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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 Services  
(630) 407-2800

Please contact  
Communicable Disease  
and Epidemiology at  
(630) 221-7553  
with 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 *Mycobacterium tuberculosis*

For questions or to report a suspect or known case of TB, please call the TB Clinic at (630) 221-7522.

**World TB Day is recognized each year on March 24.** This observance provides an opportunity to raise awareness about tuberculosis (TB) and the measures needed to find, treat, and prevent this devastating disease.<sup>1</sup> The U.S. theme for World TB Day 2019, **"It's Time! End TB"** highlights the importance of engaging and empowering public health partners, clinicians, and communities in efforts to eliminate TB.<sup>2</sup>

**Statistics:** In 2018, a provisional total of **9,029 TB cases were reported in the U.S.** (rate of 2.8 cases per 100,000 persons), a decline from the 9,094 cases reported in 2017 and the lowest number of cases on record in the U.S. since reporting began in 1953. Increased diagnosis and treatment of latent TB infection remains essential to eliminating TB in the U.S.<sup>1</sup>

In DuPage County, **50 active TB cases were provisionally reported in 2018, with an incidence of 5.37 cases per 100,000 population.** Statewide, 319 active TB cases have been provisionally reported in Illinois in 2018, with an incidence of 2.48 cases per 100,000 population.<sup>3</sup>

**Latent TB infection (LTBI)** is a condition that occurs when a person is infected with *Mycobacterium tuberculosis* without signs and symptoms, or radiographic or bacteriologic evidence of active TB disease. Nationally in 2018, approximately **half (46.3%) of TB cases in non-U.S.-born persons received a TB diagnosis ≥10 years after first arriving in the U.S.,** consistent with a published estimate that **reactivation of remotely acquired LTBI has been responsible for >80% of domestic TB cases.** Therefore, TB elimination will require a concerted effort to **enhance surveillance, detection, and treatment for LTBI among populations at increased risk.**<sup>4,5</sup>

**TB Testing:** TB testing should be performed in persons with **active TB symptoms and contacts of persons with active TB disease.** In addition, TB testing should also occur in persons at **higher risk for having latent TB infection,** such as those who 1) are **homeless,** 2) have **lived in a country with a high prevalence of TB,** 3) have **injected illegal drugs,** 4) spent time personally or professionally in a **setting associated with higher rates of TB transmission** (e.g., correctional or long-term care facilities), or 5) have **HIV infection or another condition that weakens the immune system** and puts them at high risk for active TB disease (e.g., prolonged use **immunosuppressive drug therapy**).<sup>6</sup>

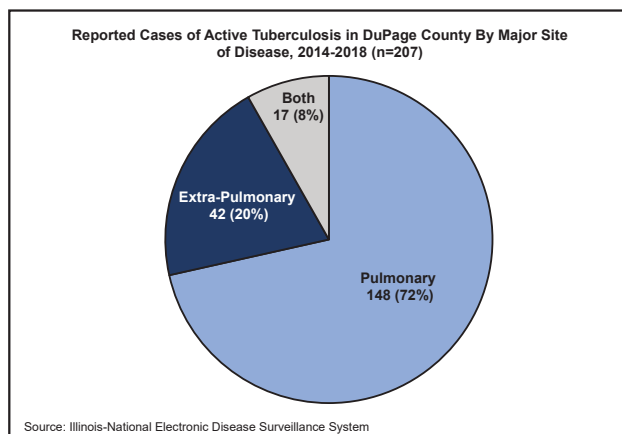
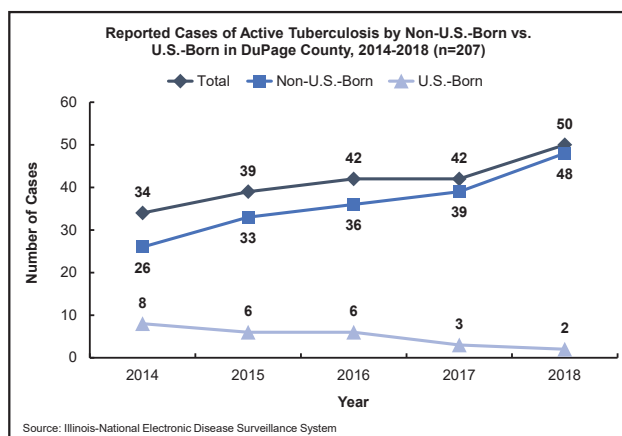
**Testing for TB in BCG-Vaccinated Persons:** Many people born outside of the U.S. have been given a vaccine called BCG. People who were previously vaccinated with BCG may receive a TB skin test to test for TB infection. Vaccination with BCG may cause a false positive reaction to a TB skin test. A positive reaction to a TB skin test may be due to the BCG vaccine itself or due to infection with TB bacteria.<sup>7</sup>

**TB blood tests (interferon-gamma release assays or IGRAs), unlike the TB skin test, are not affected by prior BCG vaccination and are not expected to give a false-positive result in people who have received BCG.** TB blood tests are the **preferred method of TB testing for people who have received the BCG vaccine.**<sup>7</sup>

