2022 Annual Communicable Disease Report

Wyandot County

Public Health

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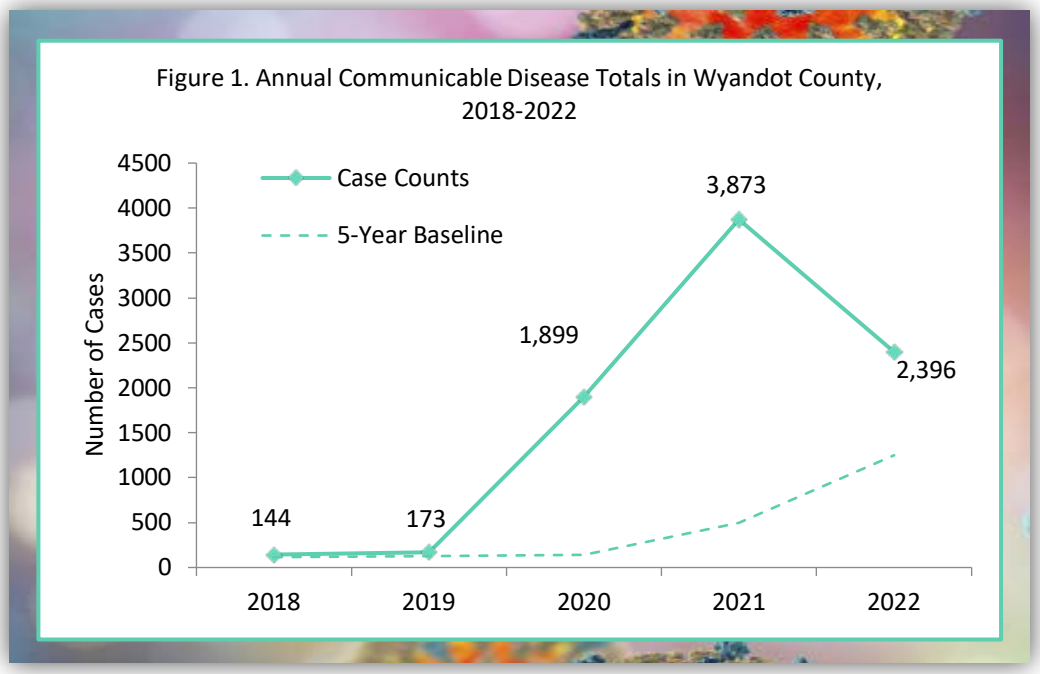
Communicable Disease Summary

This report provides an overview of the reportable diseases occurring within Wyandot County, Ohio. In Ohio, nearly 90 diseases are reportable to public health officials per Ohio Administrative Code 3701-3 (please see Page 4 for a complete list of these illnesses). These diseases are broken down into classes based on their severity and potential for epidemic spread. Each class of disease has a different timeframe in which they are required to be reported to the local health department. Class A diseases must be reported by telephone within one hour while Class B and C diseases are required to be reported by the end of the next business day. Class B diseases are reported by fax or direct entry into the Ohio Disease Reporting System (ODRS) and Class C diseases are primarily reported by telephone. Using ODRS, health departments monitor the health of the community, investigate how individuals became ill, provide education to those ill, and assist medical providers in the treatment and management of these contagious diseases.

In 2022, Wyandot County saw a 38% decrease in communicable disease cases from 2021 (3,873 and 2,396 cases, respectively). Overall, 58.3% of cases were female and 41.5% were male. Cases ranged in age from 3 days to 104 years old with an average age of 44.6 years and a median age of 44 years. The most frequently reported illnesses were COVID-19 (2,265 cases), chlamydia (51 cases), influenza-associated hospitalizations (22 cases), Hepatitis C (14 cases), and campylobacteriosis (10 cases). Figure 1. shows the number of disease cases occurring annually over the past five years. Table 1. on Page 5 lists the diseases reported in the community in 2022 and the number of cases for each of these illnesses. Additionally, Figure 3. on Page 6 categorizes those illnesses by type. The remainder of this document provides epidemiological information as well as brief demographic information on the cases and disease trends for each of the top five illnesses reported over the past five years.

Figure 1. Annual Communicable Disease Totals in Wyandot County, 2018-2022



Ohio's Reportable Diseases[1, 2]

Know Your ABCs: A Quick Guide to Reportable Infectious Diseases in Ohio

From the Ohio Administrative Code Chapter 3701-3; Effective August 1, 2019

Class A:
Diseases of major public health concern because of the severity of disease or potential for epidemic spread – report immediately via telephone upon recognition that a case, a suspected case, or a positive laboratory result exists.

- Anthrax
- Botulism, foodborne
- Cholera
- Diphtheria
- Influenza A – novel virus infection
- Measles
- Meningococcal disease
- Middle East Respiratory Syndrome (MERS)
- Plague
- Rabies, human
- Rubella (not congenital)
- Severe acute respiratory syndrome (SARS)
- Smallpox
- Tularemia
- Viral hemorrhagic fever (VHF), including Ebola virus disease, Lassa fever, Marburg hemorrhagic fever, and Crimean-Congo hemorrhagic fever

Any unexpected pattern of cases, suspected cases, deaths or increased incidence of any other disease of major public health concern, because of the severity of disease or potential for epidemic spread, which may indicate a newly recognized infectious agent, outbreak, epidemic, related public health hazard or act of bioterrorism.

