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Reports of Communicable Disease to Winnebago County Public Health – 4th Quarter Update

Data obtained from the Wisconsin Public Health Analysis, Visualization and Reporting Portal (PHAVR). This report is based on episode date and is provided as PROVISIONAL information for health care professionals and may not represent final counts of cases. This report may also be found on our website.

	2023											12 Month	
Disease Group	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Tota
Blastomycosis	-	-	-	-	-	-	-	-	-	-	-	1	
Campylobacteriosis	1	1	-	3	3	3	5	6	2	1	2	1	2
Carbapenemase producing organisms	-	-	-	1	-	-	-	-	-	-	-	-	
Chlamydia	41	32	41	55	42	33	41	46	30	54	48	57	52
Cryptosporidiosis	-	-	-	2	1	3	1	-	1	1	-	-	
Cyclosporiasis	-	-	-	-	1	-	3	-	-	1	-	-	
Ehrlichiosis / Anaplasmosis	-	-	-	-	-	3	2	2	-	1	-	-	
Giardiasis	-	1	2	-	2	-	1	1	1	1	-	1	1
Gonorrhea	7	7	4	1	4	5	5	8	5	4	5	6	6
Haemophilus Influenzae	-	-	-	-	-	-	-	-	-	1	-	1	
Hepatitis B	1	1	2	-	1	-	4	2	-	-	1	-	1
Hepatitis C	1	1	4	1	3	2	-	4	2	2	-	-	2
Influenza hospitalizations	38	3	6	10	1	-	-	-	-	-	2	34	9
Invasive Strep A	1	1	1	-	-	-	1	-	-	-	-	-	
Invasive Strep B	3	1	1	3	3	-	1	1	2	1	-	2	1
Legionellosis	-	-	-	-	-	-	-	1	-	-	-	-	
Lyme Disease	1	1	3	4	3	10	20	19	3	1	1	-	6
Malaria	-	-	-	-	-	-	1	-	-	-	-	-	
Mycobacterial Disease, Non-TB	4	2	3	5	4	2	1	1	5	4	5	-	3
Pathogenic E.coli	1	2	3	3	2	3	5	4	3	5	3	1	3
Pertussis	-	-	-	-	-	-	-	-	-	1	-	-	
RSV hospitalizations	-	-	-	-	-	-	-	-	-	-	-	13	1
Salmonellosis	-	1	1	1	1	1	5	4	-	-	2	1	1
Shigellosis	-	-	-	-	-	-	2	-	-	-	-	-	
Strep, Other Invasive	-	-	-	-	-	1	-	-	-	-	-	-	
Strep Pneumoniae Invasive	3	-	1	1	-	-	-	-	-	1	3	1	1
Syphilis	4	4	1	3	6	3	2	3	-	4	2	1	3
Toxic Shock Syndrome	-	-	-	1	-	-	-	-	-	-	-	-	
Transmissible Spongiform	-	-	-	-	-	1	-	-	-	-	-	-	
Encephalopathy (TSE, Human)													
Latent Tuberculosis (LTBI)†	2	5	7	2	7	8	5	8	3	4	6	-	5
Vancomycin-resistant	-	-	-	-	-	1	-	-	-	-	1	-	
Enterococci (VRE)													
Varicella (Chickenpox)	-	1	1	1	-	-	-	-	2	-	-	-	
Vibriosis	-	-	-	-	-	-	-	-	-	-	-	1	
VRSA/VISA	-	-	-	-	1	-	-	-	-	-	-	-	
Yersiniosis	-	1	-	-	1	1	2	1	1	1	-	1	
Total	108	65	81	97	86	80	107	111	60	88	81	122	1,08
un Data 1/5/2024	This data does not include the City of Manacha as City of Appleton												

Run Date 1/5/2024

This data does not include the <u>City of Menasha</u> or <u>City of Appleton</u>.

^{-:} A dash (-) represents 0 confirmed + probable cases for that disease.

^{†:} The LTBI cases reported on this report represent only cases that were marked as confirmed and probable in WEDSS. Many LTBI cases from recent years are currently marked as suspect in WEDSS as staff are working to follow up with all cases. In the past 12 months, there were 38 LTBI cases listed as suspect in WEDSS.