**TB Elimination:** Between 3.1% and 5.0% of the U.S. population has LTBI. **Without treatment, 5%–10% of persons with LTBI will develop TB disease in their lifetime.** Centers for Disease Control and Prevention (CDC) and the U.S. Preventive Services Task Force **recommend testing populations that are at increased risk for TB,** including persons born in or who frequently travel to countries where TB is prevalent and persons who currently live, or previously lived, in congregate settings. CDC also recommends testing for TB in health care workers and others who work in places where there is a high risk of TB transmission, persons who are contacts of a person with infectious TB disease, and immunocompromised persons, who have a higher risk for developing TB disease once infected. In addition, the adoption of **shorter, safer, and more convenient LTBI treatment regimens** continues to be critical in improving treatment initiation and completion. In addition to timely diagnosis and treatment of persons with active TB, **focusing on populations that are at increased risk for latent TB infection will be important in achieving TB elimination.**<sup>4</sup>

### References:

1. [www.cdc.gov/mmwr/volumes/68/wr/mm6811a1.htm](http://www.cdc.gov/mmwr/volumes/68/wr/mm6811a1.htm)
2. [www.cdc.gov/tb/worldtbdays/](http://www.cdc.gov/tb/worldtbdays/)
3. [www.dph.illinois.gov/sites/default/files/2018%20TB%20Rate%20Map.pdf](http://www.dph.illinois.gov/sites/default/files/2018%20TB%20Rate%20Map.pdf)
4. [www.cdc.gov/mmwr/volumes/68/wr/mm6811a2.htm?s\\_cid=mm6811a2\\_w](http://www.cdc.gov/mmwr/volumes/68/wr/mm6811a2.htm?s_cid=mm6811a2_w)
5. [www.cdc.gov/tb/publications/tbi/default.htm](http://www.cdc.gov/tb/publications/tbi/default.htm)
6. [www.cdc.gov/tb/topic/testing/default.htm](http://www.cdc.gov/tb/topic/testing/default.htm)
7. [www.cdc.gov/tb/topic/testing/testingbcgvaccinated.htm](http://www.cdc.gov/tb/topic/testing/testingbcgvaccinated.htm)



**DUPAGE COUNTY HEALTH DEPARTMENT**  
**CASES<sup>1</sup> OF REPORTABLE DISEASES\***

\* Last updated by the Illinois Department of Public Health, effective January 1, 2019.

