

# Kane County Health Department Communicable Disease

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# Overview

- **Staff Updates**
- **Review of Data**
- **Communicable Disease Updates**

# Kane County Health Department

## Communicable Diseases

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### Communicable Diseases

Name	Title/Program	Phone (Fax)	E-mail
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### Tuberculosis

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Judy Zwart	Public Health Nurse TB	Office: 630-264-7662 (Fax: 630-264-7654)	<a href="mailto:zwartjudy@co.kane.il.us">zwartjudy@co.kane.il.us</a>



# TB Profile 2013-2018

YEAR	Confirmed Active Kane Cases	Rate/100,000		
		U.S	Illinois	Kane
2013	17	3.03	2.54	3.3
2014	12	2.9	2.58	2.28
2015	18	3	2.5	3.4
2016	17	2.9	2.7	3.2
2017	16	2.8	2.62	3.04
2018	9	2.8	2.48	1.7

Source: Illinois Department of Public Health (IDPH)





## Communicable Diseases in Kane County

2013-2018<sup>†</sup>

INEDSS report ran 04/30/2019

Disease	2013	2014	2015	2016	2017	5 Year Mean	2018
Acute Flaccid Myelitis						0	1
Anaplasma phagocytophilum (formerly HGA)				1	1	0	
Bruceellosis						0	1
Campylobacteriosis*				52	51	40	95
Chikungunya Non-Neuroinvasive Disease		2	1			1	
Chlamydia			1954	2033	2170	1,697	2328
Creutzfeldt-Jakob Disease (CJD) <sup>‡</sup>	1		1		2	1	
Cryptosporidiosis	11	9	3	4	6	8	5
Cyclosporiasis			2			7	35
Dengue Hemorrhagic Fever (Used until 2015)		1				0	
Ehrlichia chaffeensis (formerly HME)		1				0	
Giardiasis	14					3	
Gonorrhea			332	490	494	350	435
Haemophilus Influenzae Invasive Disease	2	5	7	5	7	6	6
Hemolytic Uremic Syndrome (HUS) Post Diarrheal		1				0	
Hepatitis A	4	1	4	4	4	4	1
Hepatitis B Acute	3	2	1		1	1	
Hepatitis B Chronic	25	32	35	32	33	37	27
Hepatitis B, Perinatal Case Management						0	1
Hepatitis C Virus Acute Infection		2		1	1	1	3
Hepatitis C Virus Chronic Infection	110	133	138	122	147	154	120
Histoplasmosis	2	2	2	9	5	4	2
Influenza with ICU Hospitalization	16	47	16	20	56	45	72
Legionellosis - Legionnaires Disease	9	8	6	12	16	14	18
Listeria Invasive Disease		2		2	2	1	1
Lyme Disease	18	5	7	7	9	11	11
Malaria	1	1	1	1	2	2	5
Meningococcal (Neisseria Meningitidis) Invasive Disease	1			1		0	
MRSA in Infants less than 61 days <sup>‡</sup>	2	3	4	5	8	5	5
Mumps		2	4	5	19	8	9

<sup>†</sup> Includes confirmed and probable cases

\* Newly reportable effective January 1, 2016

<sup>‡</sup> No longer reportable starting January 1, 2019





## Communicable Diseases in Kane County

2013-2018<sup>†</sup>

INEDSS report ran 04/30/2019

Disease	2013	2014	2015	2016	2017	5 Year Mean	2018
Paratyphi A	1				2	1	
Pediatric Influenza Death						0	2
Pertussis	24	13	17	33	12	23	18
Salmonellosis	98	91	97	42	55	88	57
Shiga toxin-producing E. coli (STEC)- O157:H7	1	4	2	1		2	
Shiga toxin-producing E. coli (STEC)- Shiga toxin positive, non-O157 serotype	8	5	3	3	1	5	3
Shiga toxin-producing E. coli (STEC)- Shiga toxin pos, not cultured or serotyped						1	6
Shigellosis	13	52	26	18	9	25	7
Spotted Fever Rickettsioses		1				0	1
Streptococcal Disease Invasive Group A	5	12	10	10	6	11	11
Streptococcal Disease Invasive Group A with Necrotizing Fasciitis		2			2	1	1
Streptococcal Toxic Shock Syndrome	5	1	2	5	3	4	2
Streptococcal Toxic Shock Syndrome with Necrotizing Fasciitis	2	1	2		1	1	
Streptococcus Pneumoniae - Drug Resistant Invasive Disease	1					0	
Streptococcus Pneumoniae - Non Drug Resistant Invasive Disease (< 5 years)	1			2	2	1	
TB Disease	13	10	11	9	8	10	1
Toxic Shock Syndrome due to S. aureus			1	1	1	1	
Tularemia			1			0	
Typhus Murine						0	1
Unusual Illness		3				1	
Varicella (Chickenpox)	49	53	25	35	26	42	24
Vibriosis		1		1	1	1	2
West Nile Virus Neuroinvasive Disease		1	4	3	2	3	3
West Nile Virus Non-Neuroinvasive Disease		1		4		2	4
Yersiniosis <sup>£</sup>			1			0	1
Zika Virus Disease, Non-Congenital				6		1	

