

## ANNUAL REPORT OF COMMUNICABLE DISEASES

Board of Health November 10, 2016 Arlene C. Seña, MD, MPH

# Overview

- DCoDPH Communicable Disease Control Program
- Communicable disease cases and rates for past 5 years
  - Gonorrhea, chlamydia, early syphilis
  - HIV, AIDS
  - Tuberculosis
  - Other communicable diseases
- Challenges with STD, TB, and communicable disease control programs



### **Communicable Disease Control Program**

The Communicable Disease Control Program's primary objectives are to:

- investigate and report suspected or confirmed communicable diseases to the N.C. Division of Public Health
- ensure that appropriate control measures have been prescribed in accordance with the N.C. Communicable Disease Law and Rules.



# **Communicable Disease Capacity**





## **Communicable Disease Reporting**

- Reporting forms provided on website.
- Clinicians mail/fax forms to DCoDPH.
- Public health nurses

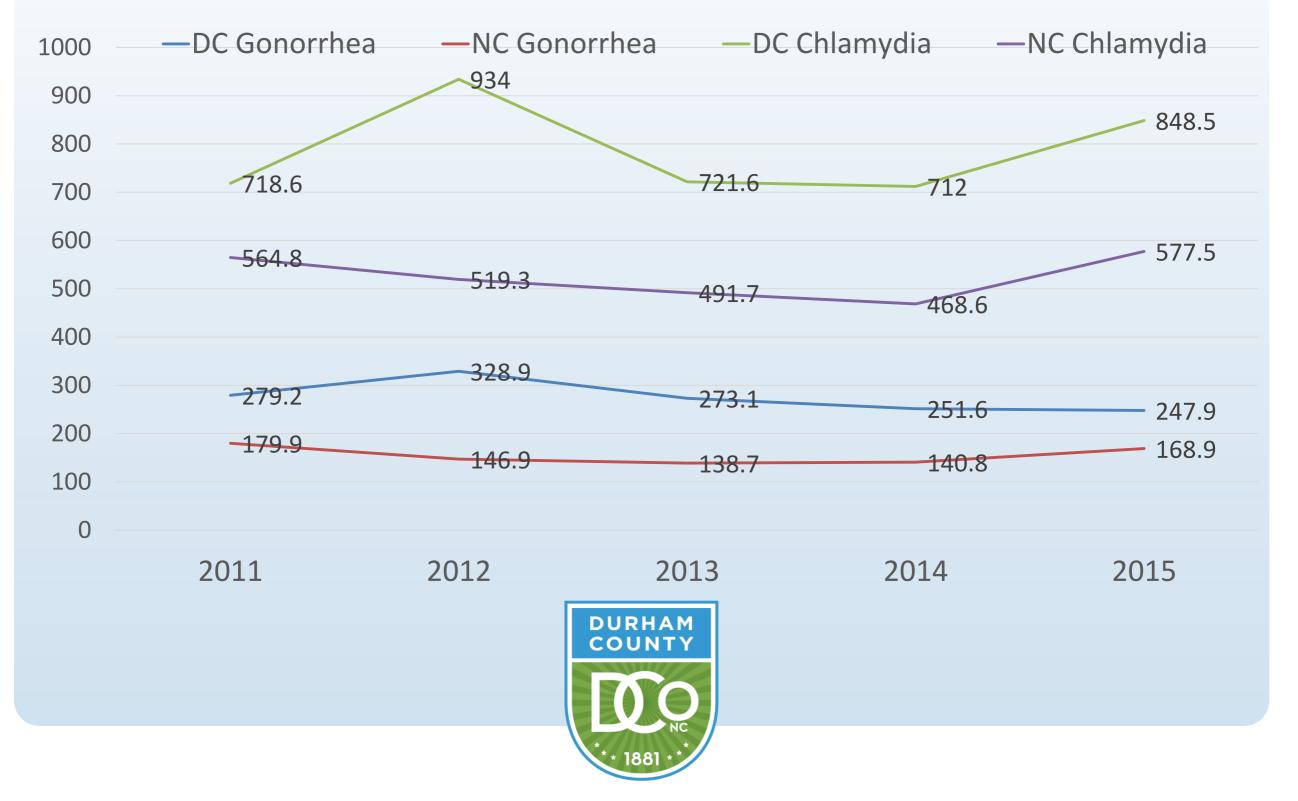
   (PHN) contact providers
   to gather more data as
   needed to determine if
   case definitions are met.
- PHNs enter data electronically in the NC Electronic Disease Surveillance System.