**CD REVIEW**  
Volume 15, No. 3 March 2019

	Report Within	2019		2018		2017		2016		2015		Median	
		Feb	Jan-Feb	Jan-Feb	Total	Jan-Feb	Total	Jan-Feb	Total	Jan-Feb	Total	Jan-Feb	Total ('15-'18)
<b>Vaccine Preventable Diseases</b>													
Chickenpox (varicella)	24 hrs	5	11	8	42	4	35	11	56	8	36	8	39
Diphtheria	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
<i>Haemophilus influenzae</i> , invasive	24 hrs	1	2	3	16	3	9	2	13	2	15	2	14
Hepatitis A	24 hrs	1	1	1	6	2	3	0	2	0	5	1	4
Hepatitis B (acute, chronic, perinatal)	7 days	8	26	19	92	22	100	18	124	25	139	19	112
Influenza, deaths in < 18 yrs old	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Influenza, ICU admissions	24 hrs	16	27	95	126	36	121	27	69	19	43	27	95
Measles (rubeola)	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Mumps	24 hrs	0	0	3	12	1	8	3	11	1	8	1	9.5
<i>Neisseria meningitidis</i> , invasive	24 hrs	0	0	0	0	0	0	0	1	0	1	0	0.5
Pertussis (whooping cough)	24 hrs	2	5	6	33	3	36	11	105	6	49	6	42.5
Poliomyelitis	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Rubella	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
<i>Streptococcus pneumoniae</i> , invasive disease, in those < 5 yrs old	7 days	0	0	2	6	0	1	0	2	0	0	0	1.5
Tetanus	7 days	0	0	0	0	0	0	0	0	0	0	0	0
<b>Other Communicable Diseases</b>													
Anaplasmosis	7 days	0	0	0	0	0	1	0	1	0	3	0	1
Anthrax	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Arboviral Disease (other and unspecified) <sup>2</sup>	7 days	0	0	0	0	0	2	1	1	0	0	0	0.5
Babesiosis	7 days	0	0	0	1	0	0	0	1	0	0	0	0.5
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	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Campylobacteriosis	7 days	12	25	14	160	20	161	21	173	NR	NR	17	161
Chikungunya virus disease	7 days	0	0	0	2	0	0	0	4	0	2	0	2
Cholera	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Cryptosporidiosis	7 days	0	4	7	31	1	18	2	18	1	5	1	18
Cyclosporiasis	7 days	0	0	0	141	0	7	0	5	0	1	0	6
Dengue virus infection	7 days	0	0	0	2	0	1	0	3	0	3	0	2.5
Ehrlichiosis	7 days	0	0	0	0	0	0	0	2	0	1	0	0.5
Enteric <i>E. coli</i> infections <sup>3</sup>	24 hrs	2	4	4	39	3	23	4	24	2	14	3	23.5
Hantavirus pulmonary syndrome	24 hrs	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 (acute, chronic, perinatal)	7 days	13	30	34	188	40	294	50	255	42	237	40	246
Hepatitis D	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Histoplasmosis	7 days	1	1	1	6	3	9	2	8	0	3	1	7
Influenza A, novel virus	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Legionellosis	7 days	0	2	0	37	2	28	1	34	0	18	0	31
Leptospirosis	7 days	0	0	0	0	0	1	0	0	0	0	0	0
Listeriosis	7 days	0	0	0	0	0	4	0	0	0	2	0	1
Lyme disease	7 days	0	0	2	27	2	36	1	34	1	30	1	32
Malaria	7 days	0	0	1	4	0	3	4	10	0	4	0	4
Ophthalmia neonatorum	7 days	0	0	0	0	0	0	0	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	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Rabies, animal case	24 hrs	0	0	0	8	0	12	0	10	0	16	0	11
Rabies, human case	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Rabies, potential exposure	24 hrs	1	3	12	167	0	84	2	59	2	73	2	78.5
Spotted fever rickettsiosis	7 days	0	0	0	2	0	1	0	3	0	0	0	1.5
Salmonellosis	7 days	8	14	8	118	8	104	10	118	15	131	8	118
<i>Salmonella</i> Paratyphi infection <sup>4</sup>	24 hrs	0	1	2	2	0	1	0	1	1	2	0	1.5
<i>Salmonella</i> Typhi infection	24 hrs	0	0	2	4	1	4	0	0	1	3	1	3.5
Severe Acute Respiratory Syndrome	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Shigellosis	7 days	1	2	2	10	1	14	5	21	3	27	2	17.5
Smallpox	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Smallpox vaccination, complications	24 hrs	0	0	0	1	0	0	0	0	0	0	0	0
<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 disease <sup>5</sup>	24 hrs	2	5	11	33	7	24	5	18	6	22	6	23
Toxic shock syndrome <sup>6</sup>	7 days	0	0	1	1	0	0	0	0	0	0	0	0
Trichinosis	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis	7 days	3	5	4	50	5	42	5	42	2	39	4	42
Tularemia	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Typhus	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Vibriosis (non-cholera)	7 days	0	1	2	14	2	6	0	6	0	4	0	6
West Nile virus disease	7 days	0	0	0	18	0	6	0	10	0	9	0	9.5
Zika virus disease	7 days	0	0	0	1	0	1	0	11	NR	NR	0	1
<b>STDs, HIV and AIDS</b>													
AIDS <sup>7</sup> (January - March)	7 days	--	--	1	15	4	12	8	12	4	13	4	12.5
Chancroid	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Chlamydia	7 days	100	274	395	2397	361	2495	412	2417	347	2382	361	2407
Gonorrhea	7 days	23	44	57	415	63	451	58	390	55	307	57	402.5
HIV infection <sup>7,8</sup> (January - March)	7 days	--	--	5	24	12	39	12	43	14	56	12	41
Syphilis <sup>9</sup>	7 days	1	7	13	58	11	55	11	59	4	42	11	56.5
<b>Outbreaks<sup>10</sup></b>													
Foodborne	24 hrs	0	0	0	6	0	2	0	3	1	3	0	3
Waterborne	24 hrs	0	0	0	0	0	0	0	1	0	0	0	0
Person to Person	24 hrs	9	21	43	80	27	66	23	47	18	53	23	59.5
Other and Unspecified	24 hrs	0	0	0	1	0	0	0	0	0	0	0	0

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

<sup>1</sup> Provisional cases, based on date of onset

<sup>2</sup> Including, but not limited to, California serogroup virus diseases, Eastern equine encephalitis virus disease, Powassan virus disease, St. Louis encephalitis virus disease, Western equine encephalitis virus disease, and yellow fever. Chikungunya virus disease, dengue virus infection, West Nile virus disease, and Zika virus disease are listed individually.

<sup>3</sup> O157:H7, STEC

<sup>4</sup> *Salmonella enterica* serotypes Paratyphi A, B [tartrate negative], and C

<sup>5</sup> Includes streptococcal toxic shock syndrome and necrotizing fasciitis

<sup>6</sup> Due to *Staphylococcus aureus*

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

<sup>8</sup> HIV counts reflect all newly diagnosed HIV cases regardless of stage of disease at diagnosis.

<sup>9</sup> Cases are provisional, based on test date per local health department investigation.

<sup>10</sup> Listed based on report submission date

NR = Not reported

**Websites**

**CDC:**  
[www.cdc.gov](http://www.cdc.gov)

**IDPH:**  
[www.dph.illinois.gov](http://www.dph.illinois.gov)

**DuPage:**  
[www.dupagehealth.org](http://www.dupagehealth.org)

Archived issues of *CD Review* are available at:  
[www.dupagehealth.org/publications](http://www.dupagehealth.org/publications)