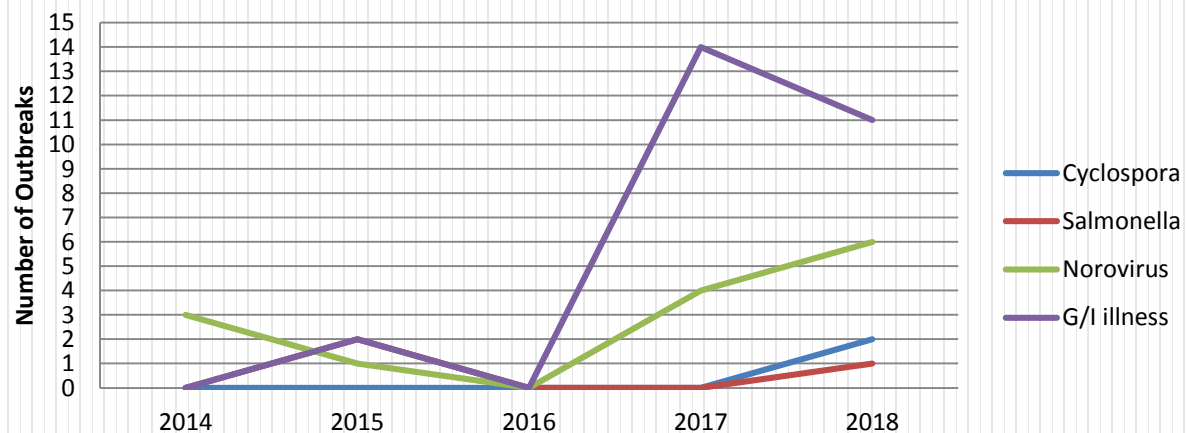
<sup>£</sup> No longer reportable starting January 1, 2019



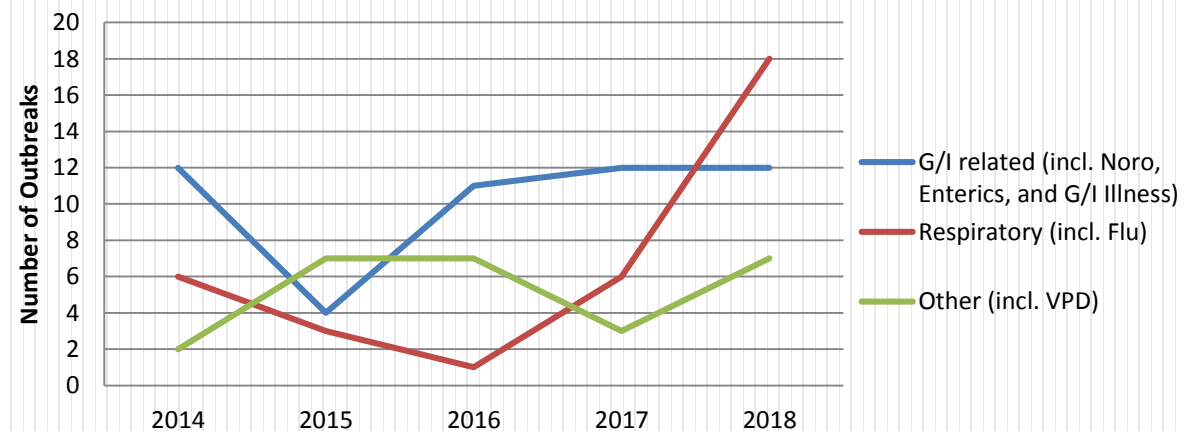
# Kane County Outbreaks 2014-2018

	2014	2015	2016	2017	2018
<b>Total # Outbreaks</b>	23	19	19	28	45
<b>Foodborne Outbreaks</b>	3	5	0	7	8
<b>Waterborne Outbreaks</b>	0	0	0	0	0
<b>Person-to-Person Outbreaks</b>	20	14	19	21	37

