

KITSAP DISEASE DATA

A quarterly report on disease trends in Kitsap County

Fall 2014

DISEASE PREVENTION AND CONTROL —AT HOME AND ABROAD

Prevention and control of the spread of infectious diseases like influenza and Ebola are ongoing public health challenges. In addition to notifiable conditions data, in this issue of *Kitsap Disease Data* we share information to use in your practice with both patients and staff including:

- the differences between flu and Ebola transmission and symptoms
- local flu facts and recommended infection prevention measures
- local methods to control disease exposure from animal waste

NEW HEALTH OFFICER Dr. Susan Turner assumed her new post as the Kitsap Public Health District Health Officer on December 1. She replaces Dr. Scott Lindquist who is now the WA State Epidemiologist for Communicable Disease. Dr. Turner has 22 years of experience as a health officer. She obtained her medical degree from the University of Florida in Gainesville and a Master of Public Health degree from the University of West Florida in Pensacola.

NOTIFIABLE NEWS Gonorrhea cases as of mid-November were 34% higher than all of 2013. Cases among 20-29 year olds have been rising since 2012 and account for 54% of cases this year. The majority of 2014 cases (62%) reside in the Bremerton area. Pertussis cases have decreased following the statewide epidemic; however, we had cases in a local elementary school during November. Salmonellosis and Shiga toxin-producing *E. coli* are elevated. (See Table 1.)

An uptick in West Nile virus (WNV) positive mosquitoes and horses corresponded with the most human cases statewide since 2009. To date, Kitsap and most of western WA have remained free of WNV. Three rabid bats—more than Kitsap typically sees in a year—were identified following human exposures in September and October. Animal and human *C. gattii* infections continue to be identified primarily in western WA. (See Table 2).

New coccidioidomycosis (Valley fever) cases identified in south-central WA increased the in-state acquired case count to 6 people; animal case surveillance is now underway, including a canine serosurvey.

Table 1. Human Cases of Selected Notifiable Conditions, Kitsap Residents

Category	Disease	Annual Average (2011-2013)	January-September 2014
Enteric	Campylobacteriosis	40	29
	Giardia	21	14
	Hepatitis A	1	0
	Salmonella	20	20
	Shiga toxin-producing <i>E. coli</i> (STEC)	2	9
Vaccine preventable	Influenza*	<1	1
	Pertussis	39	5
TB	Tuberculosis	3	4
STDs	Chlamydia	932	687
	Gonorrhea	73	116
Zoonotic	Lyme disease	<1	2
	Rabies suspected exposures	11	10

In 2011-13 and year-to-date 2014 (Jan-Sept), no reported human cases of: Brucellosis, *Cryptococcus gattii*, Hantavirus pulmonary syndrome, Leptospirosis, Plague, Psittacosis, Q Fever, Rabies (human), Tularemia, West Nile Virus.

*Novel strains and lab-confirmed deaths only

NOTE: 2014 case counts are preliminary and subject to change as case reports are finalized.

Table 2. Animal Cases of Selected Notifiable Conditions

Disease	Kitsap County		WA State	
	Previous 3 Year Total (2011-2013)	Current Year-to-date	Previous 3 Year Total (2011-2013)	Current Year-to-date
Rabies in bats	1	3	32	13
<i>Cryptococcus gattii</i> *	0	0	27	3
West Nile Virus in mosquitoes	0	0	28	80
West Nile Virus in birds	0	0	0	0
West Nile Virus in mammals	0	0	3	5

*Includes cats (14), dogs (8), porpoises (4), and a horse, bird, sheep, and elk.



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24/7 REPORTING NOW SIMPLER Kitsap Public Health is now available to you 24/7 by calling one number **(360) 337-5235**. This is our regular business line but when you call it after hours you'll have the option to speak to an answering service agent who can connect you with the KPHD Duty Officer. If you have any questions or concerns about our new after-hours process, please contact Ruth at (360) 337-5752 or ruth.westergaard@kitsappublichealth.org

DISEASE PREVENTION AND CONTROL IN KITSAP At the time of newsletter distribution, no cases of Ebola have been reported in Kitsap County or Washington State. However, the Health District is actively engaged with our healthcare partners in coordinating disease response should an Ebola case occur locally. KPHD has been consulting, training and exercising with hospitals, EMS, clinics, WA Department of Health and others.

