

# What's Going Around: A Communicable Disease Report

#### Diseases and conditions reported during September 29, 2024 - October 12, 2024::

This report is a bi-monthly snapshot of communicable diseases reported in El Paso County, as well as a report of disease trends and local health alerts. El Paso County Public Health's (EPCPH) Communicable Disease Program partners with the medical community and the public to limit and reduce the spread of diseases in our community.

#### Reportable diseases and conditions:

- 10 Animal Bites 4 pediatric, 6 adults; 2 recommended to receive rabies post-exposure prophylaxis (PEP)
- 8 Campylobacteriosis 2 pediatric, 6 adults
- 1 Carbapenem-Resistant Enterobacteriaceae (CRE)
   adult
- 1 Carbapenem-Resistant Pseudomonas Aeruginosa (CRPA) - adult
- 30 COVID-19-associated hospitalizations 2 pediatric, 28 adults
- 1 Cryptosporidiosis adult
- 3 Giardiasis adults
- 2 Influenza-associated hospitalization –adults
- 2 Invasive pneumococcal disease 1 pediatric, 1 adult
- 1 Legionellosis adult

- 10 Pertussis 7 pediatric, 3 adults
- 5 Salmonellosis 7 5 adults
- 7 STEC (Shiga toxin-producing E. coli) adults
- 5 Shigellosis adults
- 1 Varicella pediatric

#### **Additional reports:**

- Hospitalized Influenza since September 29, 2024: 2 total (2 Influenza A, 0 Influenza B, 0 Unsubtyped)
- Outbreaks reported:
  - 4 COVID-19 outbreaks 4 long term care facilities
  - 2 Pertussis outbreak schools
  - 2 Suspect Norovirus Outbreak childcare facility

For a list of reportable diseases and conditions and instructions on how to report, follow this <u>link</u>.

#### Health News: Mycoplasma pneumoniae infection

## Overview

- Mycoplasma pneumoniae bacteria can cause a wide spectrum of clinical symptoms including extrapulmonary manifestations for those infected.
- In general *M. pneumoniae* infections are often mild and self limiting, but serious complications can occur. Common manifestations include pharyngitis, tracheobronchitis, and pneumonia.
  - Symptoms of respiratory illness include cough, fever, headache, and malaise. Symptom onset can be gradual and subacute, slowly progressing to a persistent cough. Symptoms can last several weeks.
  - In children younger than five years old symptoms can include diarrhea, sneezing, sore throat, congestion, vomiting, watery eyes, and wheezing.
  - "Walking pneumonia" refers to a mild case of pneumonia where infected persons are not seriously ill, which is how the term originated. *Mycoplasma pneumoniae* infections are a common cause of this condition.
- Symptoms of *M. pneumoniae* infection typically appear one to four weeks after someone is exposed to the bacteria.

## Clinical Considerations

- **Testing**: Consider testing for *M. pneumoniae* along with other respiratory pathogens if you observe clustering of respiratory illness in your patients, especially among school-age children.
  - Nucleic acid amplification tests (NAATs) are the preferred method of diagnostic testing for *M. pneumoniae* infections. Acceptable specimen types include nasopharyngeal swabs, oropharyngeal swabs, and nasal and throat swabs.
- **Treatment**: Most cases of *M. pneumonia* infection are mild and resolve without treatment, though antibiotics can be used to treat more serious disease.
- **Prevention**: There is no vaccine to prevent infection with *M. pneumoniae*.
  - Symptomatic individuals should stay home until fever has been absent for at least 24 hours without the use of fever-reducing medication, all other symptoms are improving, and the person feels well enough to participate in usual activities.
- Reporting: M. pneumoniae infections are neither nationally reportable nor reportable in the State of Colorado.
   While health care providers are not required to report infections, national trends are monitored using syndromic and commercial laboratory data collected by the National Syndromic Surveillance Program (NSSP) and BIOFIRE Syndromic Trends.

## <u>Trends</u>

- An estimated two million infections occur in the United States each year with cases occurring more often in summer and early fall. There are usually peaks of illness every three to seven years, and in 2023 M. pneumoniae began to re-emerge after a prolonged period of low incidence since the start of the COVID-19 pandemic. (Source: https://www.cdc.gov/mycoplasma/php/surveillance/index.html)
- Using data from the NSSP, the CDC publishes the percent increase of pneumonia-associated emergency department visits with a Mycoplasma related diagnostic code. So far in 2024, CDC has seen an increase in *M. pneumoniae* infections, including in young children. Syndromic surveillance data indicate that *M. pneumoniae* infections began increasing in late spring/early summer of 2024.
  - The increase in two-four-yearolds is notable because these infections have historically been thought to affect school-age more than younger children. (Source: https://www.cdc.gov/mycoplasma /php/surveillance/index.html)
- Because M. pneumoniae is not a reportable condition it can be difficult to determine incidence locally.
   However, anecdotally, EPCPH has received an increased number of reports of M. pneumoniae infections from clinicians in August and September of 2024.

