



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.



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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

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Communicable Disease
and Epidemiology at
(630) 221-7553 or
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to send suggestions
or to be added to the
distribution list.



Under the Microscope HIV/AIDS

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

World AIDS Day (December 1) draws attention to the current status of the human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) epidemic worldwide. The theme for this year's December 1 observance is "Shared Responsibility: Strengthening Results for an AIDS-Free Generation."¹

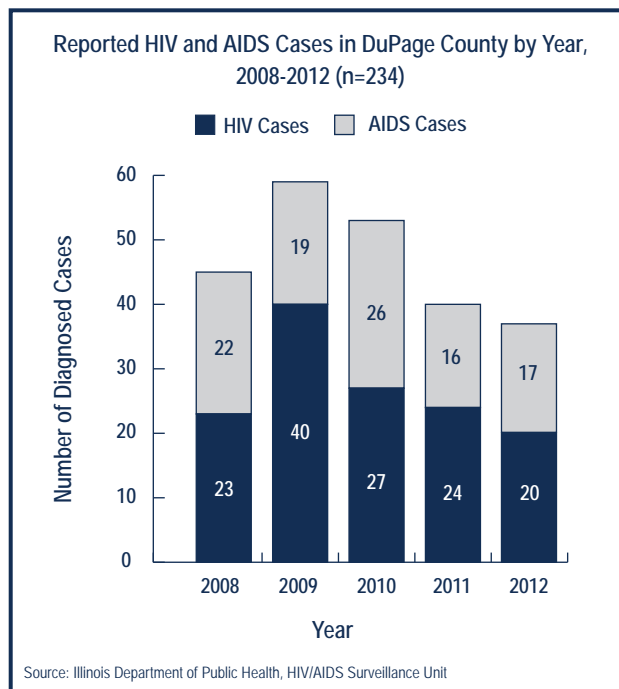
Since the first cases of AIDS were reported in June 1981, the epidemic has claimed the lives of approximately 36 million persons worldwide; an estimated 35.3 million persons continue to live with HIV infection.¹ In the U.S., approximately 636,000 persons diagnosed with AIDS have died since the first cases were reported 32 years ago; an estimated 1.1 million persons in the U.S. are living with HIV infection.¹

According to 2008-2011 CDC surveillance data, the annual estimated numbers and the estimated rates of diagnoses of HIV infection and AIDS in the U.S. remained stable.² Estimated numbers and rates of diagnoses, however, increased in some subgroups and decreased in others. For example, the rates of HIV infection diagnoses for persons aged 20-24 years and 25-29 years increased, and decreased among older age groups. From 2008 through 2011, the rate for Asians increased; however, the rates for blacks/African Americans, Hispanics/Latinos, Native Hawaiians/other Pacific Islanders, and persons of multiple races decreased.²

Variations in trends among groups are expected and may be due to differences in testing behaviors, targeted HIV testing initiatives, more streamlined surveillance practices in some jurisdictions, and possible changes in the numbers of new HIV infections in some subgroups.²

According to 2009-2011 CDC surveillance data, a disproportionate number of new HIV infections occurs among youths, especially blacks/African Americans, Hispanics/Latinos, and men who have sex with men (MSM). The percentage of youths tested for HIV, however, was low, particularly among males.³

HIV causes a chronic infection that leads to a progressive disease. Without treatment, most persons with HIV develop AIDS within 10 years of infection, which results in substantial morbidity and premature death. With appropriate medical care, a consistently suppressed HIV viral load is associated with reduced morbidity and mortality and a lower probability of transmitting HIV to sex partners.⁴



HIV testing identifies infected persons and is the entry point to a continuum of HIV health care and social services that improve health outcomes, including survival. This continuum includes diagnosis (HIV testing), linkage to and retention in continuous medical care for HIV, prevention counseling and other services that reduce transmission, and appropriately timed and consistent antiretroviral therapy (ART) for viral suppression.⁴

Since 2006, CDC has recommended that adults and adolescents between the ages of 13 and 64 years of age be routinely screened for HIV infection in healthcare settings.⁵ Pregnant women in the U.S. should be screened for HIV infection as part of their routine prenatal testing.⁵

Once tested and HIV status is known, individuals can take steps to protect their health through risk reduction or, if infected, they can gain access to clinical care, and help prevent the spread of HIV to others. 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.⁶

References:

1. www.cdc.gov/mmwr/pdf/wk/mm6247.pdf
2. www.cdc.gov/hiv/pdf/statistics_2011_HIV_Surveillance_Report_vol_23.pdf
3. www.cdc.gov/mmwr/PDF/wk/mm6147.pdf
4. www.cdc.gov/mmwr/pdf/wk/mm6047.pdf
5. www.cdc.gov/mmwr/pdf/rr/rr5514.pdf
6. www.cdc.gov/hiv/testing/clinical/index.html