Class B:
Disease of public health concern needing timely response because of potential for epidemic spread – report by the end of the next business day after the existence of a case, a suspected case, or a positive laboratory result is known.

- Amebiasis
- Arboviral neuroinvasive and non-neuroinvasive disease:
  - Chikungunya virus infection
  - Eastern equine encephalitis virus disease
  - LaCrosse virus disease (other California serogroup virus disease)
  - Powassan virus disease
  - St. Louis encephalitis virus disease
  - West Nile virus infection
  - Western equine encephalitis virus disease
  - Yellow fever
  - Zika virus infection
  - Other arthropod-borne diseases
- Babesiosis
- Botulism
  - infant
  - wound
- Brucellosis
- Campylobacteriosis
- *Candida auris*
- Carbapenemase-producing carbapenem-resistant Enterobacteriaceae (CP-CRE)
  - CP-CRE *Enterobacter* spp.
  - CP-CRE *Escherichia coli*
  - CP-CRE *Klebsiella* spp.
  - CP-CRE other
- Chancroid
- *Chlamydia trachomatis* infections
- Coccidioidomycosis
- Creutzfeldt-Jakob disease (CJD)
- Cryptosporidiosis
- Cyclosporiasis
- Dengue
- *E. coli* O157:H7 and Shiga toxin-producing *E. coli* (STEC)
- Ehrlichiosis/anaplasmosis
- Giardiasis
- Gonorrhea *(Neisseria gonorrhoeae)*
- *Haemophilus influenzae* (invasive disease)
- Hantavirus
- Hemolytic uremic syndrome (HUS)
- Hepatitis A
- Hepatitis B (non-perinatal)
- Hepatitis B (perinatal)
- Hepatitis C (non-perinatal)
- Hepatitis C (perinatal)
- Hepatitis D (delta hepatitis)
- Hepatitis E
- Influenza-associated hospitalization
- Influenza-associated pediatric mortality
- Legionnaires' disease
- Leprosy (Hansen disease)
- Leptospirosis
- Listeriosis
- Lyme disease
- Malaria
- Meningitis:
  - Aseptic (viral)
  - Bacterial
- Mumps
- Pertussis
- Poliomyelitis (including vaccine-associated cases)
- Psittacosis
- Q fever
- Rubella (congenital)
- *Salmonella* Paratyphi infection
- *Salmonella* Typhi infection (typhoid fever)
- Salmonellosis
- Shigellosis
- Spotted Fever Rickettsiosis, including Rocky Mountain spotted fever (RMSF)
- *Staphylococcus aureus*, with resistance or intermediate resistance to vancomycin (VRSA, VISA)
- Streptococcal disease, group A, invasive (IGAS)
- Streptococcal disease, group B, in newborn
- Streptococcal toxic shock syndrome (STSS)
- *Streptococcus pneumoniae*, invasive disease (ISP)
- Syphilis
- Tetanus
- Toxic shock syndrome (TSS)
- Trichinellosis
- Tuberculosis (TB), including multi-drug resistant tuberculosis (MDR-TB)
- Varicella
- Vibriosis
- Yersiniosis

Class C:
Report an outbreak, unusual incident or epidemic of other diseases (e.g. histoplasmosis, pediculosis, scabies, staphylococcal infections) by the end of the next business day.

Outbreaks:
- Community
- Foodborne
- Healthcare-associated
- Institutional
- Waterborne
- Zoonotic

NOTE:
Cases of AIDS (acquired immune deficiency syndrome), AIDS-related conditions, HIV (human immunodeficiency virus) infection, perinatal exposure to HIV, all CD4 T-lymphocyte counts and all tests used to diagnose HIV must be reported on forms and in a manner prescribed by the Director.