## Foodborne Outbreaks 2014-2018

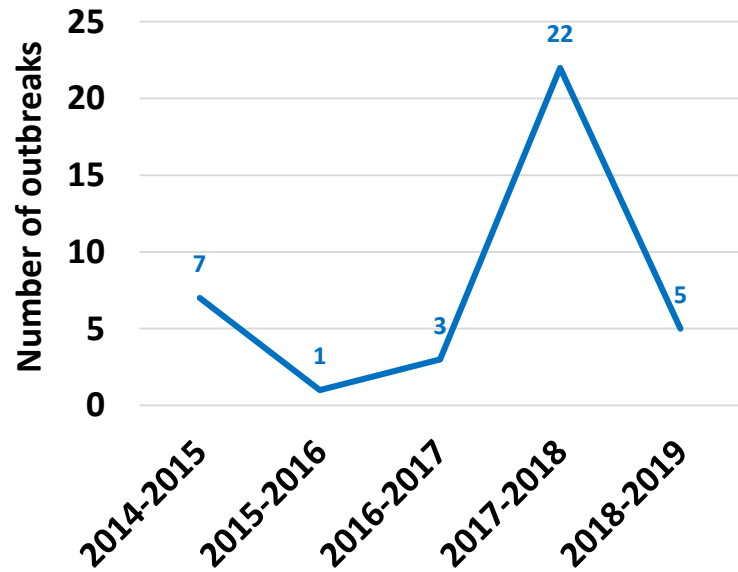


## Person to Person Outbreaks 2014-2018



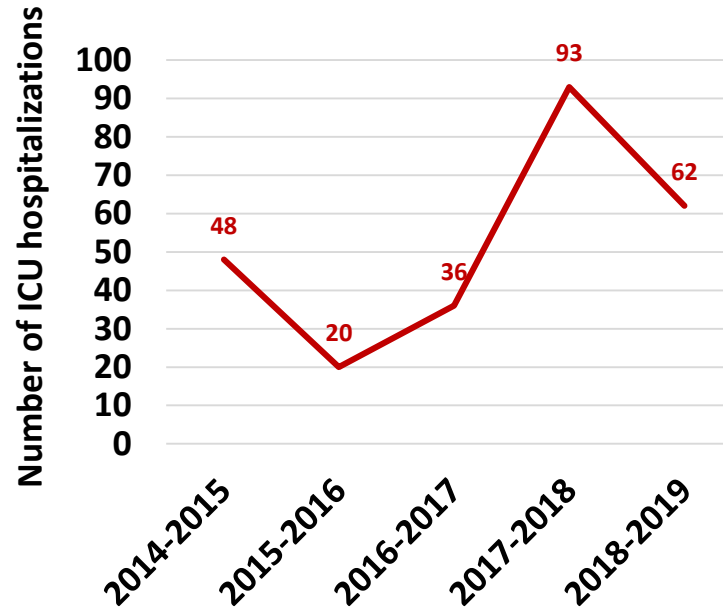
# Influenza Outbreaks

### Trends of Influenza Outbreaks in Kane County



*Flu Season: October - May*

### Trends of Influenza with ICU Hospitalizations in Kane County



*Flu Season: October - May*



# Outbreak Definitions

- **General** – An outbreak is defined as the occurrence of illness in a person or a group of epidemiologically associated persons, with the rate of frequency clearly in excess of normal expectations

(IDPH Communicable Disease Rules and Regulations)

# Outbreak Definitions

- Acute gastroenteritis (AGE) in a LTCF –
  - An outbreak is defined as two or more A.G.E cases occurring in a unit with initial dates of onset within 48 hours of each other. (IDPH Guidelines for Prevention and Control of Viral Acute Gastroenteritis Outbreaks in Illinois Long-Term Care Facilities, 2012)
  - Examples
    - Norovirus
    - Rotovirus
- Scabies, suspect outbreak –
  - Two or more symptomatic persons with epi-linked exposure AND
  - None of the affected persons are diagnosed with Norweigan (crusted) scabies AND
  - Only ONE person is skin scraping positive, OR
  - Healthcare provider diagnosis of scabies (either skin scraping is not performed or skin scraping performed with negative results) and scabicide treatment is ordered for TWO or more persons.
- Scabies, Confirmed outbreak –
  - One case of healthcare provider diagnosed Norweigan (crusted) scabies, OR
  - TWO or more symptomatic person with epi-linked exposure and at least TWO are skin scraping positive.

