



# Mecklenburg County Health Department Reportable Communicable Diseases

Reported to NC Department of Health and Human Services  
Reflects report dates, not always onset dates

Monthly Report: February 2015  
Preliminary Figures

HIV/AIDS & Syphilis case reports are currently unavailable due to changes in reporting system

DISEASES		January	February	March	April	May	June	July	August	September	October	November	December	2015 Total Cases (Year to Date)	February 5-yr Avg.	Year-to-Date (5 Year Average)
Sexually Transmitted and Bloodborne	AIDS** 1,3	-	-											-	-	-
	Chancroid**	0	0											0	0	0
	Chlamydia (Laboratory confirmed) <sup>3</sup>	1141	950											2091	546	1341
	Gonorrhea** <sup>3</sup>	149	412											561	200	402
	Granuloma Inguinale**	0	0											0	0	0
	Hep. Type B, Acute**	2	1											3	1	1
	Hep. Type B, Carrier	15	16											31	12	26
	Perinatal Hepatitis B**	0	0											0	0	0
	Hep. Type C, Acute	0	0											0	0	0
	HIV Disease** <sup>1,3</sup>	-	-											-	-	-
	Lymphogranuloma Venereum	0	0											0	0	0
	Nongonococcal Urethritis (NGU)	0	0											0	12	27
	Pelvic Inflammatory Disease (PID)	0	0											0	1	1
	Syphilis** <sup>1,3</sup>	-	-											-	-	-
	Congenital Syphilis** <sup>3</sup>	-	-											-	-	-
Enteric, Food and Waterborne	Botulism <sup>2</sup>	0	0											0	0	0
	Campylobacter Infection**	7	2											9	4	9
	Cholera**	0	0											0	0	0
	Cryptosporidiosis**	2	0											2	2	2
	Cyclosporiasis**	0	0											0	0	0
	C. perfringens**	0	0											0	0	0
	E. coli, Shiga toxin-producing**	0	0											0	1	1
	Hepatitis A**	0	1											1	1	1
	Hemolytic-Uremic Syndrome**	0	0											0	0	0
	Legionellosis	1	0											1	0	1
	Listeriosis**	0	0											0	0	0
	Salmonellosis**	7	3											10	6	16
	Shigellosis**	7	3											10	2	13
	Staphylococcal (food poisoning)**	0	0											0	0	0
	Trichinosis	0	0											0	0	0
	Typhoid, Acute**	0	0											0	0	0
	Typhoid, Carrier**	0	0											0	0	0
	Vibrio Vulnificus	0	0											0	0	0
	Vibrio Infection (other than cholera) **	0	0											0	0	0
	Other or Unknown Foodborne**	0	0											0	0	0
Vaccine Preventable	Diphtheria**	0	0											0	0	0
	Hemophilus influenzae, invasive disease**	2	2											4	2	3
	Influenza Death **	5	4											9	2	3
	Measles (Rubeola), Total**	0	0											0	0	0
	Measles, Indigenous	0	0											0	0	0
	Measles, Imported	0	0											0	0	0
	Mumps	1	0											1	0	1
	Pertussis (whooping cough)**	2	8											10	5	7
	Polio, paralytic**	0	0											0	0	0
	Rubella**	0	0											0	0	0
	Rubella, Congenital Syndrome	0	0											0	0	0
	Tetanus	0	0											0	0	0