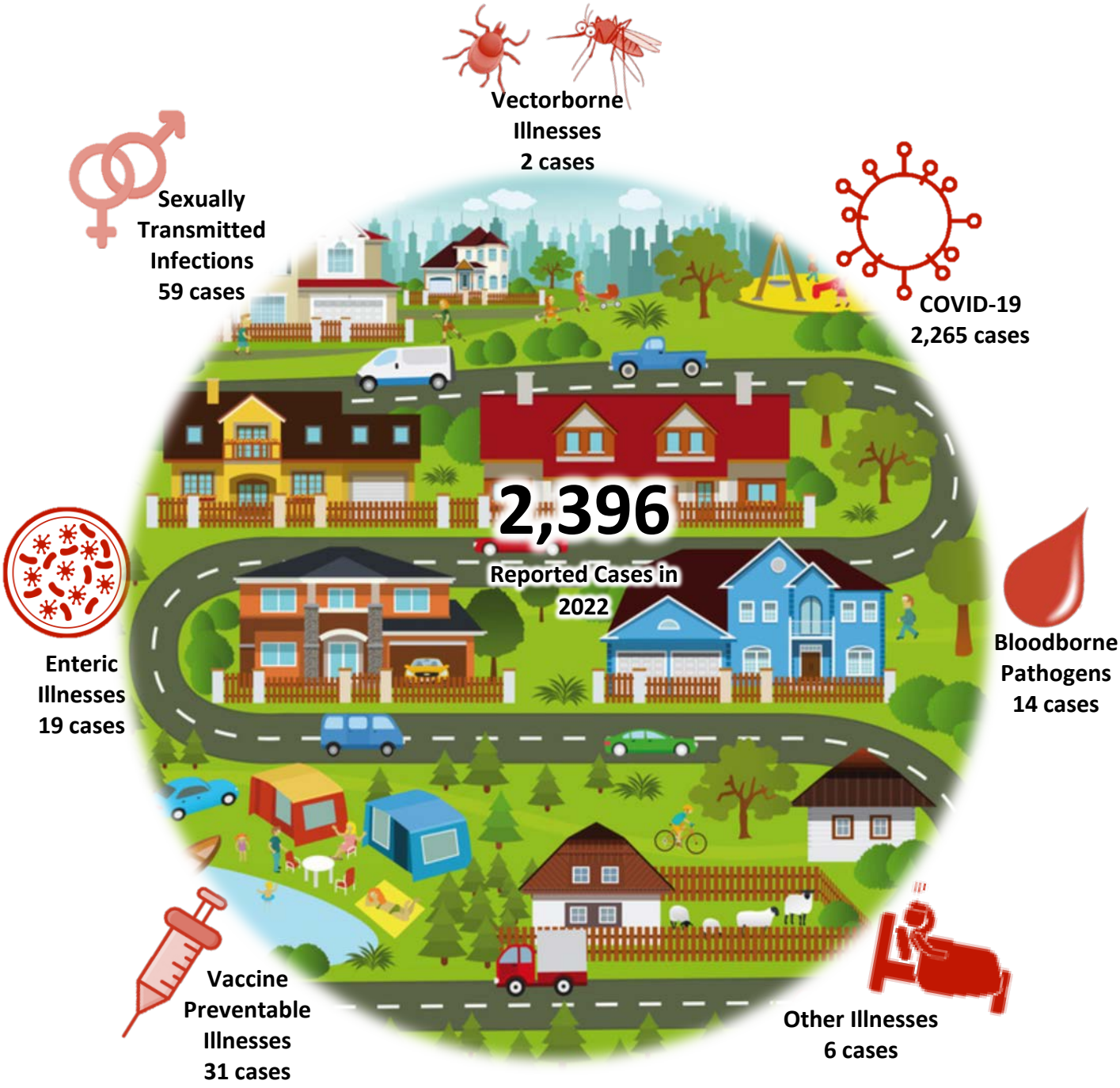
Ohio Department of Health

[1]COVID-19 was added as a Class A disease in 2021.
[2]Mpox formerly known as monkeypox is reported as a Class A disease under "Any unexpected pattern of cases…"

Diseases Reported in 2022

Table 1. Communicable Disease Cases[1] Reported in Wyandot County, 2022		
	Number of Cases[2]	**Case Rate[3]**
Class A Reportable Diseases		
Coronavirus Disease 2019 (COVID-19)[4]	2,265	10,433.9
Class B Reportable Diseases		
Campylobacteriosis	10	46.1
Chlamydia	51	234.9
Creutzfeldt-Jakob Disease	1	4.6
Cryptosporidiosis	2	9.2
E. coli, Shiga Toxin-Producing	1	4.6
Giardiasis	1	4.6
Gonorrhea	8	36.9
Hepatitis A	1	4.6
Hepatitis B (including delta)	6	27.6
Hepatitis C	13	59.9
Hepatitis C - Perinatal Infection	1	4.6
Influenza-Associated Hospitalization	22	101.3
Lyme Disease	2	9.2
Meningitis - aseptic/viral	4	18.4
Meningitis - bacterial (Not N. meningitidis)	1	4.6
Salmonellosis	3	13.8
Streptococcus pneumoniae - invasive antibiotic resistance	2	9.2
Vibriosis (not cholera)	1	4.6
Yersiniosis	1	4.6
Grand Total	**2,396**	11,037.4
Class C Reportable Diseases (Outbreaks)		
Coronavirus Disease 2019 (COVID-19)	8	
Chlamydia	1	
Influenza	1	
Grand Total	**10**	
[1]Case counts include confirmed, probable and suspected disease classifications		
[2]Case counts do not include cases occurring among those incarcerated		
[3]Case rates per 100,000 people		
[4]COVID-19 cases only include confirmed and probable disease classifications		