Incidence of Communicable Disease in Winnebago County Public Health Jurisdiction and Wisconsin

Data obtained from the Wisconsin Public Health Analysis, Visualization and Reporting Portal (PHAVR). This report is based on episode date, is provided as PROVISIONAL information for health care professionals, and may not represent final counts of cases.

Inc†† refers to Incidence, which is the number of cases per 100,000 population. Incidence = # of cases/population * 100,000.

Winnebago County Public Health (WCPH) Jurisdiction population 2020 = 154,010; Wisconsin population 2020 = 5,806,975

Episode Year		3 (Full Ye			22 (Full Year)		2021 (Full Year)			
Episode redi	· · · · · · · · · · · · · · · · · · ·		WI	WCPH #	WCPH	WI	WCPH#	WCPH	WI Inc††	
	of Cases	Inc††	Inc††	of Cases	Inc††	Inc††	of Cases	Inc††		
Babesiosis	-	-	2.1	1	0.6	1.6	1	0.6	1.7	
Blastomycosis	1	0.6	2.2	1	0.6	2.5	2	1.3	1.9	
Campylobacteriosis	28	18.2	25.7	30	19.5	23.2	33	21.4	23.2	
Carbapenemase producing	1	0.6	2.2	-	-	1.7	2	1.3	1.8	
organisms										
Chlamydia	520	337.6	425.4	584	379.2	441.1	651	422.7	478.3	
Cryptosporidiosis	9	5.8	8.8	13	8.4	9.4	12	7.8	10.8	
Cyclosporiasis	5	3.2	1.2	2	1.3	1.1	4	2.6	1.7	
Ehrlichiosis / Anaplasmosis	8	5.2	12.5	3	1.9	9.9	10	6.5	14.4	
Giardiasis	10	6.5	8.2	14	9.1	7.3	9	5.8	9.7	
Gonorrhea	61	39.6	120.4	146	94.8	150.1	186	120.8	179.7	
Haemophilus Influenzae	2	1.3	2.0	6	3.9	1.9	2	1.3	1.4	
Hepatitis A	-	-	0.5	-	-	0.5	1	0.6	0.4	
Hepatitis B	12	7.8	6.5	5	3.2	7.3	15	9.7	6.0	
Hepatitis C	20	13.0	24.2	28	18.2	29.0	43	27.9	34.9	
Histoplasmosis	-	-	1.0	2	1.3	0.6	-	-	0.5	
Influenza hospitalizations	94	61.0	107.3	453	294.1	291.4	61	39.6	61.0	
Invasive Strep A	4	2.6	9.1	5	3.2	3.9	5	3.2	1.9	
Invasive Strep B	18	11.7	10.8	22	14.3	10.2	6	3.9	11.6	
Legionellosis	1	0.6	3.7	7	4.5	4.0	2	1.3	3.9	
Lyme Disease	66	42.9	87.9	92	59.7	96.8	-	-	0.1	
Malaria	1	0.6	0.3	-	-	0.4	1	0.6	0.3	
Bacterial Meningitis	-	-	1.2	-	-	0.7	2	1.3	1.1	
Mycobacterial (Non-TB)	36	23.4	21.5	30	19.5	18.0	38	24.7	21.9	
Parapertussis	-	-	1.2	1	0.6	0.7	-	-	0.4	
Pathogenic E.coli	35	22.7	41.1	63	40.9	39.0	62	40.3	31.3	
Pertussis	1	0.6	0.9	-	-	0.3	-	-	0.2	
RSV hospitalizations	13	8.4	18.5	-	-	-	-	-	-	
Salmonellosis	17	11.0	17.3	30	19.5	17.8	25	16.2	15.5	
Shigellosis	2	1.3	1.3	1	0.6	1.9	-	-	0.9	
Strep, Other Invasive	1	0.6	0.3	1	0.6	0.4	-	-	1.1	
Strep Pneumoniae Invasive	10	6.5	8.6	11	7.1	7.4	6	3.9	5.1	
Syphilis	33	21.4	30.0	23	14.9	38.5	14	9.1	31.8	
Toxic Shock Syndrome	1	0.6	0.3	-	-	0.1	-	-	0.1	
Transmissible Spongiform Encephalopathy (TSE, Human)	1	0.6	0.1	1	0.6	0.2	-	-	0.2	
Tuberculosis (TB)	-	-	1.0	1	0.6	1.1	1	0.6	1.3	
Latent Tuberculosis (LTBI)†	57	37.0	21.2	15	9.7	18.7	19	12.3	18.0	
Vibriosis	1	0.6	0.7	1	0.6	0.8	-	-	0.6	
Vancomycin-resistant Enterococci (VRE)	2	1.3	1.0	-	-	0.8	-	-	0.3	
VRSA/VISA	1	0.6	0.1	-	-	-	-	-	-	
Varicella	5	3.2	3.4	4	2.6	2.8	4	2.6	2.8	
Yersiniosis	9	5.8	2.9	5	3.2	2.4	2	1.3	1.6	
Total	1,086	705.1	1,038.5	1,601	1,039.5	1,249.2	1,219	791.5	981.6	
Date 1/5/2024				- 1	: A dash (-) rep	resents () co	intirmed + prob	able cases fo	r that disease.	

