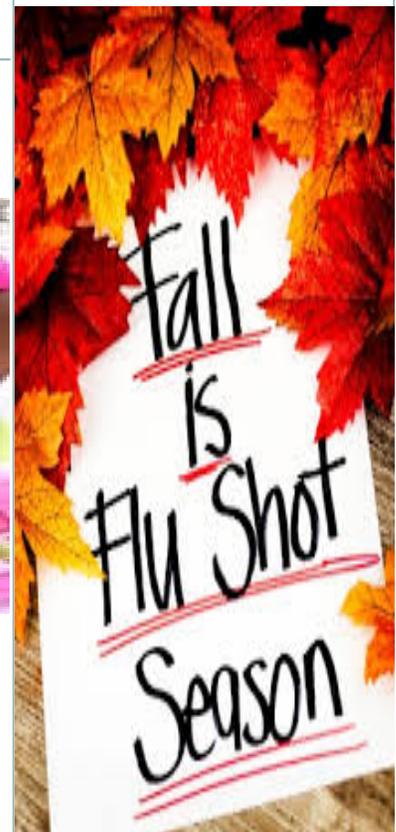


The Epi Chronicle



IN THE NEWS: Seasonal Influenza

Author: Jackie Tomer , Epidemiology Intern

Winter is fast approaching, and so is flu season. Flu season usually begins around the beginning of October and can last until late spring. For the best protection against the virus, it is very important to receive a flu vaccine as soon as they are available. After the 2014-2015 flu season, a many people may be hesitant to get the vaccine — However, it is important to understand that vaccines for the flu change every year; just because the vaccine for last year’s flu had little effect, it is still important to get vaccinated this year. Each year the flu strain is different and is hard to predict because of its fast mutation rate. Unfortunately, last year researchers did not predict the strain correctly and we saw a huge increase in flu cases compared to past years. On a better note, this year the influenza vaccine is expected to be much more effective.

The most vulnerable populations that are most likely to contract the influenza virus are children, the elderly population and individuals who have chronic medical conditions. It is also important to get the flu vaccine if you are taking care of the elderly, young children or are in the medical field. This can stop spread of the virus to these susceptible populations.

The Cleveland Department of Public Health offers free immunization clinics. Call **(216)-664-4621** for the CDPH flu hotline or visit <http://www.clevelandhealth.org/network/health/influenza.php> for more information on the flu.

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WHAT IS SALMONELLA?

Salmonella is one of the most commonly reported food-borne outbreaks worldwide. Symptoms include diarrhea, fever, and abdominal cramping. These symptoms can last anywhere from 12 to 72 hours after being infected. Most cases are not severe, however some cases may require further medical care. Children are the most vulnerable population to this infection; it is most commonly found in children under the age of 5.

Salmonella is not only a foodborne illness; it can also be contracted by contact with animals. It can easily grow on the skin of reptiles and is also commonly associated with chickens, including baby chicks. It is important to wash hands after coming into contact with any of these animals to prevent illness.

RECALL NOTICE

List of Notable Recalls:

July 13, 2015: Barber Foods' Frozen Stuffed Chicken- Possible Salmonella

July 28, 2015: Kroger's Ground Cinnamon, Garlic Powder, Ground Black Pepper, Bac'n Buds—Possible Salmonella

August 27, 2015: General Mills Frozen Cascadian Farm Cut Green Beans—Possible Listeria Monocytogenes

September 1, 2015: Bonduelle USA Inc. Frozen Sweet Whole Kernel Corn—Possible Listeria Monocytogenes

September 11, 2015: Fat Boy and Andrew & Williamson Fresh Produce Cucumbers—suspected linkage to 558 *Salmonella poona* infections

Further information regarding these recalls and others can be found at <http://www.fda.gov/Safety/Recalls/> or <http://www.agri.ohio.gov/apps/odanews/odarecalls.aspx?div=Food%20Safety>

RECALL FOCUS: SALMONELLA

Author: Jackie Tomer, Epidemiology Intern

As of September 22, 2015 there have been a total of 558 cases of Salmonella, with two of these cases from Ohio. In the current outbreak, cucumbers have been the common source. This outbreak currently consists of 33 states, and has claimed three lives. Most of the sickened are individuals under the age of 18 (52%).