Types of Diseases Reported



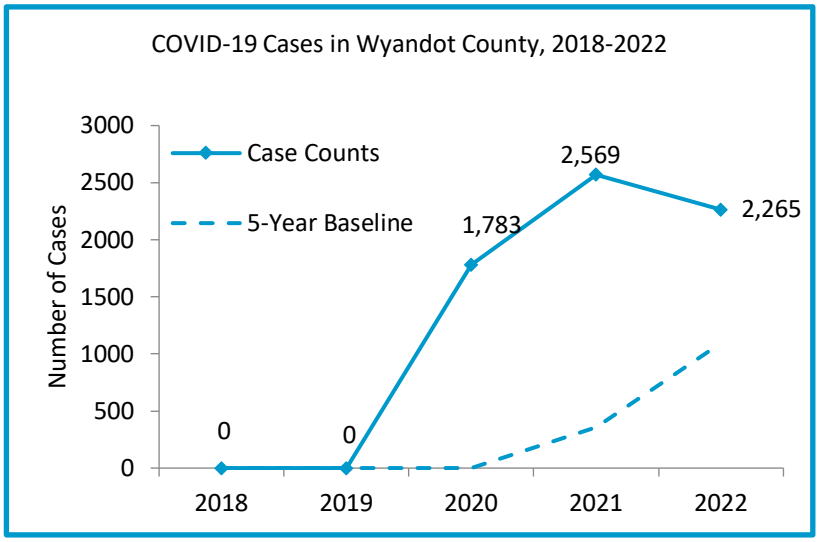
Notes:
Case counts include confirmed, probable, and suspect disease classifications. Suspected cases for COVID19 are excluded.
Sexually transmitted infections include chlamydia and gonorrhea
Enteric illnesses include campylobacteriosis, cryptosporidiosis, *E. coli*, giardiasis, salmonella, vibriosis, and yersiniosis
Vaccine preventable illnesses include Hepatitis A, Hepatitis B, influenza-associated hospitalizations, and *Streptococcus pneumoniae*
Bloodborne pathogens include Hepatitis C and perinatal Hepatitis C
Vectorborne illnesses include Lyme disease
Other illnesses include Creutzfeldt-Jakob Disease, bacterial meningitis, and aseptic meningitis

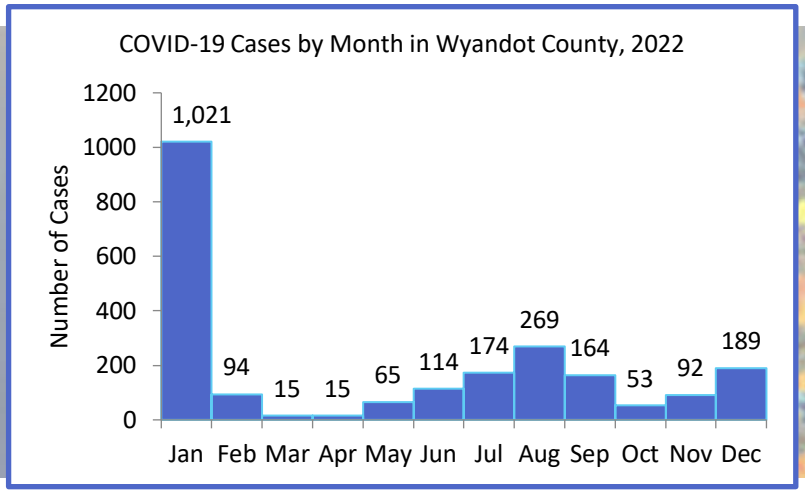
Coronavirus Disease 2019 (COVID-19)

This illness is caused by the species of the Coronaviridae virus family- SARS-CoV-2. First discovered in Wuhan, China in 2019, this virus quickly transmitted worldwide causing the COVID-19 pandemic. People often develop symptoms 1-14 days after exposure. Prevention includes avoiding those ill with COVID-19, social distancing, wearing a cloth facemask that covers the mouth and nose, handwashing, and disinfecting frequently touched surfaces. Vaccination reduces likelihood of serious illness.

