



Communicable Disease

Oneida County Health Department

October 2013

Surveillance Report

LEGIONELLOSIS

1976 Philadelphia, Pennsylvania, reporters race to find the origin of Legionnaires Disease



Legionellosis is associated with two clinically and epidemiologically distinct illnesses; Legionnaires disease and Pontiac fever. Legionnaires disease can be associated with chills, myalgia, GI tract, CNS, and renal manifestations. Respiratory failure and death can occur.

- It is acquired through inhalation of aerosolized water contaminated with *L.pneumophila*. Person-to-person transmission has not been demonstrated.
- Healthcare-associated infections can occur and often are related to contamination of the hot water supply.
- Occurs most commonly in people who are elderly, are immunocompromised, or have underlying lung disease
- Reported legionellosis incidence rates increased nearly threefold during 2000--2009. [click here to see why:](#)
- http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6032a3.htm?s_cid=mm6032a3_w
- Urine antigen tests may be adequate to diagnose and treat an individual, but sputum culture is still indicated to facilitate epidemiological tracking.
- http://cid.oxfordjournals.org/content/44/Supplement_2/S27.full



Click here for Seasonal Influenza Information for Providers:
<http://www.health.ny.gov/diseases/communicable/influenza/seasonal/providers/>

Click here for Weekly Surveillance Report, Vaccine Updates, H7N9 Updates and More
<http://www.cdc.gov/flu/whatsnew.htm>

- NY State Weekly Reporting**
For the week ending
Oct. 26, 2013
- Geographically sporadic with confirmed cases in 10 counties plus New York City
 - 33 lab confirmed reports, which was 136% increase over last week.
 - 9 hospital admissions with lab-confirmed influenza
 - No influenza-associated pediatric deaths thus far this season

LEGIONELLOSIS (CONTINUED)

Top 10 things every clinician needs to know about legionellosis including diagnosing, testing, travel history, obtaining a specimen for culture, treating, and reporting cases.

[Click here for more information:](#)

<http://www.cdc.gov/legionella/clinicians.html>

Publications

CDC. [\[Increasing incidence of\] Legionellosis in the United States, 2000-2009](#). *MMWR* 2011;60:1083-1086.

CDC. [Surveillance for waterborne disease outbreaks and other health events associated with recreational water—United States, 2007-2008](#). *MMWR Surveill Summ.* 2011;60:1-32.



WHAT ABOUT WATER FEATURES IN HEALTHCARE FACILITIES?

The CDC Guidelines for Environmental Infection Control in Health-Care Facilities states all health-care facilities should “**Avoid placing decorative fountains and fish tanks in patient-care areas; ensure disinfection and fountain maintenance.**” Healthcare facilities with patients susceptible to Legionnaires’ disease should be cognizant of the inherent risk and liability associated with locating an ornamental water feature in any area which may be used, even as a thoroughfare, by those patients. Because of the significant risk associated with operating an ornamental feature in a healthcare facility, hospitals should implement the risk management plan for ornamental features then verify results by testing the feature water quarterly to insure legionella levels are consistently less than 1 cfu (colony forming unit). If testing verifies the desired levels are being consistently maintained then after one year, testing can be reduced to annually

[For more information– click here:](#)

<http://www.legionellae.org/guidelines/ControlofLegionellainWaterFeatures.pdf>

“healthcare facilities with ornamental features should comply with ASHRAE and OSHA guidelines...”

IMMUNIZATION UPDATES

NYSDOH Bureau of
 Immunization's
 provider newsletter
Immunize NY!
 Available at:
[http://www.health.ny.gov/
 prevention/immunization/
 providers](http://www.health.ny.gov/prevention/immunization/providers)

Are your VIS Sheets Up-To-Date?
 Download current
 version from CDC:
[http://www.cdc.gov/vaccines/
 pubs/vis/default.htm](http://www.cdc.gov/vaccines/pubs/vis/default.htm)

-CDC publishes report on influenza vaccination of pregnant women in Massachusetts during the 2009-2010 influenza season

CDC published influenza Vaccination Among Pregnant women-Massachusetts, 2009-2010 in the November 1 issue of *MMWR* (pages 854-857)

-CDC develops new resources to help providers increase HPV vaccination rates

<http://www.cdc.gov/vaccines/who/teens/for-hcp/hpv-resources.html>

COMMUNICABLE DISEASE SURVEILLANCE through September 30,

DISEASE	Sept.. 2013	YTD/ ' 13	YTD/ ' 12	DISEASE	Sept-2013	YTD/ ' 13	YTD/ ' 12
Tuberculosis	1	6	5	**Influenza A	0	89	90
Giardia	5	36	44	**Influenza B	0	117	4
Rabies Exposure	2	30	77	Salmonella	2	20	21
Chlamydia	*91	615	554	Cryptosporidiosis	7	19	29
Campylobacter	6	25	23	Cyclospora	0	0	0
Pertussis	0	9	27	Legionellosis	1	5	3
Lyme (confirmed)	3	71	22	Bacterial Meningitis	0	1	0

Comments

*September Chlamydia reported monthly cases are the highest in the past five years.

**Influenza data reflects confirmed cases from Sept 1, 2013 through June 30, 2014

*September, 2013 Chlamydia reports cases are the highest in the past 5 years