The bacterium responsible is *Salmonella* Poona, which is rarely associated with foodborne illnesses. However, it has been known to cause serious disease. Disease from *Salmonella* Poona can be fatal, although its instance is rare.

The cucumbers that have been identified as the main source of the outbreak are likely from a distribution company named Andrew & Williamson. On September 11, 2015, there was a voluntary recall for all cucumbers sold under the Fat Boy labeling and also for unlabeled cucumbers packed into a black reusable container (sold in Nevada) starting August 1, 2015. Andrew & Williamson Fresh Produce also voluntarily recalled all cucumbers sold under the "Limited Edition" brand sold from August 1, 2015 through September 3, 2015.

Although Ohio is not known to be one of the states these cucumbers were distributed to, it is important to make sure that you are checking labels, especially if you are buying produce from or traveling out of state. Seek medical care if you are experiencing symptoms.

DISEASE SPOTLIGHT:

BACK—TO—SCHOOL DISEASES

Author: Jackie Tomer, Epidemiology Intern

With the happiness of children going back to school, or perhaps starting their first year of kindergarten, comes the return of communicable diseases. It is no surprise that when you put a group of kids together that toys are not the only thing they are going to be sharing. Here are some tips for keeping your children safe and healthy throughout the school year:

Hand Washing

To ensure a healthy child, it is necessary to teach them the importance of hand washing and proper hygiene practices. It is also important to make sure they are carrying these techniques into their school day. In schools and daycares, the most commonly seen outbreaks are Shigella (and other food-borne illnesses), flu, strep throat and conjunctivitis (pink eye). All of these can be prevented by simply washing hands after using the restroom, before preparing or eating meals, or after sneezing/coughing.

Vaccinating

Whenever kids are starting school, one of the documents that school administration is going to check for is proof of up-to-date vaccinations. It is vital that kids are vaccinated to eliminate the risk of contracting vaccine-preventable diseases such as Mumps, Chickenpox, Measles, etc. Childhood vaccinations in our population are very important to ensure herd immunity – meaning there are enough people vaccinated that the pathogen is not able to exist in the community, thus keeping all of the unvaccinated individuals safe. This is especially important for protecting children or adults who are too young to be immunized or who are immunocompromised and not healthy enough to receive their vaccinations. It cannot be stressed enough how important vaccinations are not only for yourself, but for everyone around you.

For further information on vaccines or to make sure your child is up-to-date on their vaccinations please visit <http://www.cdc.gov/vaccines/schedules/index.html>.

Contact your local health department

Know that health departments are here to help! Whether you are a concerned parent, teacher, daycare provider or a school principle, we encourage you to notify your local health department on any issue that you suspect you are having. If you are noticing a large number of kids out sick or multiple children with the same symptoms, let us know so that we can take care of the problem before it escalates. We want our community and everyone in it happy and healthy!

Cleveland Department of Public Health Phone Number: (216) 664-2324



COMMON VACCINE MIS-CONCEPTIONS:

#1 Vaccines cause autism – There is no credible research that has shown an association between being vaccinated and having autism. It is now being found that children are showing signs of autism before even receiving the MMR vaccine.

#2 Natural immunity is best— Many of the vaccine-preventable diseases come with prolonged health risks, not to mention a chance of death. Example: Measles has a 1/500 death rate and can have devastating long-term effects of the disease; medical expenses can be upwards of \$10k+ per case

#3 Unsafe toxins— It is all about the dosage and chemical structure. Formaldehyde is present in such low amounts that you consume more when eating an apple than when you receive a vaccine. The mercury found in vaccines is a different compound than what is found in fish. For example, it's like the difference between the alcohol you drink and the alcohol you use as an antiseptic.