2,265
Reported cases of COVID-19

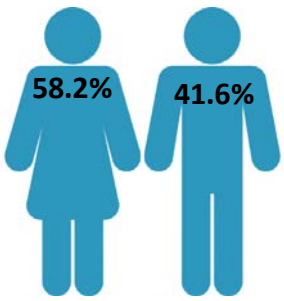
11.8%
Decrease from 2021

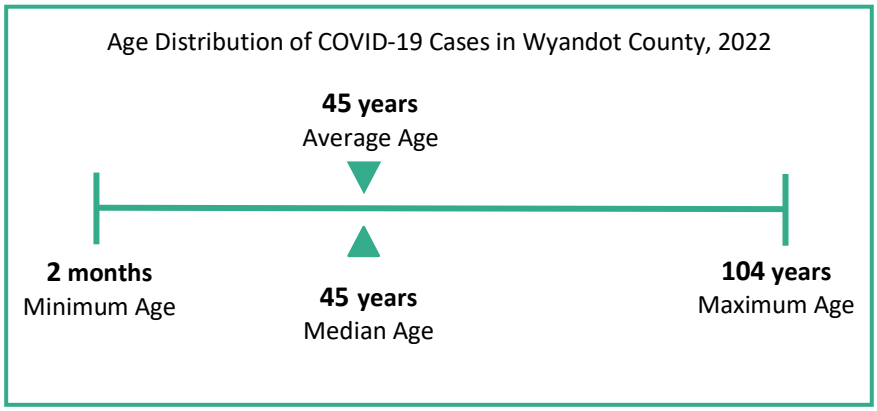




Did you know?
Everyone 6 months of age & older is eligible for a COVID vaccine

Case Demographics



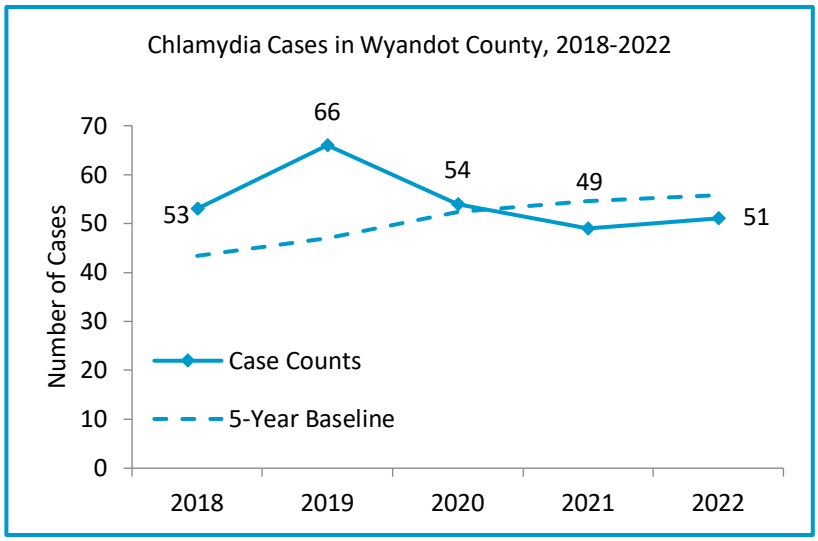


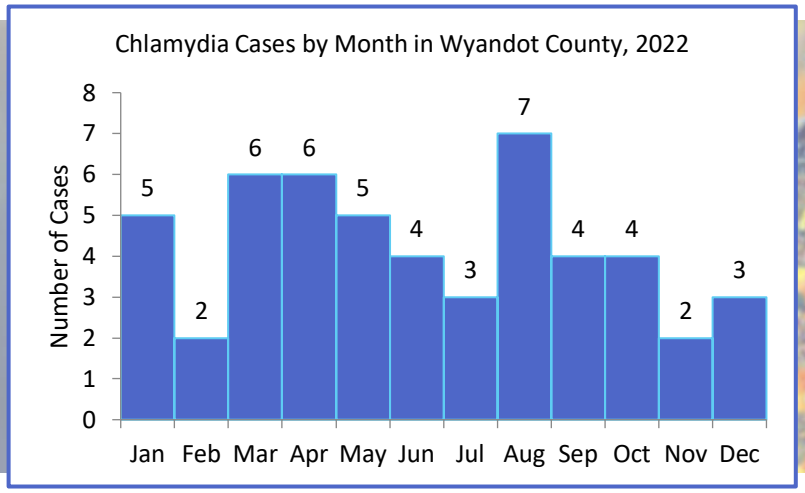
Chlamydia

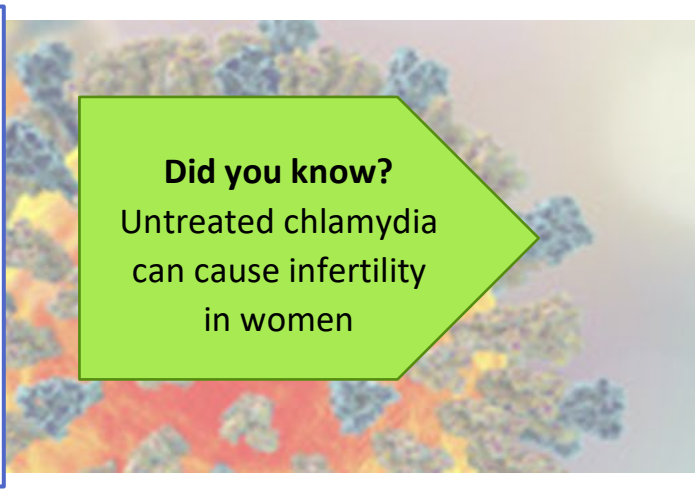
This sexually transmitted infection is caused by the bacteria Chlamydia trachomatis. People often develop symptoms 7-21 days after exposure. Prevention includes abstinence, appropriate condom use, and identification and treatment of sexual contacts of those infected with Chlamydia.

