JUNE 2019 | VOLUME 1 ISSUE 1

## WYCQ EPI NEWS

A quarterly e-newsletter about epidemiology in Wyandotte County prepared by the Unified Government Public Health Department



### **April-June Highlights**

by Elizabeth Groenweghe

Welcome to the first edition of WYCO EPI NEWS! The purpose of this quarterly newsletter is to provide up-to-date information on the latest trends, outbreaks and information about epidemiology in Wyandotte County.

In this issue we discuss measles activity across the country and how to prevent it from spreading within Wyandotte County. We also share with you our first Annual Sexually Transmitted Infections Report for 2018. The data in this report shows an alarming increase in STIs in Wyandotte County. We have also published a summary report regarding influenza activity in Wyandotte County for the 2018-2019 season. In this issue you will also find important information on vector borne diseases and the updated monthly communicable disease data.

## Also in this Issue:

- 2 Measles Activity
- 3 STIs & STDs
- 4 Vector Borne Diseases
- 5 Influenza
- 6 Monthly

Communicable

Disease Surveillance

Summary



### **Measles Activity**

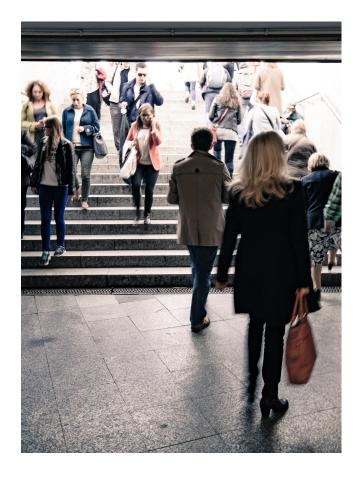
Wyandotte County Measles Activity

As of June 6, 2019, the Centers for Disease Control and Prevention has reported a total of 1,022 measles cases in the United States across 28 different states. This is the highest case count since 1994. Measles was previously declared eliminated in the United States in 2000.

Fortunately, the state of Kansas and metro Kansas City area have not yet been impacted by this heightened measles activity; however, these outbreaks highlight the important preventive measures we should all be taking to prevent a measles outbreak from gaining a foothold in Wyandotte County. The largest measles outbreak, occurring in New York, began when an unvaccinated individual traveled to a foreign country and returned with the infection. Measles is still common in many parts of the world including Europe, Asia, and Africa. In 2018, 82 different people brought measles over to the United States from other countries. Vaccination is an important preventive action for everyone, but especially for those that will be traveling abroad. If you will be traveling, please visit with your doctor or Unified Government's immunization clinic to be sure that all your vaccinations are up-todate.



As of June 6, 1,022 measles cases were identified in the United States across 28 states.



In addition, part of the reason that measles has spread so rapidly in the United States this year is because it has hit a susceptible population. Measles can spread when it reaches a community where groups of people are unvaccinated. For example, in the New York outbreak, it has spread among unvaccinated members of the Orthodox Jewish community. It is our responsibility as community members to all get vaccinated and prevent an outbreak from occurring in Wyandotte County. Most importantly, it is our duty as community members to protect our most vulnerable population—babies and infants. Children under the age of one year are unable to receive the measles vaccine, leaving them entirely vulnerable. They depend on a community that is fully vaccinated to prevent them from contracting measles.



# Sexually Transmitted Infections (STIs) in Wyandotte County

The Unified Government Public Health Department recently released its first ever Sexually Transmitted Infections Summary Report for 2018. This report brought to light the urgent crisis of sexually transmitted infections (STIs) in Wyandotte County. STI data shows an alarming increase in infection rates in the last decade. In fact, the data reveals that Wyandotte County appears to be particularly impacted by the burden of STI rates when compared to the state of Kansas and surrounding counties. The county has the highest rates of both chlamydia and gonorrhea in the state. In addition, the rate of syphilis in Wyandotte County has increased over 800% since 2011.

Chlamydia, gonorrhea, and syphilis are all treatable infections with antibiotics; however, many cases go undiagnosed. Frequently, those infected may not experience any symptoms at all. However, left untreated, all three infections can have serious health consequences including miscarriages, infertility, and birth complications for infants. Therefore, regular testing for STIs is recommended for anyone sexually active, but especially Wyandotte County residents who may be at increased risk.

The Unified Government Public Health Department offers a walk-in clinic Monday, Tuesday, Wednesday, and Friday from 8:30 AM-4:00 PM and Thursday from 8:30 AM-12:00 PM and 3:00 PM-6:00 PM.

For more information about STI rates in Wyandotte County, a one-page infographic can be found here and the full 2018 STI report can be found here.

## Vector Borne Diseases

Mosquitoes, ticks, and fleas are common vectors that spread pathogens. A person can get a vector-borne disease such as dengue, Zika, Lyme, or plague when bitten by a vector. Over 640,000 cases of vector-borne diseases were reported in the U.S. between 2004 and 2016, and nine new germs spread by mosquitoes and ticks were discovered or introduced in the U.S. Local health departments are part of the main defense against the threat these vectors pose.

