with chronic illness including asthma, smokers, adults 65 years of age or older). Recommendations are available at www.cdc.gov/vaccines/vpd-vac/pneumo/default.htm.

References:

- 1. www.cdc.gov/mmwr/pdf/rr/rr5908.pdf
- 2. www.cdc.gov/flu/
- 3. www.cdc.gov/flu/professionals/vaccination/vax-summary.htm
- 4. www.cdc.gov/mmwr/pdf/wk/mm6033.pdf
- 5. www.cdc.gov/mmwr/PDF/wk/mm6032.pdf
- 6. www.ilga.gov/commission/jcar/admincode/077/07700956sections.html

DUPAGE COUNTY HEALTH DEPARTMENT

CASES¹ OF REPORTABLE DISEASES*

* Last updated by the Illinois Department of Public Health in March 2008

	Depart	20			010	20	U9	20 Ion	บช	20	10/	-	dian
Vaccine Preventable Diseases	Report Within	Aug	Jan - Aug	Jan - Aug	Total	Jan - Aug	Total ('07-'10)						
Chickenpox (varicella)	24 hrs	Aug 2		76	95	93	146	119	236	120	10tai	93	161.
Diphtheria	24 hrs	0	0	0	0	0	0	0	0	0	0	0	(
Haemophilus influenzae, invasive	24 hrs	0		5	7	7	11	2	6	4	-	5	6.8
Hepatitis A	24 hrs	1	5	2	3	3	6	10	11	15	16	5	8.8
Hepatitis B Hepatitis B (carriers)	7 days 7 days	6	1 65	71	108	5 78	8 127	90	3 128	5 121	9 167	78	127.5
nfluenza, deaths in < 18 yrs old	7 days	0	00	0	0	0	127	0	0	NR	NR	0	127.:
Measles (rubeola)	24 hrs	0		0	0	1	1	14	14	0	0	0	0.5
Mumps	24 hrs	0	2	0	2	2	2	2	2	11	13	2	2
Neisseria meningitidis, invasive	24 hrs	0	1	1	1	3	6	2	4	1	1	1	2.5
Pertussis (whooping cough)	24 hrs	16	131	33	92	14	26	6	13	7	9	14	19.5
Poliomyelitis	24 hrs	0	0	0	0	0	0	0	0	0	0	0	(
Rubella Streptococcus pneumoniae, invasive	24 hrs	U	U	U	U	0	U	U	U	U	U	U	(
disease, in those < 5 yrs old	7 days	0	9	4	8	6	8	1	6	6	10	6	8
Tetanus	7 days	0	0	0	0	0	0	0	0	0	0	0	(
Other Communicable Diseases													
Anaplasmosis ²	7 days	0	2	0	0	0	0	0	0	NR	NR	0	(
Anthrax	3 hrs	0	0	0	0	0	0	0	0	0	0	0	(
Botulism, foodborne	3 hrs	0	0	0	0	0	0	0	0	0		0	(
Botulism, other Brucellosis	24 hrs 3 hrs	0	0	0	0	0	0	0	0	1 0	1 0	0	(
California encephalitis ³	7 days	0	0	0	0	0	0	0	0	NR	NR	0	(
California encephalitis* Cholera	7 days 24 hrs	0	0	0	0	0	0	1	1	NR 0	NR 0	0	(
Creutzfeldt-Jakob disease	7 days	0	1	0	0	0	0	0	0	NR	NR	0	
Cryptosporidiosis	7 days	0	2	4	5	3	5	1	1	2	5	2	
Cyclosporiasis	7 days	0	0	0	0	1	1	0	0	0	0	0	
Dengue fever ³	7 days	0	1	3	4	2	4	0	0	1	1	1	2.
Ehrlichiosis ²	7 days	0	0	0	0	0	0	0	0	1	1	0	
Enteric <i>E. coli</i> infections ⁴	24 hrs	2	16	14	18	9	12	14	21	6	6	14	1
Giardiasis	7 days	4	31	38	49	27	40	43	53	52	62	38	5
Glomerulonephritis ⁵	24 hrs	0	0	0	0	0	0	0	0	0	0	0	
Hantavirus pulmonary syndrome	24 hrs	0	0	0	0	0	0	0	0	0	0	0	
Hemolytic uremic syndrome	24 hrs	0	2	0	0	0	0	1	1	0		0	040
Hepatitis C (cases & carriers) Hepatitis D	7 days 7 days	6	128 0	137	187 0	147	224 0	175 0	246 0	141 NR	203 NR	141	213.
Histoplasmosis	7 days	0	0	2	2	1	2	4	6	2	5	2	3.5
nfluenza A, ICU admissions	3 hrs	0	24	0	3	NR	NR	NR	NR	NR	NR	NR	NF
nfluenza A, novel virus	3 hrs	0	0	11	11	49	181	0	0	NR	NR	5.5	11
_egionellosis	7 days	1	5	9	11	7	13	2	5	8	13	7	12
_eprosy	7 days	0	0	0	0	0	0	1	1	0	0	0	(
eptospirosis	7 days	0	0	0	0	0	0	0	0	1	1	0	(
Listeriosis	7 days	1	3	3	6	2	3	0	1	1	1	2	
_yme disease ²	7 days	4	24	17	19	16	17	14	16	15	16	16	16.5
Malaria	7 days	0	1	3	4	4	4	4	4	6	7	4	4
Ophthalmia neonatorum	7 days	0	0	0	0	0	0	0	0	0	0	0	
Plague	3 hrs	0	0	0	0	0	0	0	0	0		0	(