51
Reported cases of Chlamydia

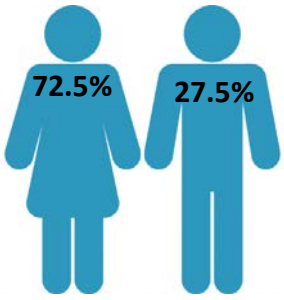
4.1%
Decrease from 2021

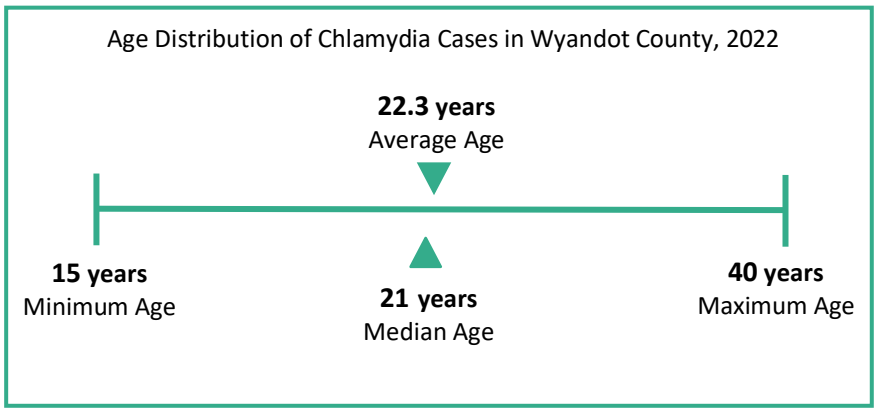






Case Demographics



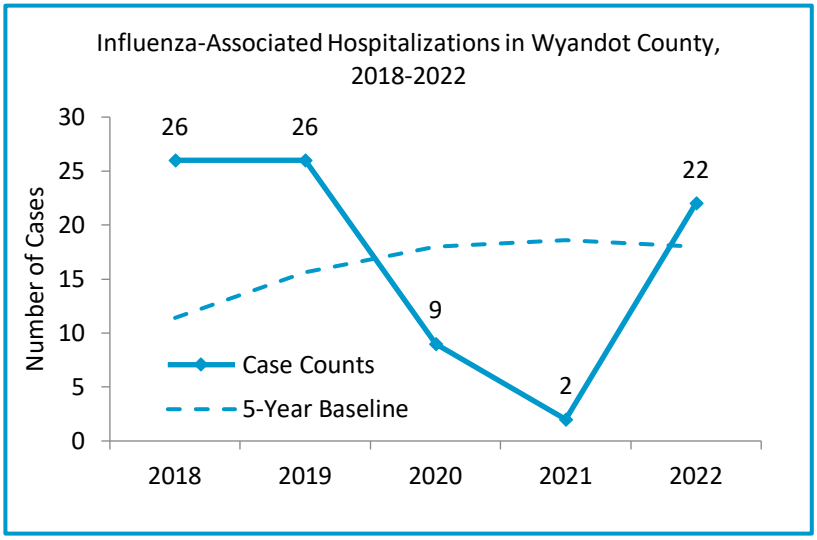


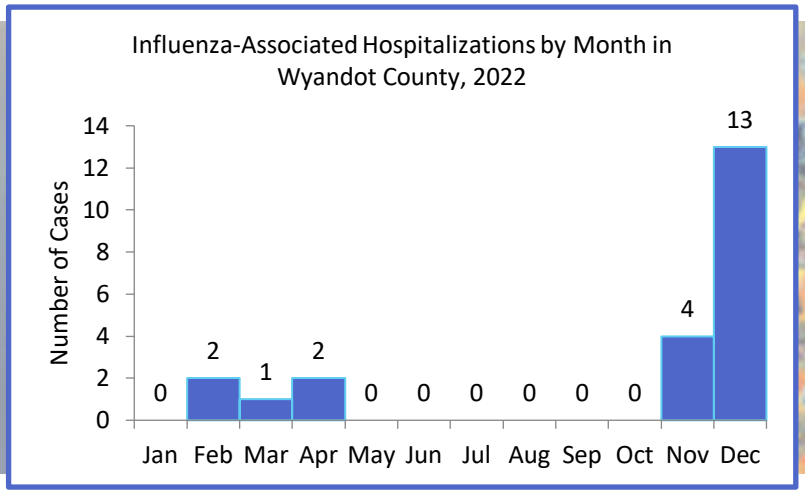
Influenza-Associated Hospitalization

Influenza (flu) is caused by person-to-person spread of the Influenza A or B virus. Only individuals who are hospitalized due to influenza illness are shown below. Individuals become ill 1-4 days after exposure. Prevention includes annual vaccination, social distancing, and proper cough and sneeze etiquette.

22
Reported cases of Flu Hospitalizations

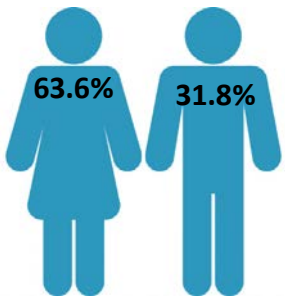
1,000%
Increase from 2021

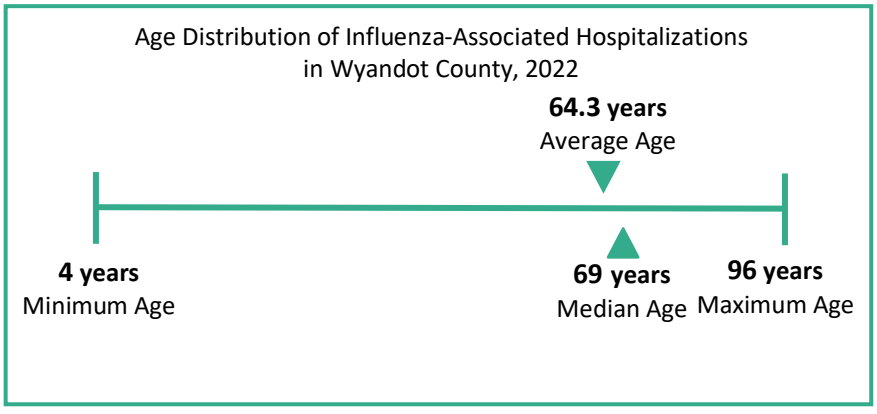




Did you know?
The CDC states everyone should be vaccinated against flu by the end of October