KITSAP FLU FACTS AND YOUR IMMUNIZATION POLICY As we enter flu season this is a good time to educate staff and patients about how flu transmission and symptoms differ from those of Ebola (see Table 3) as well as to remind them about the best ways to prevent the flu.

Table 3. IS IT FLU OR IS IT EBOLA?

HOW IS FLU SPREAD?	HOW IS EBOLA SPREAD?
Primarily by droplet transmission, which occurs while coughing, sneezing, or talking. Less commonly via surface contamination.	Only by direct contact with blood or other body fluids from a person who is sick or who has died of Ebola, or from objects (e.g. needles) contaminated by body fluids of an Ebola patient.
WHEN CAN PEOPLE SPREAD FLU?	WHEN CAN PEOPLE SPREAD EBOLA?
People with flu can spread the virus before and during their illness.	People with Ebola cannot spread the virus until symptoms appear.
WHO GETS THE FLU?	WHO GETS EBOLA?
Anyone can get the flu. Some people—like very young children, older adults, and people with some health conditions—are at high risk of serious complications.	People most at risk of getting Ebola are: •Healthcare providers taking care of Ebola patients •Friends and family who have had unprotected direct contact with blood or body fluids of a person sick with Ebola
SIGNS & SYMPTOMS OF FLU	SIGNS & SYMPTOMS OF EBOLA
Flu symptoms usually develop within 2 days after exposure and typically include: •Fever or feeling feverish •Headache •Muscle or body aches •Feeling very tired (fatigue) ▶Cough ▶Sore throat ▶Runny or stuffy nose	Ebola symptoms appear 2 to 21 days (average 8 to 10 days) after exposure, and typically include: •Fever •Severe headache •Muscle pain •Feeling very tired (fatigue) ▶Vomiting and diarrhea develop after 3–6 days ▶Weakness (can be severe) ▶Stomach pain ▶Unexplained bleeding or bruising

Source:

www.cdc.gov/vhf/ebola/pdf/is-it-flu-or-ebola.pdf

Kitsap data: According to 2013 data from the Behavioral Risk Factor Surveillance System, 35% of adults age 18-64 report having had flu vaccine in the past year. On average each year from 2011-2013, there were 2 deaths and 13 non-fatal hospitalizations related to influenza.

What is your staff policy? The CDC's Advisory Committee on Immunization Practices (ACIP) says that "one of the most important strategies to decrease influenza transmission to or from high risk persons is to immunize healthcare personnel." The ACIP also states that "those patients who are at greatest risk of developing severe complications of influenza are themselves more likely to be exposed to potentially infectious healthcare personnel." (See ACIP position paper at:

www.apic.org/Resource/TinyMceFileManager/Advocacy-PDFs/APIC_Influenza_Immunization_of_HCP_12711.PDF)

Remind staff and patients they can also reduce disease transmission when they:

- Wash their hands often.
- Avoid touching their eyes, nose or mouth.
- Cover their sneeze or cough with a tissue or their sleeve.
- Stay home for at least 24 hours after a fever is gone without the help of a fever-reducing medicine. Keep away from others as much as possible.

MUTT MITTS FOR DOG WASTE Each day dogs in Kitsap County create approximately 11 tons of waste that can contain pathogens such as *Giardia*, *Salmonella*, roundworms and *E. coli*, according to Kitsap County Public Works. If pet waste is not bagged and put in a trash container, bacteria from the waste can be washed down storm drains and contaminate beaches and shellfishing beds.

Kitsap Public Works provides free "Mutt Mitt" stations at parks throughout the county and asks that you encourage your patients and clients to pick up after their dogs both on walks and at home. In 2013, 100 tons of pet waste was diverted from local surface waters through the Mutt Mitt Program. For more information go to:

www.cleanwaterkitsap.org/Pages/Mutt-Mitt-Program.aspx



SEE OUR MONTHLY NOTIFIABLE CONDITIONS REPORT

The current data for reported notifiable conditions in Kitsap, Clallam and Jefferson Counties are located at www.kitsappublichealth.org under "Alerts and Announcements."