-: A dash (-) represents 0 confirmed + probable cases for that disease.

†: The LTBI cases reported on this report represent only LTBI cases that were marked as confirmed and probable in WEDSS. Winnebago County Public Health had 33 LTBI cases listed as suspect in WEDSS for 2021, 24 cases for 2022, and 38 cases for 2023.

4th Quarter 2023 Communicable Disease Notes and Updates

Respiratory Syncytial Virus (RSV)

With cases of <u>Respiratory Syncytial Virus (RSV)</u> rising across Wisconsin, the Department of Health Services (DHS) is urging pregnant Wisconsinites to get the vaccine to protect their baby from the virus. As of January 10, there have been 1,402 people in Wisconsin hospitalized with RSV this season, 580 of those are children under age 2.

Call for Cases After Detection of MRSA Bacteremia Cluster

The Wisconsin Department of Health Services (DHS) is currently investigating three <u>Methicillin-Resistant Staphylococcus</u> <u>aureus (MRSA) bacteremia</u> cases associated with joint injection procedures in Wisconsin.

Case Details: All three case patients received a joint injection procedure at a Wisconsin health care facility in early December. All patients reported pain, swelling, and difficulty ambulating within 24 hours post injection. Patients reported to the emergency department with symptoms progressing to sepsis and bacteremia within 48 hours post injection in all three cases. Patients required irrigation and debridement of the joint. At this time the source of infection remains unknown.

Call for cases: Please notify the Wisconsin HAI Prevention Program by <u>email</u> or phone (608-267-7711) if you have identified:

- Patients presenting with pain, swelling, difficulty ambulating, or other signs of infection post joint injection procedure.
- Joint injection procedures requiring irrigation and debridement post procedure.
- Positive sepsis and/or MRSA bacteremia cultures post joint injection procedure.
- If you have questions or concerns please contact the <u>HAI Prevention Program</u>
 (DHSWIHAIPreventionProgram@dhs.wisconsin.gov) or your regional infection preventionist.

CDC Health Alert Network (HAN) Health Advisory: Urgent Need to Increase Immunization Coverage for Influenza, COVID-19, and RSV Immunizations and Use of Authorized/Approved Therapeutics

Health care <u>providers should administer influenza</u>, <u>COVID-19</u>, <u>and RSV immunizations</u> now to patients, if recommended. Health care providers should recommend antiviral medications for influenza and COVID-19 for all eligible patients, especially patients at high-risk of progression to severe disease such as older adults and people with certain underlying medical conditions.

Data from the <u>DHS COVID-19 Vaccine Dashboard</u> show **only 14.6% of Wisconsinites have received an updated COVID-19 vaccine.** Data from the <u>DHS Influenza Vaccine Dashboard</u> show **only 32.3% of Wisconsinites have received the flu vaccine**.

DHS issued the news release, <u>DHS Continues to Make COVID-19 Treatment Easily Available as Cases Climb</u>, to emphasize the importance of getting COVID-19 antiviral treatments within five days of symptoms onset, and to promote the state's easy-to-use <u>COVID-19 treatment telehealth service</u>. The service is available to adults statewide, accessible through internet and telephone. Consultations are available in 17 languages and are available seven days a week from 8 a.m. to 8 p.m. If eligible, a clinician can prescribe an oral antiviral pill that can be filled at over <u>600 pharmacies in the state</u> or have it mailed overnight to your residence.

Learn more about COVID-19 treatments. Find COVID-19 vaccine near you at Vaccines.gov.