Case Demographics



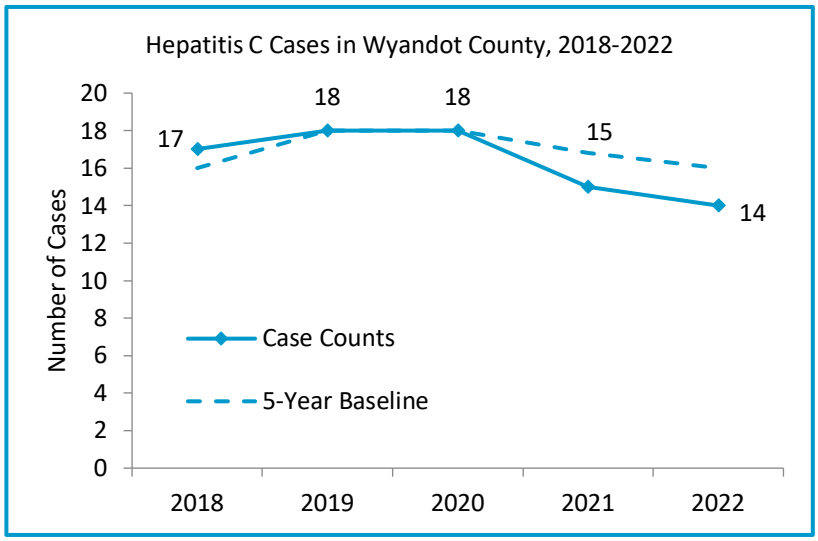


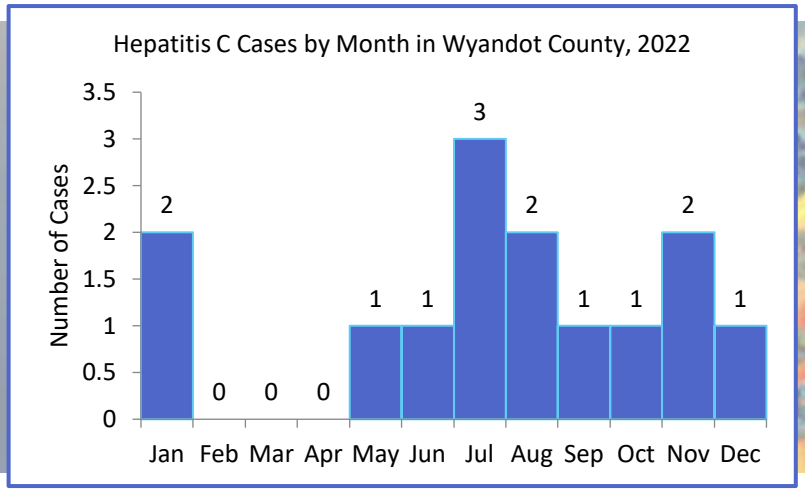
Hepatitis C (including perinatal)

This bloodborne infection is caused by the Hepatitis C virus. Transmission mainly occurs through injection drug use; however, it may also occur sexually, through inadequately cleaned medical devices, exposure to blood in the workplace, or through birth. Individuals often become ill 2 weeks to 6 months after exposure. Currently no vaccine is available for this infection.

14
Reported cases of Hepatitis C

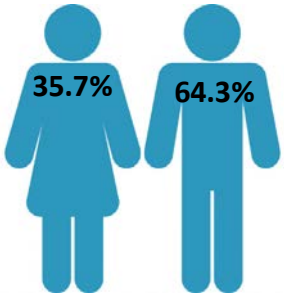
6.7%
Decrease from 2021

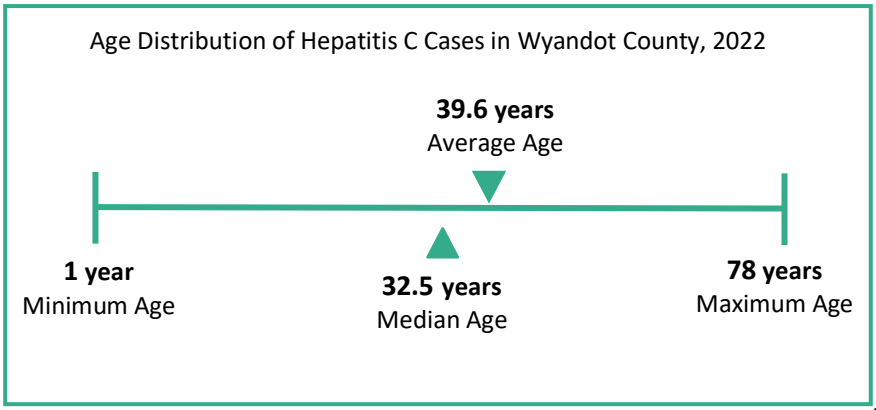




Did you know?
All adults, pregnant women, & people with risk factors should get tested for Hepatitis C

