

Mecklenburg County Health Department Reportable Communicable Diseases



Reported to NC Department of Health and Human Services
 Reflects Report Dates Not Always Onset Dates
 Figures subject to change as new information becomes available

Monthly Report: JANUARY 2008

DISEASES		January	February	March	April	May	June	July	August	September	October	November	December	2008 Total Cases (Year to Date)	January 5-yr Avg.	Year-to-Date (5 Year Average)
Sexually Transmitted and Bloodborne	AIDS ¹	4												4	8	8
	Chancroid**	0												0	0	0
	Chlamydia (Laboratory confirmed)	314												314	240	240
	Gonorrhea**	209												209	179	179
	Granuloma Inguinale**	0												0	0	0
	Hepatitis (Type B and Type C)	18												18	0	0
	<i>Hep. Type B, Acute**</i>	2												2	2	2
	<i>Hep. Type B, Carrier</i>	16												16	22	22
	<i>Perinatal Hepatitis B**</i>	0												0	0	0
	<i>Hep. Type C, Acute</i>	0												0	0	0
	HIV Disease ¹	14												14	14	14
	Lymphogranuloma Venereum	0												0	0	0
	Nongonococcal Urethritis (NGU)	72												72	29	29
	Pelvic Inflammatory Disease (PID)	0												0	3	3
Syphilis**	4												4	8	8	
Congenital Syphilis**	0												0	0	0	
Enteric, Food and Waterborne	Botulism	0												0	0	0
	Campylobacter Infection**	6												6	6	6
	Cholera**	0												0	0	0
	Cryptosporidiosis**	0												0	2	2
	Cyclosporiasis**	0												0	0	0
	C. perfringens**	0												0	0	0
	E. coli, Shiga toxin-producing**	3												3	0	0
	Hepatitis A**	1												1	0	0
	Hemolytic-Uremic Syndrome**	0												0	0	0
	Legionellosis	0												0	0	0
	Listeriosis**	0												0	0	0
	Salmonellosis**	6												6	27	27
	Shigellosis**	0												0	60	60
	Staphylococcal (food poisoning)**	0												0	0	0
	Trichinosis	0												0	0	0
	Typhoid**	0												0	0	0
	<i>Typhoid, Acute**</i>	0												0	0	0
	<i>Typhoid, Carrier**</i>	0												0	0	0
	Vibrio Vulnificus	0												0	0	0
	Vibrio Infection (other than cholera) **	0												0	0	0
Other or Unknown Foodborne**	0												0	0	0	
Vaccine Preventable	Diphtheria**	0												0	0	0
	Hemophilus influenzae, invasive disease**	2												2	2	2
	Influenza Death (<18 yrs. Old)**	0												0	0	0
	Measles (Rubeola), Total**	0												0	0	0
	<i>Measles, Indigenous</i>	0												0	0	0
	<i>Measles, Imported</i>	0												0	0	0
	Mumps	1												1	0	0
	Pertussis (whooping cough)**	4												4	13	13
	Polio, paralytic**	0												0	0	0
	Rubella**	0												0	0	0
Rubella, Congenital Syndrome	0												0	0	0	
Tetanus	0												0	0	0	

Reportable Communicable Diseases Monthly Report--JANUARY 2008 Page 2		January	February	March	April	May	June	July	August	September	October	November	December	2008 Total Cases (Year to Date)	January 5-yr Avg.	Year-to-Date (5 Year Average)
DISEASES																
Direct Contact and Respiratory	Influenza, Novel Virus Infection	0												0	0	0
	Severe Acute Respiratory Syndrome(SARS)**	0												0	0	0
	Smallpox	0												0	0	0
	VRSA (<i>Staphylococcal aureus</i> with reduced susceptibility to Vancomycin)**	0												0	0	0
	Streptococcal infections Group A invasive	2												2	3	3
	Tuberculosis**	2												2	4	4
	Vaccinia**	0												0	0	0
Vectorborne and Zoonotics	Anthrax	0												0	0	0
	Brucellosis	0												0	0	0
	Dengue	0												0	0	0
	Ehrlichiosis	0												0	0	0
	Hantavirus Infection	0												0	0	0
	Hemorrhagic Fever, viral	0												0	0	0
	Leptospirosis	0												0	0	0
	Lyme disease	0												0	0	0
	Malaria	0												0	0	0
	Monkeypox**	0												0	0	0
	Plague	0												0	0	0
	Psittacosis	0												0	0	0
	Q Fever	0												0	0	0
	Rabies, Total	0												0	0	0
	<i>Rabies, Animal</i>	0												0	1	1
	<i>Rabies, Human**</i>	0												0	0	0
	Rocky Mountain Spotted Fever	0												0	1	1
Tularemia	0												0	0	0	
Typhus, Epidemic (Louse-borne)	0												0	0	0	
Yellow Fever	0												0	0	0	
Encephalitis, Meningitis and Prion Diseases	Creutzfeldt-Jakob Disease (CJD)	0												0	0	0
	Encephalitis, arboviral	0												0	0	0
	Meningococcal Disease**	1												1	0	0
	Meningitis, Pneumococcal	1												1	1	1
Other	Toxic Shock Syndrome	0												0	0	0
	Streptococcal Toxic Shock Syndrome	0												0	0	0

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

Highlighted diseases	Category A Bioterrorism Agents/Diseases ² (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 card)
All Other Conditions	All other conditions, report within 7 days, (by card)

TO REPORT DISEASES BY TELEPHONE:

- Animal bite consults:** Al Piercy 704.336.6440
- General Diseases including Hepatitis B:** Belinda Worsham 704.336.5498 Jane Hoffman 704.336.5490 Beth Quinn 704.336.5398 Penny Moore 704.353.1270 Freda Grant 704.336.6436
- Sexually Transmitted Diseases and HIV/AIDS:** 704.432.1742
- Suspected Foodborne Outbreaks:** Bill Hardister 704.336.5533
- Tuberculosis:** Kristi McCray 704.432.2496
- To obtain a supply of the North Carolina Communicable Disease Report Cards: 704.336.2817 or 919.715.7404**

1 The cumulative number for HIV Disease (not AIDS) is 5,499 in Mecklenburg County and 31,282 in North Carolina. This figure is based on reports of confidential testing done between January 1990 - December 2006. Please note a change reflecting recent changes in North Carolina reporting, "HIV Disease" refers to all people infected with human immunodeficiency virus, with and without an AIDS defining condition. Previously data were reported separately for HIV and AIDS. Currently AIDS cases are subset of HIV disease. AIDS case reporting began in the United States in 1981 and North Carolina in 1984. HIV infection reporting began in North Carolina in January 1990 and HIV disease reporting in 2001.

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.