#4 Vaccines aren't worth the risk— You are at a higher risk of becoming sick if you are unvaccinated. The risk for allergies to vaccines are very rare (less than one-in-one million)

Most importantly by getting vaccinated, you are not only protecting yourself, but you are also caring for your community by contributing to herd immunity.

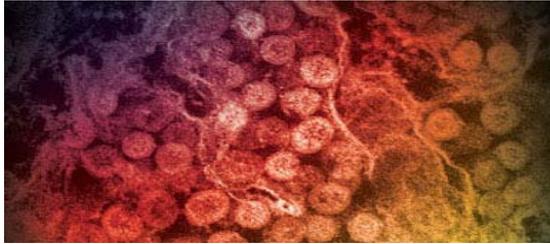
MERS : MIDDLE EAST RESPIRATORY SYNDROME

SAFE TRAVELING TIPS:

- Wash hands often
- Have hand sanitizer with you and use as you come in contact with surfaces or people
- Avoid contact with sick people
- Don't touch your face, eyes, or mouth
- Make sure your vaccines are up to date—be mindful of where you're traveling and what diseases are present there.
- Visit <http://wwwnc.cdc.gov/travel/> for more travel info.

Author: Jackie Tomer, Epidemiology Intern

MERS was first discovered in humans in Saudi Arabia in 2012 and has spread to several other countries (including 2 cases in the US). It is a viral respiratory disease of which symptoms include fever, coughing, shortness of breath; it often results in pneumonia. It is thought to be a zoonotic disease transmitted from camels to humans. So far, this disease is not easily passed human-to-human unless there is close contact with an infected individual. However, it still proposes a huge threat worldwide. Currently, Korea is in hopes of ending an outbreak that began in May 2015 and spread until July 2015. According to the World Health Organization (WHO), there have been 1570 lab—confirmed cases and at least 555 MERS-related deaths worldwide.



MERS-CoV Virus



Masks worn at Korean Airport

POLIO

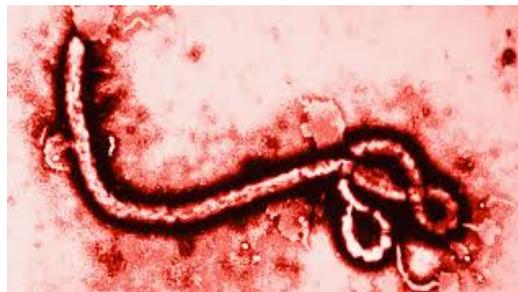
Author: Jackie Tomer, Epidemiology Intern

Poliomyelitis, or Polio, is a viral disease that mainly affects children. The disease has the ability to cause permanent paralysis and has no cure. Fortunately, there is a vaccine that protects against the devastating disease. In developed nations, such as the US, China and Canada, polio has been eliminated thanks to these vaccinations. However, in developing countries there are still cases being reported. In 2014, there were 359 reported cases of Polio worldwide. Global eradication efforts are in place, but poor health infrastructure and remote villages make it a challenge for those public health officials. Their aim is to eradicate Polio by 2018.

EBOLA UPDATE

Author: Jackie Tomer, Epidemiology Intern

The World Health Organization (WHO) has officially declared Liberia Ebola free. There have been no new confirmed Ebola cases in Liberia since July 2015. The new Ebola cases are in Guinea and Sierra Leone, but are being confined to certain geographic areas within these countries making it easier to monitor and track the disease. The case incidence has been less than 10 cases per week since the end of July 2015. We continue to monitor travelers coming from Guinea and Sierra Leone. Local health departments are responsible for contacting these travelers and reporting any symptoms.