**DUPAGE COUNTY HEALTH DEPARTMENT
CASES¹ OF REPORTABLE DISEASES***

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

CD REVIEW
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Vaccine Preventable Diseases	Report Within	2013		2012		2011		2010		2009		Median	
		Nov	Jan-Nov	Jan-Nov	Total	Jan-Nov	Total	Jan-Nov	Total	Jan-Nov	Total	Jan-Nov	Total ('09-'12)
Chickenpox (varicella)	24 hrs	9	71	92	93	69	82	87	95	138	146	87	94
Diphtheria	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Haemophilus influenzae, invasive	24 hrs	1	9	9	11	14	15	7	7	9	11	9	11
Hepatitis A	24 hrs	0	4	7	8	6	8	3	3	6	6	6	7
Hepatitis B	7 days	0	3	4	5	0	0	3	4	7	8	3	4.5
Hepatitis B (carriers)	7 days	9	101	90	97	105	113	103	108	114	127	103	110.5
Influenza, deaths in < 18 yrs old	7 days	0	1	0	0	0	0	0	0	1	1	0	0
Influenza ICU admissions	24 hrs	0	57	13	59	24	24	0	3	NR	NR	18.5	24
Measles (rubeola)	24 hrs	0	0	0	0	0	0	0	0	1	1	0	0
Mumps	24 hrs	0	0	1	1	2	3	1	2	2	2	1	2
Neisseria meningitidis, invasive	24 hrs	0	0	0	0	2	2	1	1	5	6	1	1.5
Pertussis (whooping cough)	24 hrs	1	39	192	195	231	268	75	92	23	26	75	143.5
Poliomyelitis	24 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
Streptococcus pneumoniae, invasive disease, in those < 5 yrs old	7 days	0	4	5	5	13	13	7	8	8	8	7	8
Tetanus	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Other Communicable Diseases													
Anaplasmosis ²	7 days	0	0	2	2	3	3	0	0	0	0	0	1
Anthrax	3 hrs	0	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	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
California encephalitis ³	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Cholera	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Creutzfeldt-Jakob disease	7 days	0	0	1	1	2	3	1	1	0	0	1	1
Cryptosporidiosis	7 days	1	6	2	2	5	5	5	5	4	5	5	5
Cyclosporiasis	7 days	0	4	0	0	0	0	0	0	1	1	0	0
Dengue fever ³	7 days	0	2	1	1	1	1	4	4	4	4	2	2.5
Ehrlichiosis ²	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Enteric E. coli infections ⁴	24 hrs	1	53	18	18	21	22	18	18	11	12	18	18
Giardiasis	7 days	1	30	32	34	42	44	45	49	36	40	36	42
Glomerulonephritis ⁵	24 hrs	0	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	0
Hemolytic uremic syndrome	24 hrs	0	0	1	1	1	1	0	0	0	0	0	0.5
Hepatitis C (cases & carriers)	7 days	10	159	170	171	175	189	175	187	202	213	175	188
Hepatitis D	7 days	0	0	0	0	1	1	0	0	0	0	0	0
Histoplasmosis	7 days	0	0	2	2	1	1	2	2	2	2	2	2
Influenza A, novel virus	3 hrs	0	0	0	0	0	0	11	11	172	181	0	5.5
Legionellosis	7 days	2	38	24	25	11	14	11	11	13	13	13	13.5
Leprosy	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Leptospirosis	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Listeriosis	7 days	1	2	2	2	2	2	6	6	3	3	2	2.5
Lyme disease ²	7 days	0	39	27	27	32	32	19	19	18	18	27	23
Malaria	7 days	0	7	2	2	7	7	4	4	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 ⁶	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Rabies, human case	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Rabies, potential exposure	24 hrs	0	44	43	43	30	30	54	54	15	15	43	36.5
Reye syndrome	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Rheumatic fever ⁵	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Rocky Mountain spotted fever ²	7 days	0	0	1	1	0	0	0	0	0	0	0	0
Salmonellosis	7 days	6	122	120	123	89	95	129	136	82	89	120	109
Severe Acute Respiratory Syndrome	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Shigellosis	7 days	2	18	20	20	20	22	270	277	12	12	20	21
Smallpox	3 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Smallpox vaccination, complications	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
St. Louis encephalitis ³	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Staphylococcus aureus, methicillin resistant (MRSA), in those < 61 days old	24 hrs	1	3	7	7	3	3	6	6	6	6	6	6
Staphylococcus aureus, methicillin resistant (MRSA), community cluster ⁷	24 hrs	0	0	1	1	0	0	1	1	1	1	1	1
Staphylococcus aureus (vancomycin-resistant)	24 hrs	0	0	0	0	1	1	1	1	0	0	0	0.5
Streptococcal infections, group A invasive disease ⁸	24 hrs	2	21	18	20	28	30	16	20	14	14	18	20
Toxic shock syndrome ⁹	7 days	0	1	0	0	1	1	0	0	0	0	0	0
Trichinosis	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis	7 days	5	30	21	26	15	18	22	26	23	29	22	26
Tularemia	3 hrs	0	0	1	1	0	0	0	0	0	0	0	0
Typhoid fever	24 hrs	2	2	2	2	3	3	3	3	5	5	3	3
Typhus	24 hrs	0	0	0	0	0	0	0	0	0	0	0	0
Vibriosis (non-cholera)	7 days	0	2	4	4	3	3	1	1	2	2	2	2.5
West Nile disease ³	7 days	0	6	56	56	2	2	17	17	0	0	6	9.5
Yersiniosis	7 days	0	2	3	3	2	3	0	0	5	5	2	3
STDs, HIV and AIDS													
AIDS ¹⁰ (October - December)	7 days	--	15	12	17	13	16	24	26	12	19	13	18
Chancroid	7 days	0	0	0	0	0	0	0	0	0	0	0	0
Chlamydia	7 days	120	1538	1724	1861	1476	1599	1419	1542	1445	1555	1476	1577
Gonorrhea	7 days	12	205	220	239	222	241	203	223	209	225	209	232
HIV infection ¹⁰ (October - December)	7 days	--	17	15	20	19	24	24	27	28	40	19	25.5
Syphilis ¹¹	7 days	0	22	15	19	24	24	24	25	29	33	24	24.5

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

¹¹ Cases are provisional based on test date per local health department investigation.

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