



DuPage County Health Department R E V I E W

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General Information

Communicable Disease
and Epidemiology
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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 HIV/AIDS

For questions or to report suspect or known cases of HIV/AIDS, please call the DuPage County Health Department (DCHD) at (630) 221-7553.

Free rapid HIV testing and pre-exposure prophylaxis (PrEP) are offered at the DCHD STD Clinic. For an appointment, please call (630) 682-7400.

World AIDS Day, observed annually on **December 1**, draws attention to the status of the human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) epidemic. Approximately 37.9 million persons worldwide are living with HIV infection, including 1.7 million persons newly infected in 2018. The first cases of AIDS were reported in 1981. In 2017, an estimated **1,020,419 persons in the U.S.** and dependent areas were living with diagnosed HIV infection; **37,832 new cases** were diagnosed in 2018.¹

This year's theme, **Ending the HIV/AIDS Epidemic: Community by Community**, draws attention to the importance of tailoring efforts for, by, and in communities.² The most successful efforts adapt to the needs of those affected by HIV, which is how Centers for Disease Control and Prevention (CDC) continues to be at the forefront of innovations in **screening** for new infections, **treating** those with HIV, and **preventing** AIDS-related deaths.² People with HIV who **take HIV medicine as prescribed** and **get and keep an undetectable viral load** have **effectively no risk of transmitting HIV to their HIV-negative sexual partners.**³

A proposed national initiative, **Ending the HIV Epidemic: A Plan for America**, incorporates three strategies (diagnose, treat, and prevent HIV infection) and **seeks to leverage testing, treatment, and pre-exposure prophylaxis (PrEP) to reduce new HIV infections in the U.S. by at least 90% by 2030.**⁴

Effective HIV prevention and treatment occurs **across a continuum of care**. This comprehensive approach spanning from HIV screening to treatment can help **reduce new HIV infections and improve health outcomes among people with HIV (PWH)**. The **CDC HIV Nexus** is a one-stop location for clinicians, including up-to-date tools and guidelines for your practice, and educational materials for your patients: www.cdc.gov/hiv/clinicians/index.html

HIV Testing: CDC recommends that **everyone between the ages of 13 and 64 years get tested for HIV at least once** as part of routine health care. For those with specific **risk factors**, CDC recommends getting **tested once a year**. Persons likely to be at **high risk include:**

- **injection-drug users** and their **sex partners**,
- persons who **exchange sex for money or drugs**,
- persons diagnosed with **viral hepatitis or tuberculosis (TB)**,
- persons diagnosed with or who sought treatment for **another sexually transmitted disease**,
- **sex partners of HIV-infected persons**, and
- **men who have sex with men (MSM)** or **heterosexual persons who themselves or whose sex partners have had more than one sex partner** since their most recent HIV test.^{5,6}

Additionally, CDC has recently reported that **gay and bisexual men may benefit from getting an HIV test more often, perhaps every 3-6 months.**^{6,7} Pregnant women in the U.S. should be screened for HIV infection as part of their **routine prenatal testing.**^{5,6}

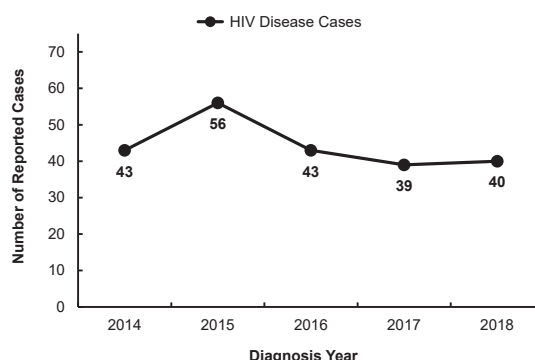
In June 2014, CDC published **updated recommendations with a new approach for HIV testing in laboratories** that capitalizes on the latest technology to improve diagnosis of acute infection, the earliest stage of HIV infection when people are most likely to transmit the virus. Laboratories should conduct **initial testing** for HIV with an FDA-approved antigen/antibody combination (**4th generation**) immunoassay, which can **diagnose people several weeks earlier than previous tests.**⁸