Ebola Virus

NATIONAL OUTBREAK FEATURE: LEGIONELLA

Author: Jackie Tomer, Epidemiology Intern,

Co-Author: Brent Styer, MPH, Epidemiologist

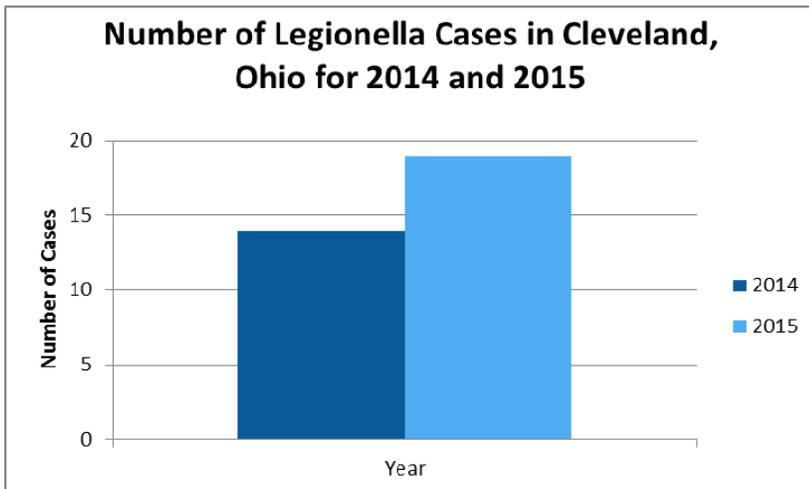
Legionella is a bacteria known for causing a pneumonia-like illness known as Legionnaires disease. It was first discovered after an outbreak at an American Legion convention in Philadelphia in 1976. The bacterium was being spread through the hotel's cooling system, spreading throughout the hotel. The most common sources of exposure are warm water systems, including hot tubs, cooling towers, hot water tanks, or plumbing systems. It is spread through inhalation of a mist or vapor, and is not transmissible person-to-person.

In August, New York faced a Legionella outbreak leaving 12 dead and 120 ill in the South Bronx neighborhoods. After much investigation, the source was found to be a contaminated cooling tower on top of the Opera House hotel on East 149th street. The city tested several building's cooling towers and over a dozen came back positive for legionella. It was finally concluded that the Opera House Hotel was the source of the outbreak.



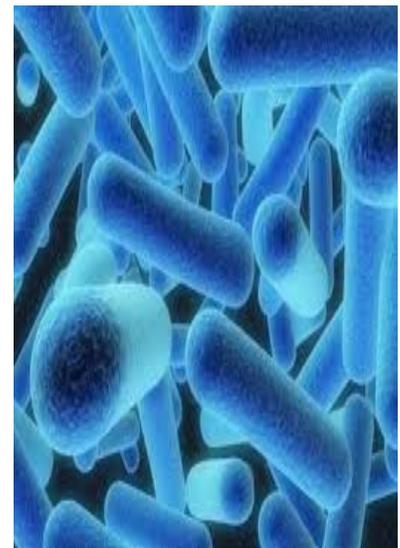
“So far, we have seen a 36% increase in Cleveland Legionella cases since last year.”

LOCAL OUTBREAK FEATURE: LEGIONELLA IN CLEVELAND



Percent change from last year (2014): +35.7%

The number of individuals that were diagnosed with Legionella was lower in 2014 compared to 2015. So far, we have seen a 36% increase in Cleveland Legionella cases since last year. In the OCDSE, we receive notifications of these diagnoses and then follow up with the patients to obtain any exposure history. By gathering this information, we are able to monitor the exposures to see if there is anything in common among the cases. If we find a common exposure, we will launch an investigation to find out more about the source of the exposure.