# Outbreak Definitions

- **Influenza:** Two or more cases of ILI occurring within 72 hours among residents in a unit of the facility with at least one of the ill residents having laboratory-confirmed influenza.
  - **Congregate Settings Include (but are not limited to):**
    - Long-Term Care Facilities
    - Correctional Facilities
    - Group Homes
- **Disease Cluster for Investigation:** Occurrence of more cases of a particular disease than expected for a given place and time or a number of ill people with similar signs and symptoms (or a diagnosis) whose symptoms have onsets in close proximity to one another in space and/or time.

# Common Outbreaks for Long-Term Care Facilities

- Respiratory
  - Influenza
  - Pneumonia
- Scabies
- Antibiotic Resistant
  - C. Diff
- Gastroenteritis
  - Norovirus
  - Rotovirus
- Group A Strep

# Communicable Disease Proposed Amendments

- Control of Communicable Disease Code (77 Ill. Adm. Code 690)
- Communicable Disease Updates
  - 690.322 Arboviral Infections (~~Including, but Not limited to, Chikungunya Fever, California Encephalitis, St. Louis Encephalitis, Dengue Fever and West Nile Virus~~) (Reportable by mail, telephone, facsimile or electronically as soon as possible, within ~~seven~~ three days)
  - 690.335 Campylobacteriosis (reportable by mail, telephone, facsimile or electronically, within ~~7~~ three days)
  - 690.360 Cholera (Toxigenic Vibrio cholera O1 or O139) (Reportable by telephone, or facsimile or electronically, as soon as possible, within 24 hours)
  - 690.368 Cyclosporiasis (Reportable by mail, telephone, facsimile or electronically, within ~~seven~~ three days)
  - 690.405 Multi-drug resistant organisms considered to be of epidemiologic importance due to either severity of clinical disease, potential for transmission of genetic elements, or opportunities for effective control efforts.

# Communicable Diseases Proposed Amendments

- Communicable Disease Updates
  - 690.444 Hemolytic Uremic Syndrome, Post-diarrheal (reportable by telephone or facsimile, as soon as possible, within 24 hours)
  - 690.451 Hepatitis B and ~~Hepatitis D~~ (Reportable by mail, telephone, facsimile or electronically, within ~~seven~~ three days)
  - 690.460 Histoplasmosis (Reportable by mail, telephone, facsimile or electronically as soon as possible, within ~~seven~~ three days)
  - 690. 465 Influenza, Death (in persons ~~less~~ younger than 18 years of age) (Reportable by mail, telephone, facsimile or electronically as soon as possible, within ~~7~~ three days)
  - 690.475 Legionellosis (reportable by mail, telephone, facsimile or electronically as soon as possible, within ~~seven~~ three days)
  - 690.530 Measles, suspect, probable or confirmed (Reportable by telephone as soon as possible, within 24 hours)

# Communicable Diseases Proposed Amendments

- Communicable Disease Code Updates
  - Permit the investigation for non-communicable events
    - “control of notifiable diseases and conditions code”
    - “Authority: Implementing the Communicable Disease Report Act [745 ILCS 45] and Department of Public Health Powers and Duties Law [20 ILCS 2310] and implementing and authorized by the Department of Public Health Act [20 ILCS 2305]
  - 690.30
    - Change “communicable to notifiable
    - Add “and conditions” after “diseases”
  - 690.100
    - Remove “contagious”
    - Remove “or communicable and may be dangerous to the”
    - Add “ or of public health significance”
  - 690.295
    - Remove “caused by an infectious agent”
    - Change “reportable to notifiable”