Prevention: In addition to limiting the number of sexual partners, never sharing needles, and using condoms correctly and consistently, CDC also encourages people who are at high risk but do not have HIV to be aware of **new approaches to HIV prevention**, such as **pre-exposure prophylaxis (PrEP)** and **post-exposure prophylaxis (PEP).**^{9,10} By routinely testing patients for HIV, assessing HIV-negative patients for risk behaviors, and prescribing PrEP as needed, **clinicians can play a critical role in ending the HIV epidemic.**^{11,12}

References:

1. www.cdc.gov/mmwr/volumes/68/wr/pdfs/mm6847-H.pdf
2. www.cdc.gov/features/worldaidsday/index.html
3. www.cdc.gov/hiv/risk/art/index.html
4. www.cdc.gov/vitalsigns/test-treat-prevent/index.html
5. www.cdc.gov/hiv/basics/testing.html
6. www.cdc.gov/hiv/clinicians/screening/index.html
7. www.cdc.gov/mmwr/volumes/66/wr/mm6631a3.htm
8. www.cdc.gov/hiv/guidelines/testing.html
9. www.cdc.gov/hiv/basics/prevention.html
10. www.cdc.gov/hiv/clinicians/prevention/index.html
11. www.cdc.gov/mmwr/volumes/68/wr/mm6827a1.htm
12. www.cdc.gov/hiv/clinicians/prevention/prep-and-pep.html

Reported HIV Disease* Cases in DuPage County by Year
2014-2018 (n=221)



*HIV disease incidence, prevalence, mortality and late diagnosis counts include all cases of HIV infection (including AIDS), regardless of the stage of HIV disease.
Source: Illinois Department of Public Health (IDPH), HIV/AIDS Surveillance Unit.