DISEASES		January	February	March	April	May	June	July	August	September	October	November	December	2015 Total Cases (Year to Date)	February 5-yr Avg.	Year-to-Date (5 Year Average)
Direct Contact and Respiratory	Influenza, Novel Virus Infection	0	0											0	0	0
	Severe Acute Respiratory Syndrome (SARS)**	0	0											0	0	0
	Smallpox <sup>2</sup>	0	0											0	0	0
	VRSA ( <i>Staphylococcal aureus</i> with reduced susceptibility to Vancomycin)**	0	0											0	0	0
	Streptococcal infections, Group A invasive	1	1											2	2	5
	Tuberculosis**	0	0											0	0	0
	Vaccinia**	0	0											0	0	0
Vectorborne and Zoonotics	Anthrax <sup>2</sup>	0	0											0	0	0
	Brucellosis	0	0											0	0	0
	Chikungunya**	1	2											3	0	1
	Dengue	0	0											0	0	0
	Ehrlichiosis	0	0											0	0	0
	Hantavirus Infection	0	0											0	0	0
	Hemorrhagic Fever, viral <sup>2</sup>	0	0											0	0	0
	Leprosy (Hansen's Disease)	0	0											0	0	0
	Leptospirosis	0	0											0	0	0
	Lyme disease	1	1											2	0	0
	Malaria	0	0											0	0	1
	Monkeypox**	0	0											0	0	0
	Plague <sup>2</sup>	0	0											0	0	0
	Psittacosis	0	0											0	0	0
	Q Fever	0	0											0	0	0
	Rabies, Animal <sup>4</sup>	1	1											2	1	2
	Rabies, Human**	0	0											0	0	0
	Rocky Mountain Spotted Fever	0	0											0	0	0
	Tularemia <sup>2</sup>	0	0											0	0	0
Typhus, Epidemic (Louse-borne)	0	0											0	0	0	
Yellow Fever	0	0											0	0	0	
Encephalitis, Meningitis and Prion Diseases	Creutzfeldt-Jakob Disease (CJD)	0	0											0	0	0
	Encephalitis, arboviral	0	0											0	0	0
	Meningococcal Disease**	0	0											0	0	0
	Meningitis, Pneumococcal	0	0											0	1	2
Other	Toxic Shock Syndrome non-Strep.	0	0											0	0	0
	Streptococcal Toxic Shock Syndrome	0	0											0	0	0

**REPORT TIMETABLE FOR DISEASES/CONDITIONS (for a complete listing of NC Reportable Disease, please call 919-715-7404)**

<b>Highlighted diseases</b>	Category A Bioterrorism Agents/Diseases (report immediately by phone)
	Disease/Condition with Pandemic Potential (report immediately by phone)
**	Reportable within 24 hours after the disease or condition is reasonably suspected to exist. (by phone and form)
All Other Conditions	All other conditions, report within 7 days, (by form)

**TO REPORT DISEASES BY TELEPHONE:**

Animal Bite Consults: 704.336.6440

General Diseases including Hepatitis B: Belinda Worsham: 704.336.5490 Beth Quinn: 704.336.5398 Penny Moore: 704.353.1270 Freda Grant: 704.336.6436  
 Shawn Wilson: 704.432.1975 Brian Lackey: 704.336.5498 Taleba Parris: 704.336.5076 Julie Secret 704.432.0069

Sexually Transmitted Diseases and HIV/AIDS: 704.432.1742

Suspected Foodborne Outbreaks: Bill Hardister 704.336.5533

Tuberculosis: Kristi McCray 980.314.9470

Report forms can now be found on-line at: <http://www.meckhealth.org>

1 From January to December, 2014, there were 362 HIV cases and 190 AIDS cases reported in Mecklenburg County. HIV disease represents all diagnoses of HIV infection regardless of the stage of the disease. Therefore AIDS cases are considered a subset of HIV Disease. HIV disease reports and AIDS case reports should never be combined to estimate an infected population, and should be considered separately. During the same time period, there were 234 cases of Syphilis (primary, secondary, early latent) reported.

2 Category A Bioterrorism Agents/Disease including pathogens that are rarely seen in the United States and that pose a risk to national security because they can be easily disseminated or transmitted from person to person; result in high mortality rates and have the potential for major public health impact; might cause public panic and social disruption; and require special action for public health preparedness.

3 Case numbers are lower than expected or not available due to transition to a new reporting system.

4. Rabies: (February 1 rabid racoon)