Psittacosis	7 days	0	0	0	0	0	0	0	0	0		0	(
Q fever ⁶ Rabies, human case	3 hrs 24 hrs	0	0	0	0	0	0	0	0	0	0	0	(
Rabies, numan case Rabies, potential exposure	24 hrs	3	19	44	54	12	15	40	45	44	50	40	47.5
Reye syndrome	7 days	0	0	0	0	0	0	0	0	0	0	0	47.3
Rheumatic fever ⁵	24 hrs	0	0	0	0	0	0	0	0	0	0	0	(
Rocky Mountain spotted fever ²	7 days	0	0	0	0	0	0	0	0	0	0	0	(
Salmonellosis	7 days	11	73	97	136	62	89	74	105	100	133	74	119
Severe Acute Respiratory Syndrome	3 hrs	0	0	0	0	0	0	0	0	NR	NR	0	
Shigellosis	7 days	1	10	263	277	8	12	18	23	10	14	10	18.
Smallpox	3 hrs	0	0	0	0	0	0	0	0	0	_	0	
Smallpox vaccination, complications	24 hrs	0	_	0	0	0	0	0	0	NR	NR	0	
St. Louis encephalitis ³	7 days	0	0	0	0	0	0	0	0	NR	NR	0	
Staphylococcus aureus, methicillin													
esistant (MRSA), in those < 61 days old	24 bro	0	2	6	6	_	6	0	3	NR	NR	3.5	
< 61 days old Staphylococcus aureus, methicillin	24 hrs	0		б	б	5	р	U	3	INK	INK	3.5	
	24 6	_			_	,	ار			NIE	NID		
resistant (MRSA), community cluster ⁷ Staphylococcus aureus	24 hrs	0	0	1	1	1	1	1	4	NR	NR	1	
Stapnylococcus aureus (vancomycin-resistant)	24 hrs	1	1	1	1	0	0	0	0	0	0	0	
Streptococcal infections, group A	24 1118		1		- 1	U	U	U	U	U	U	U	
nvasive disease ⁸	24 hrs	3	23	13	20	10	14	44	16	9	44	11	1
rvasive disease ⁵ Foxic shock syndrome ⁹	7 days	0		13	20	10	14	11	16	1	11	11	0.:
richinosis	7 days 7 days	0	0	0	0	0	0	0	0	0		0	0.:
Tuberculosis	7 days	0	14	20	26	18	29	29	43	23	27	20	2
Fularemia	3 hrs	0		0	0	0	0	0	0	0		0	
Γyphoid fever	24 hrs	0	3	2	3	4	5	1	3	2		2	
Гурћиѕ	24 hrs	0	0	0	0	0	0	0	0	0		0	
/ibriosis (non-cholera)	7 days	2		1	1	1	2	0	0	1	1	1	
West Nile disease ³	7 days	0	0	6	17	0	0	1	1	5		1	5.
Yersiniosis	7 days	0		0	0	3	5	1	1	1	1	1	
STDs, HIV and AIDS													
AIDS ¹⁰ (July - September)	7 days		6	24	31	12	19	14	22	17	20	4.5	2
Chancroid	7 days	0	0	0	0	0	0	0	0	0	0	0	
Chlamydia	7 days	98	943	1057	1542	1082	1555	1022	1587	858		1022	1548.
Gonorrhea	7 days	21	152	157	223	150	225	177	268	136	251	152	238
HIV infection ¹⁰ (July - September)	7 days		9	24	29	28	40	16	23	15	22	8.5	26
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19

7 days

Syphilis

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CD REVIEW

Volume 7, No. 9 September 2011

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) 221-7553

24 hours: (630) 682-7400

Tuberculosis

(630) 221-7522

STDs

(630) 221-7553

HIV/AIDS:

(630) 221-7553

- ¹ Provisional cases, based on date of onset
- ² Listed in CD Rules and Regulations under "Tickborne Disease"
- ³ Listed in CD Rules and Regulations under "Arboviral Infections"
- ⁴ O157:H7, STEC, EIEC, ETEC, EPEC
- ⁵ Listed in CD Rules and Regulations under "Streptococcal infections, group A invasive disease sequelae"
- ⁶ Q fever case in 2004 not related to any suspected bioterrorism threat or event
- ⁷ Two or more laboratory-confirmed cases of community onset MRSA infection during a 14 day period
- ⁸ Includes streptococcal toxic shock syndrome and necrotizing fasciitis
- ⁹ Due to Staphylococcus aureus
- ¹⁰ HIV/AIDS data are provided quarterly by IDPH and are provisional, based on date of diagnosis
- NR = Not reported
- ** = Count of 5 cases or less

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/publications