**THE OFFICE OF
COMMUNICABLE
DISEASE
SURVEILLANCE AND
EPIDEMIOLOGY**

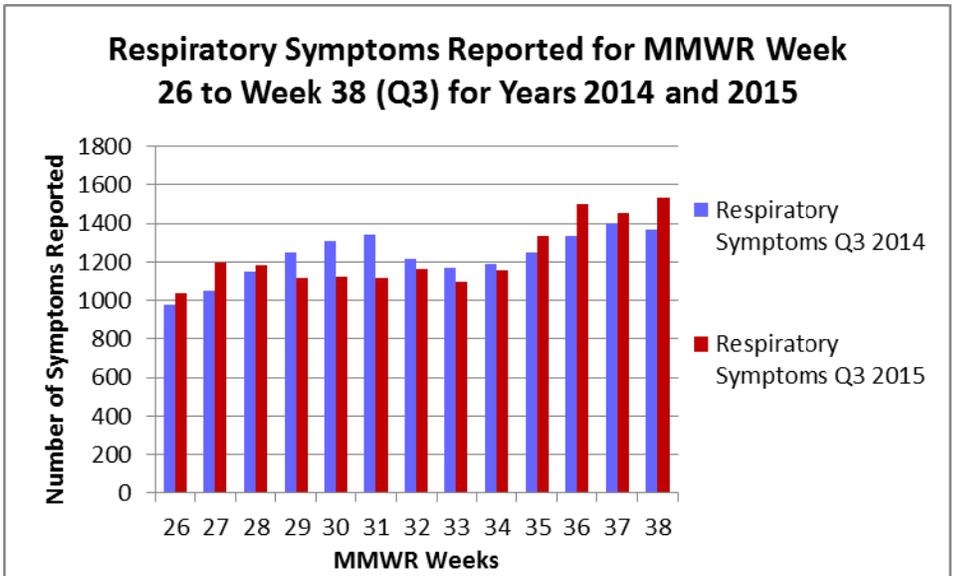
The OCDSE is responsible for reducing the incidence of communicable disease (not including tuberculosis, sexually transmitted diseases, and HIV/AIDS) in the City of Cleveland through prevention, surveillance, and outbreak control.

Mission Statement:

To provide disease surveillance, data collection, data analysis, health education, preparedness planning, outbreak response, and disease prevention services designed to protect the health of Clevelanders

**COMMUNICABLE DISEASE SYNDROMIC
SURVEILLANCE: QUARTER 3 HIGHLIGHTS**

Authors: Jackie Tomer, Epidemiology Intern and Brent Styer, MPH, Epidemiologist



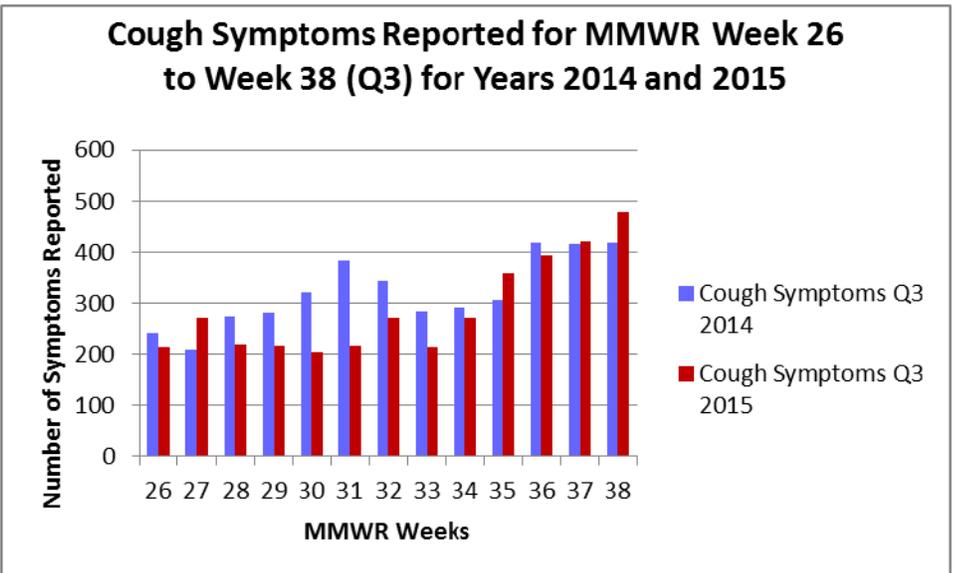
Percent change from last year (2014): +1.1%

Respiratory symptoms were slightly higher in Q3 2015 compared to the same timeframe in Q3 2014.



**The Office of Communicable
Disease Surveillance and
Epidemiology**

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Percent change from last year (2014): -6.71%

Cough symptoms were lower in Q3 2015 compared to the same timeframe in Q3 2014.