# Communicable Diseases Reportable Update

- Infectious Diseases no longer reportable
  - January 2019
    - Creutzfeldt Jakob Disease (CJD)
    - Leprosy (Hansen's Disease)
    - Staphylococcus aureus, Methicillin Resistant (MRSA) infection, clusters of two or more laboratory confirmed cases occurring in community settings
    - Staphylococcus aureus, Methicillin Resistant (MRSA), any occurrence in an infant less than 61 days of age
    - Streptococcus pneumoniae, invasive disease in children less than 5 years
    - Yersiniosis



# REPORTABLE DISEASES & CONDITIONS



## CLASS IA

WITHIN 3 HOURS

ANTHRAX  
ANY SUSPECTED BIOTERRORIST THREAT OR EVENT  
ANY UNUSUAL CASE OF A DISEASE OR CONDITION CAUSED BY AN  
INFECTIOUS AGENT NOT LISTED OF URGENT PUBLIC HEALTH  
SIGNIFICANCE  
BOTULISM, FOODBORNE  
BRUCELLOSIS\*\*  
DIPHTHERIA

INFLUENZA A, VARIANT VIRUS  
PLAGUE  
POLIOMYELITIS  
Q FEVER (COXIELLA BURNETII) \*\*  
SEVERE ACUTE RESPIRATORY SYNDROME (SARS)  
SMALLPOX  
TULAREMIA\*\*

\*\* If suspected to be a bioterrorist event  
or part of an outbreak

## CLASS IB

24 HOURS

BOTULISM INTESTINAL, WOUND, AND OTHER  
BRUCELLOSIS  
CHICKENPOX (VARICELLA)  
CHOLERA (TOXIGENIC VIBRIO CHOLERA 01 OR 0139)  
CONGENITAL RUBELLA SYNDROME  
ENTERIC ESCHERICHIA COLI INFECTION: SHIGA TOXIN PRODUCING *E.*  
*COLI* (STEC), *E. COLI*: 0157:H7  
HAEMOPHILUS INFLUENZAE, MENINGITIS & OTHER INVASIVE DISEASE  
HANTAVIRUS PULMONARY SYNDROME  
HEMOLYTIC UREMIC SYNDROME, POST-DIARRHEAL  
HEPATITIS A  
INFLUENZA, RELATED TO INTENSIVE CARE UNIT (ICU) ADMISSIONS  
MEASLES  
MUMPS  
NEISSERIA MENINGITIDIS, MENINGITIS, INVASIVE DISEASE

*OUTBREAKS OF PUBLIC HEALTH SIGNIFICANCE (INCLUDING, BUT NOT  
LIMITED TO FOODBORNE AND WATERBORNE)*  
PERTUSSIS (WHOOPIING COUGH)  
Q. FEVER (COXIELLA BURNETII)  
RABIES, HUMAN  
RABIES POTENTIAL HUMAN EXPOSURE AND ANIMAL RABIES  
RUBELLA (GERMAN MEASLES)  
SALMONELLA TYPHI INFECTIONS; TYPHOID FEVER  
SMALLPOX VACCINATION COMPLICATION  
STAPHYLOCOCCUS AUREUS INFECTIONS WITH INTERMEDIATE OR HIGH  
LEVEL RESISTANCE TO VANCOMYCIN  
STREPTOCOCCAL INFECTIONS, GROUP A, INVASIVE, INCLUDING TOXIC  
SHOCK SYNDROME, NECROTIZING FASCIITIS  
TULAREMIA  
TYPHUS

## CLASS II

7 DAYS

AIDS (ACQUIRED IMMUNODEFICIENCY SYNDROME)  
BABESIOSIS (TICKBORNE DISEASE)  
CALIFORNIA ENCEPHALITIS (ARBOVIRAL DISEASE)  
CAMPYLOBACTERIOSIS  
CANDIDA AURIS, CLINICAL<sup>§</sup>  
CHANCROID  
CHIKUNGUNYA (ARBOVIRAL DISEASE)  
CHLAMYDIA  
CRYPTOSPORIDIOSIS  
CYCLOSPORIASIS  
DENGUE (ARBOVIRAL DISEASE)  
EASTERN EQUINE ENCEPHALITIS (ARBOVIRAL DISEASE)  
EHRlichiosis, HUMAN GRANULOCYTOTROPIC ANAPLASMOSIS  
(HGA) (TICKBORNE DISEASE)  
EHRlichiosis, MONOCYTOTROPIC (HME) (TICKBORNE DISEASE)  
GONORRHEA  
HEPATITIS B (ACUTE INFECTIONS AND CARRIERS)  
HEPATITIS C (ACUTE INFECTIONS AND CARRIERS)  
HEPATITIS D  
HISTOPLASMOSIS  
HIV (HUMAN IMMUNODEFICIENCY VIRUS) INFECTION  
INFLUENZA, DEATHS IN THOSE <18 YRS. OLD  
LEGIONELLOSIS (LEGIONNAIRES' DISEASE)