DUPAGE COUNTY HEALTH DEPARTMENT
CASES¹ OF REPORTABLE DISEASES*

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

CD REVIEW
 Volume 15, No. 12 December 2019

	Report Within	2019		2018		2017		2016		2015		Median	
		Nov	Jan- Nov	Jan- Nov	Total	Jan- Nov	Total	Jan- Nov	Total	Jan- Nov	Total	Jan- Nov	Total (*15-'18)
Vaccine Preventable Diseases													
Chickenpox (varicella)	24 hrs	4	43	36	42	27	35	54	56	31	36	31	39
Diphtheria	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
<i>Haemophilus influenzae</i> , invasive	24 hrs	3	13	15	16	8	9	10	13	14	15	10	14
Hepatitis A	24 hrs	0	8	6	6	2	3	2	2	5	5	2	4
Hepatitis B (acute, chronic, perinatal)	7 days	6	114	88	93	93	100	106	124	125	139	93	112
Influenza, deaths in < 18 yrs old	7 days	0	1	0	0	0	0	0	0	0	0	0	0
Influenza, ICU admissions	24 hrs	1	82	115	125	77	121	65	69	38	40	65	95
Measles (rubeola)	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Mumps	24 hrs	0	5	11	12	8	8	10	11	6	8	8	9.5
<i>Neisseria meningitidis</i> , invasive	24 hrs	0	0	0	0	0	0	1	1	1	1	0	0.5
Pertussis (whooping cough)	24 hrs	7	53	29	34	32	36	96	105	35	49	32	42.5
Poliovirus	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	3	3	6	1	1	2	2	0	0	1	1.5
Tetanus	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Other Communicable Diseases													
Anaplasmosis	7 days	0	0	0	0	1	1	1	1	3	3	1	1
Anthrax	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Arboviral Disease (other and unspecified) ²	7 days	0	0	0	0	1	2	1	1	0	0	0	0.5
Babesiosis	7 days	0	0	1	1	0	0	1	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	1	0	0	0	0	0	0	0	0	0	0
Campylobacteriosis	7 days	27	178	154	160	157	161	166	173	NR	NR	155.5	161
Chikungunya virus disease	7 days	0	0	2	2	0	0	3	4	2	2	2	2
Cholera	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Cryptosporidiosis	7 days	4	38	31	31	18	18	17	18	4	5	17	18
Cyclosporiasis	7 days	0	17	141	141	7	7	4	5	1	1	4	6
Dengue virus infection	7 days	2	4	2	2	1	1	2	3	3	3	2	2.5
Ehrlichiosis	7 days	0	0	0	0	0	0	2	2	1	1	0	0.5
Enteric <i>E. coli</i> infections ³	24 hrs	14	51	37	39	22	23	24	24	13	14	22	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	15	200	180	190	267	294	237	255	223	237	223	246
Hepatitis D	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Histoplasmosis	7 days	0	6	6	6	9	9	8	8	3	3	6	7
Influenza A, novel virus	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Legionellosis	7 days	2	61	35	37	27	28	30	34	17	18	27	31
Leptospirosis	7 days	0	0	0	0	1	1	0	0	0	0	0	0
Listeriosis	7 days	0	2	0	0	4	4	0	0	2	2	0	1
Lyme disease	7 days	2	37	27	27	35	36	33	34	30	30	30	32
Malaria	7 days	1	3	4	4	2	3	10	10	4	4	4	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	9	8	8	12	12	10	10	16	16	10	11
Rabies, human case	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Rabies, potential exposure	24 hrs	4	105	159	167	78	84	55	59	70	73	70	78.5
Spotted fever rickettsiosis	7 days	0	0	2	2	1	1	3	3	0	0	1	1.5
Salmonellosis	7 days	12	103	111	118	99	104	115	118	124	131	111	118
<i>Salmonella</i> Paratyphi infection ⁴	24 hrs	0	1	2	2	1	1	1	1	2	2	1	1.5
<i>Salmonella</i> Typhi infection	24 hrs	0	2	3	4	3	4	0	0	2	3	2	3.5
Severe Acute Respiratory Syndrome	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Shigellosis	7 days	0	23	10	10	14	14	20	21	22	27	14	17.5
Smallpox	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Smallpox vaccination, complications	24 hrs	0	0	1	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 ⁵	24 hrs	3	30	30	33	22	24	17	18	20	22	20	23
Toxic shock syndrome ⁶	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	2	36	45	50	29	42	35	42	25	39	29	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	10	14	14	6	6	6	6	4	4	6	6
West Nile virus disease	7 days	0	6	18	18	6	6	10	10	9	9	9	9.5
Zika virus disease	7 days	0	0	1	1	1	1	11	11	NR	NR	1	1
STDs, HIV and AIDS													
AIDS ⁷ (October - December)	7 days	--	9	19	19	12	12	12	12	13	13	12.5	12.5
Chancroid	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Chlamydia	7 days	74	1675	2323	2545	2301	2495	2239	2417	2169	2382	2239	2456
Gonorrhea	7 days	20	358	407	443	410	451	359	390	281	307	359	416.5
HIV disease ^{7,8} (October - December)	7 days	--	29	40	40	39	39	43	43	56	56	41.5	41.5
Syphilis ⁹	7 days	0	43	67	73	48	55	55	59	35	42	48	57
Outbreaks¹⁰													
Foodborne	24 hrs	0	5	3	5	2	2	2	3	3	3	2	3
<i>Foodborne Outbreak Cases</i>		0	219	83	121	114	114	10	22	43	43	43	78.5
Waterborne	24 hrs	1	1	0	0	0	0	1	1	0	0	0	0
<i>Waterborne Outbreak Cases</i>		2	2	0	0	0	0	2	2	0	0	0	0
Person to Person	24 hrs	4	49	68	77	49	64	41	47	41	48	41	56
<i>Person to Person Outbreak Cases</i>		115	854	954	1156	593	1219	800	989	531	669	593	1072.5
Other and Unspecified	24 hrs	0	1	0	0	0	0	0	0	0	0	0	0
<i>Other and Unspecified Outbreak Cases</i>		0	15	0	0	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

¹ Provisional cases, based on date of onset

² 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.

³ O157:H7, STEC

⁴ *Salmonella enterica* serotypes Paratyphi A, B [tartrate negative], and C

⁵ Includes streptococcal toxic shock syndrome and necrotizing fasciitis

⁶ Due to *Staphylococcus aureus*

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

⁸ HIV disease counts reflect all newly diagnosed HIV cases (including AIDS) regardless of stage of disease at diagnosis.

⁹ Cases are provisional, based on test date per local health department investigation. Includes syphilis cases staged as primary, secondary, or early non-primary non-secondary.

¹⁰ Listed based on report submission date

NR = Not reported

Websites

CDC:
www.cdc.gov

IDPH:
www.dph.illinois.gov

DuPage:
www.dupagehealth.org

Archived issues of *CD Review* are available at:
www.dupagehealth.org/248/Surveillance-Reports-and-Resources