

What's Going Around: A Communicable Disease Report

<u>Diseases and conditions reported during November 3 – 16, 2024:</u>

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:

- 6 Animal Bites 1 pediatric, 5 adults: 1 recommended to receive rabies post-exposure prophylaxis (PEP)
- 7 Campylobacter 2 pediatric, 5 adults
- 1 Coccidioidomycosis adult
- 1 Haemophilus influenzae adult
- 7 Influenza-associated hospitalizations 4 pediatric, 3 adults
- 8 Pertussis 7 pediatric, 1 adult
- 1 RSV-associated hospitalization adult
- 5 Salmonellosis 2 pediatric, 3 adults
- 2 Shiga-toxin producing e. coli (STEC) adults
- 1 West Nile Virus adult

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

Additional reports:

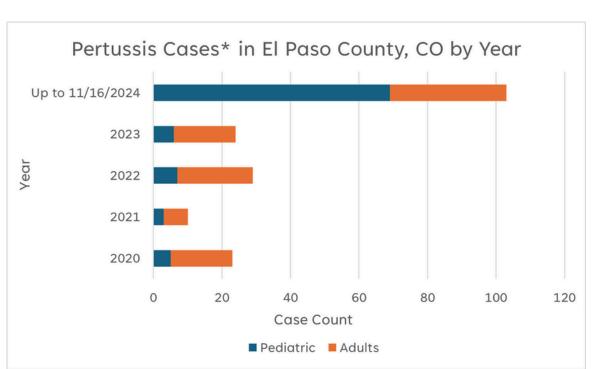
- Hospitalized Influenza since September 29, 2024: 14 total (14 Influenza A, 0 Influenza B, 0 unsubtyped)
- Outbreaks reported:
 - 2 Pertussis Outbreaks one associated with a high school and one with a homeschool program
 - 1 Influenza Outbreak associated with a childcare facility
 - 1 RSV Outbreak associated with an elementary
 - 1 Shiga-Toxin Producing E. Coli (STEC) Outbreak associated with a restaurant
 - 3 COVID outbreaks in long term care facilities (investigated by CDPHE)

<u>Health News: Increase in Pertussis in School Aged Children in El Paso County, CO</u>

- Pediatric cases of pertussis are on the rise in El Paso County, with 69 being reported from January 1 November 16, 2024, compared to 4 pediatric cases over the same time period in 2023.
- Since the beginning of the 2024-2025 school year, 51 cases of pertussis have been diagnosed in children attending K-12 schools in El Paso County. This is well above the number of cases in previous years during the same time frame (zero in 2023, four in 2022 and zero in 2021).
- Pertussis, also known as whooping cough, is caused by Bordetella pertussis. Transmission occurs by direct contact with respiratory droplets or saliva of an infected person.
- The incubation period is from exposure to illness onset is 5-21 days, with an average of 7-10 days.
- People with pertussis are infectious from illness onset through approximately 21 days after onset of cough. Infected persons are no longer contagious after completion of a full five days of antibiotic treatment.
- · Health care providers should consider a diagnosis of pertussis for patients presenting with a prolonged coughing illness and paroxysms of coughing, post-tussive vomiting, or an inspiratory whoop, OR an unexplained cough lasting two weeks in duration. For these patients, testing for pertussis is indicated. Pertussis infection can occur in vaccinated persons.
- · Providers should report laboratory confirmed and clinically suspect cases to Public Health within 24 hours.
- · The preferred method to test for pertussis is using PCR on a nasopharyngeal swab. PCR is most helpful during the first 3 weeks of illness, and results should be interpreted alongside clinical symptoms and epidemiologic information (such as exposure to someone with known or likely pertussis).
 - Serological testing for pertussis is not standardized across commercial laboratories and is not considered a confirmatory test. Many laboratories do not use assays specific enough to identify IgG antibody against pertussis toxin and are problematic to interpret in vaccinated persons. Additionally, IgM assays can be inadequately validated. Providers can make a clinical diagnosis of pertussis in a patient with an unexplained prolonged cough, particularly if other pertussis cough characteristics are present or there is a history of
- Empiric antibiotic treatment using a five-day course of azithromycin (or an appropriate alternative antibiotic) should be administered prior to receiving test results for patients suspected of having pertussis and who have been coughing for 21 days or less.
- Instruct patients suspected of having pertussis to remain out of school or in-person work while awaiting test results or until completion of a five-day course of antibiotic treatment
- · Household and other close contacts of a laboratory confirmed or suspect pertussis case should initiate antibiotic chemoprophylaxis promptly without waiting for results of pertussis testing, regardless of age or immunization
- · Public Health may request patients reach out to their primary care providers to obtain post-exposure prophylaxis or for evaluation and treatment of a cough illness A five-day course of azithromycin (or an appropriate alternative antibiotic) is used for pertussis chemoprophylaxis.

Graphs:

Figure 1



*count only including confirmed and probable cases