Case Demographics



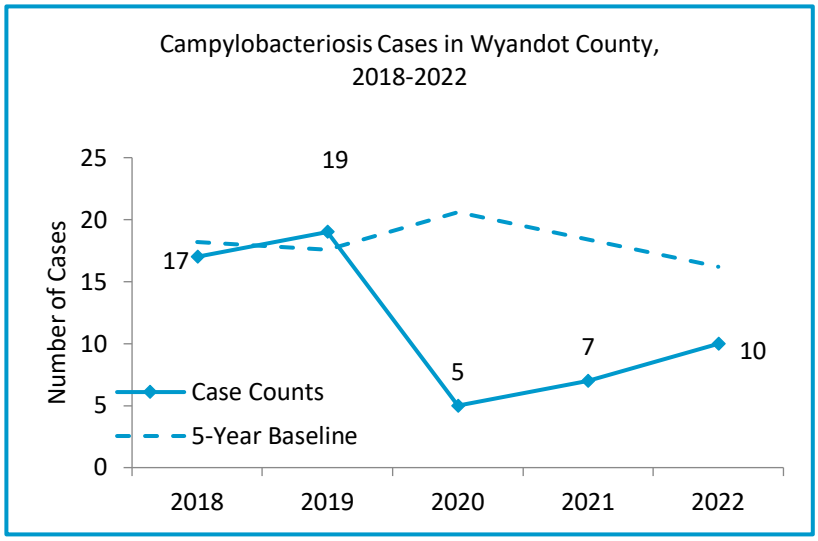


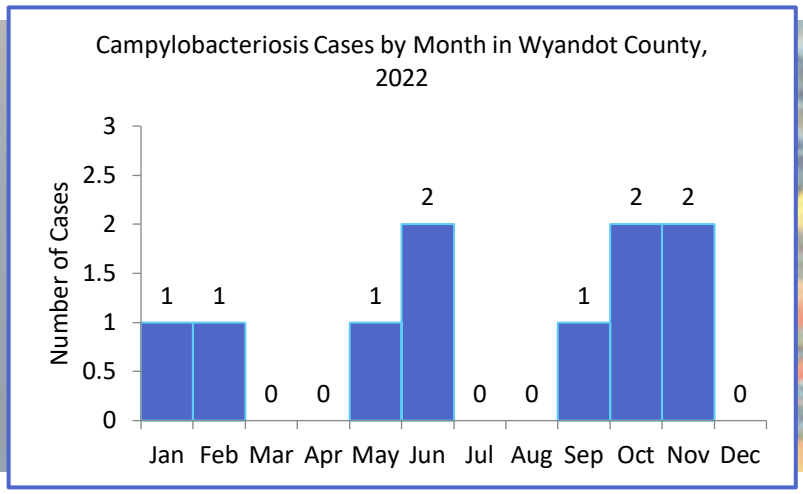
Campylobacteriosis

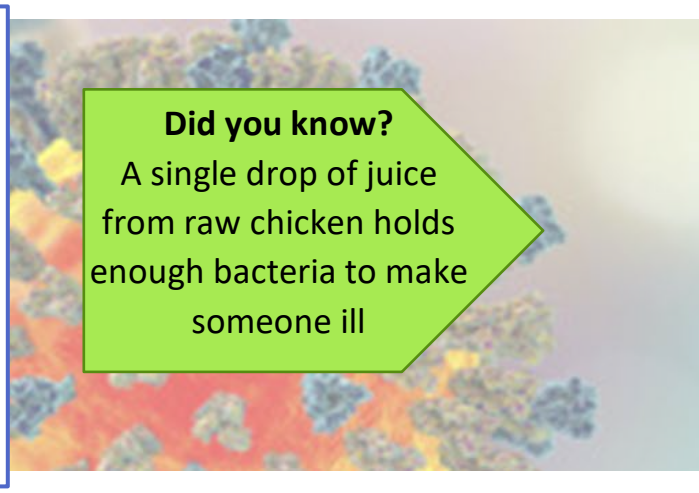
This infection is caused by the Campylobacter bacteria. It is commonly found in many wild/domestic animals including poultry, cattle, dogs, and cats. It is spread fecal-orally; primarily by eating raw or undercooked poultry or food contaminated by raw or undercooked poultry. Individuals often become ill 2-4 days after exposure. Prevention includes hand washing, safe food preparation and pasteurization.

10
Reported cases of Campy

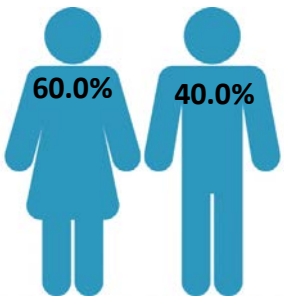
42.9%
Increase from 2021

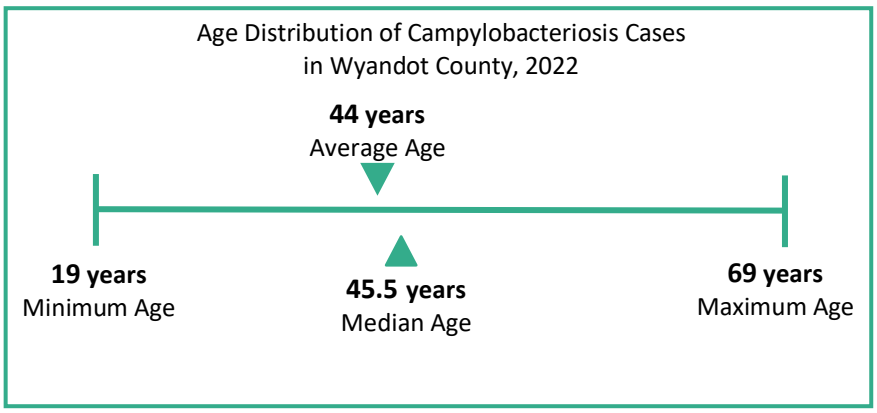






Case Demographics





Contact Information

Mary E. Salimbene Merriman, MPH

Epidemiologist

Union County Health Department

940 London Avenue, Suite 1100

Marysville, Ohio 43040

937-642-2053

mary.merriman@uchd.net

Wyandot County Public Health

UNION COUNTY HEALTH DEPARTMENT

Prepared by the Union County Health Department's epidemiologist.

All data was queried from the Ohio Disease Reporting System's

Data Extract on February 2, 2023