LEPTOSPIROSIS  
LISTERIOSIS (REPORT ONLY MOTHER IF MOTHER & NEWBORN  
POSITIVE)  
LYME DISEASE (TICKBORNE DISEASE)  
MALARIA  
PSITTACOSIS (CHLAMYDIA PSITTACCI)  
REYE SYNDROME  
ROCKY MOUNTAIN SPOTTED FEVER (TICKBORNE DISEASE)  
SALMONELLA PARATYPHI INFECTION: PARATYPHI A, B, C  
SHIGELLOSIS  
ST. LOUIS ENCEPHALITIS (ARBOVIRAL DISEASE)  
STREPTOCOCCUS PNEUMONIAE AND OTHER INVASIVE DISEASE IN  
THOSE <5 YRS. OLD  
SYPHILIS  
TETANUS  
TOXIC SHOCK SYNDROME, STAPHYLOCOCCUS AUREUS  
TRICHINOSIS  
TUBERCULOSIS  
VIBRIOSIS (NON-TOXIGENIC VIBRIO CHOLERA 01 OR 0139)  
WEST NILE VIRUS (ARBOVIRAL DISEASE)  
WESTERN EQUINE ENCEPHALITIS (ARBOVIRAL DISEASE)  
ZIKA VIRUS (ARBOVIRAL DISEASE)

**Report 24 hours a day  
630-208-3801**

All reports are confidential and should include:

- the disease or condition being reported
- patients name, age, sex, race/ethnicity, address and telephone number
- reporters name, address and telephone number

New for 2019: <sup>§</sup>*Candida auris, clinical, is reportable.*  
Effective, 1/1/2019, individual cases of the following diseases are no longer reportable: Creutzfeldt-Jakob Disease (CJD), Enterotoxigenic *E. coli* (ETEC), Enteropathogenic *E. coli* (EPEC), Enteroinvasive *E. coli* (EIEC), Yersiniosis, Leprosy, *S. aureus*, Methicillin resistant (MRSA) clusters (two or more lab confirmed cases) in a community setting, *S. aureus*, Methicillin resistant (MRSA) in infants <61 days . Outbreaks of these diseases or conditions remain reportable.  
Updated: 11/6/19



# Stop & Report



## Infectious Diseases

The following are mandated\* by the State of Illinois to be reported to Kane County Health Department within the designated times. Thank you for your assistance.

(\*Control of Communicable Disease Code - 77 Illinois Administrative Code 690, February 11, 2014)

## Communicable Diseases\*\*

(\*\*List of diseases on the opposite side)

PHONE 630-208-3801 FAX 630-897-8128

## Sexually Transmitted Diseases

AIDS – Chancroid – Chlamydia – Gonorrhea – HIV – Syphilis

PHONE 630-208-3801 FAX 630-897-8128

## Tuberculosis

PHONE 630-264-7665 FAX 630-264-7654

**All reports are confidential and should include:**

- the disease or condition being reported
- patient's name, age, sex, race/ethnicity, address and telephone number
- physician's name, address and telephone number

Kane County Health Department  
1240 N. Highland Ave.  
Aurora, IL 60506  
Call: 630-208-3801 (24 hours a day)





# THANK YOU

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# Resources

- Centers for Disease Control and Prevention

<http://www.cdc.gov/>

- IDPH Administrative Codes

[http://www.idph.state.il.us/rulesregs/2018\\_Rules/77-IAC-690-071018.pdf](http://www.idph.state.il.us/rulesregs/2018_Rules/77-IAC-690-071018.pdf)

- Illinois Department of Public Health

<Http://www.dph.Illinois.gov>

- Kane County Health Department Communicable Disease Website

<http://kanehealth.com/Pages/Communicable-Disease.aspx>