From 2004 to 2016 mosquitoes, ticks, and fleas have become an increasing threat with the number of reported cases of disease from these vectors more than tripling. The number of disease cases from ticks has doubled, and mosquito-borne disease epidemics have occurred more frequently.

Everyone can protect themselves from fleas, ticks and mosquitoes by: Globalization has caused mosquitoes, ticks, and fleas to move around the world, and infected travelers can introduce and spread germs as they go to new locations. More people are at risk of contracting a vector-borne disease when germs are carried by mosquitoes and ticks to new areas of the U.S.

While vector-borne diseases are increasing, steps can be taken to reduce the risk of becoming infected.



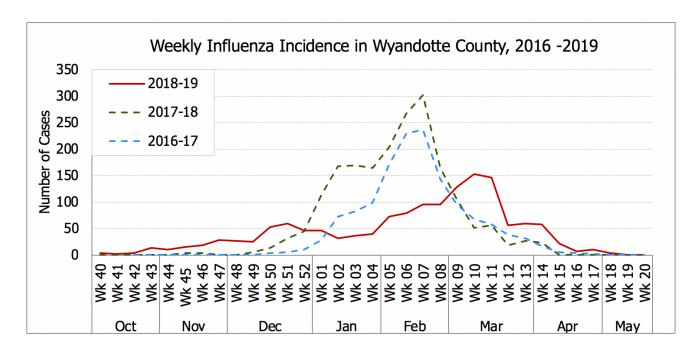






### Influenza Activity

The final data for the 2018-2019 influenza season is now available in the **Wyandotte County 2018-2019 Influenza Season Summary Report**. Seasonal influenza can pose a large burden on communities during the fall through spring each year. In total, 1,449 influenza cases were reported to the Unified Government Public Health Department during the 2018-2019 influenza season. The majority of influenza cases were type A and those ages 14 and younger were the most impacted. Emergency room visits for influenza-like illness were lower than the past season and resulted in very few hospital admissions. In addition, the influenza vaccine effectiveness for the 2018-2019 season was 47%. This is slightly higher than the effectiveness for prior seasons and could have had an impact on severity of influenza in the community. Overall, the data demonstrates that Wyandotte County experienced a less severe influenza season.



The Unified Government Public Health Department has its own communicable disease control division. This division is in charge of disease surveillance and reporting, tracking food borne illnesses, animal bite management, and tuberculosis control.

For more information on communicable disease in Wyandotte County or this quarterly newsletter, please contact Chief Epidemiologist Elizabeth Groenweghe at egroenweghe@wycokck.org

# Monthly Communicable Disease Surveillance Summary

Disease Name	March 2019	April 2019	May 2019
Enteric Diseases			
Campylobacteriosis	0	0	1
Cryptosporidiosis	0	0	0
E. coli (STEC)	0	0	0
Giardiasis	0	1	2
Listeriosis	0	0	0
Salmonellosis	1	5	4
Shigellosis	0	0	0
Hepatitis Diseases			
Hepatitis A	0	0	0
Hepatitis B, acute	0	0	0
	0	1	0
Hepatitis B, chronic Hepatitis B, pregnancy event	0	0	0
Hepatitis C, Chronic	5	15	8
	0	0	0
Hepatitis C, acute			
Respiratory Diseases			
Haemophilus influenzae, invasive disease	0	1	0
Legionella	0	0	0
Measles	0	0	0
Mumps	0	0	0
Rubella	0	0	0
Pertussis	0	0	1
Streptococcal Group A, invasive	0	0	0
Streptococcus pneumoniae, invasive	2	1	0
Varicella	0	0	1
Vector-borne Diseases			
Lyme disease	0	0	0
Spotted Fever Rickettsiosis	0	0	0
Ehrlichiosis / Anaplasmosis	0	0	0
West Nile virus	0	0	0
Zika Virus	0	0	0

# Monthly Communicable Disease Surveillance Summary

Other Diseases			
Acute flaccid myelitis	0	0	0
Amebiasis	0	0	0
Anthrax	0	0	0
Botulism	0	0	0
Brucellosis	0	0	0
Cholera	0	0	0
Cyclosporiasis	0	0	0
Diphtheria	0	0	0
Hantavirus Pulmonary Syndrome	0	0	0
Leprosy (Hansen disease)	0	0	0
Malaria	0	0	0
Meningitis, other bacterial	0	0	0
Meningococcemia	0	0	0
Plague	0	0	0
Poliomyelitis	0	0	0
Psittacosis	0	0	0
Q Fever	0	0	0
Rabies	0	0	0
Tetanus	0	0	0
Toxic shock syndrome	0	0	0
Transmissible Spongioform			
Encephalopathy	0	0	0
Trichinosis	0	0	0
Tularemia	0	0	0
Typhoid fever	0	0	0