NC Electronic Disease Surveillance System						NC EDSS EVENT ID					
North Carolina Department of Health and Human Services						ATTENTION HEALTH CARE PROVIDERS:					
Division of Public Health • Epidemiology Section						Please n	sport relevant	clinical findi	ings eite	out this	
Communicable Disease Branch						disease	event to the	local health	departr	nent.	
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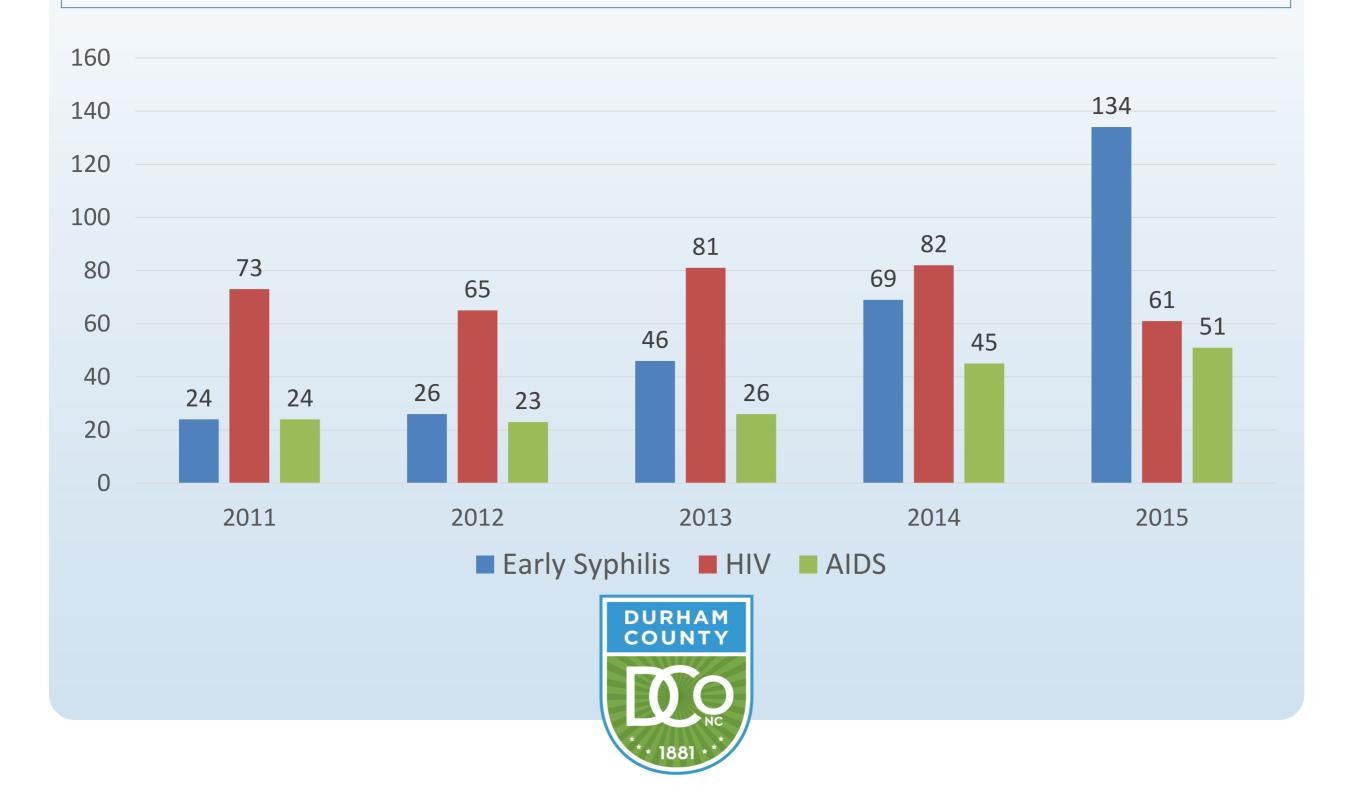
### **Gonorrhea and Chlamydia** Durham County Reported Cases, 2011-2015



#### Gonorrhea and Chlamydia, Durham County and NC Rates per 100,000; 2011-2015



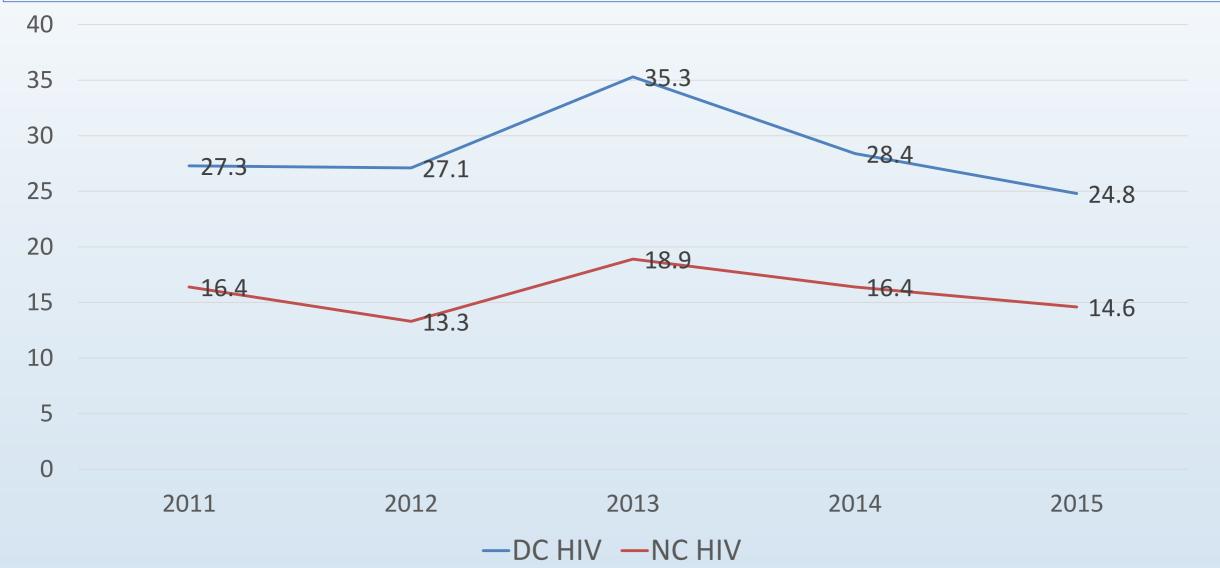
## Syphilis, HIV, AIDS Durham County Reported Cases, 2011-2015



### Early Syphilis by Year of Diagnosis, Durham County and NC Rates per 100,000; 2011-2015



#### HIV Infections by Year of Diagnosis, Durham County and NC Rates per 100,000; 2011-2015





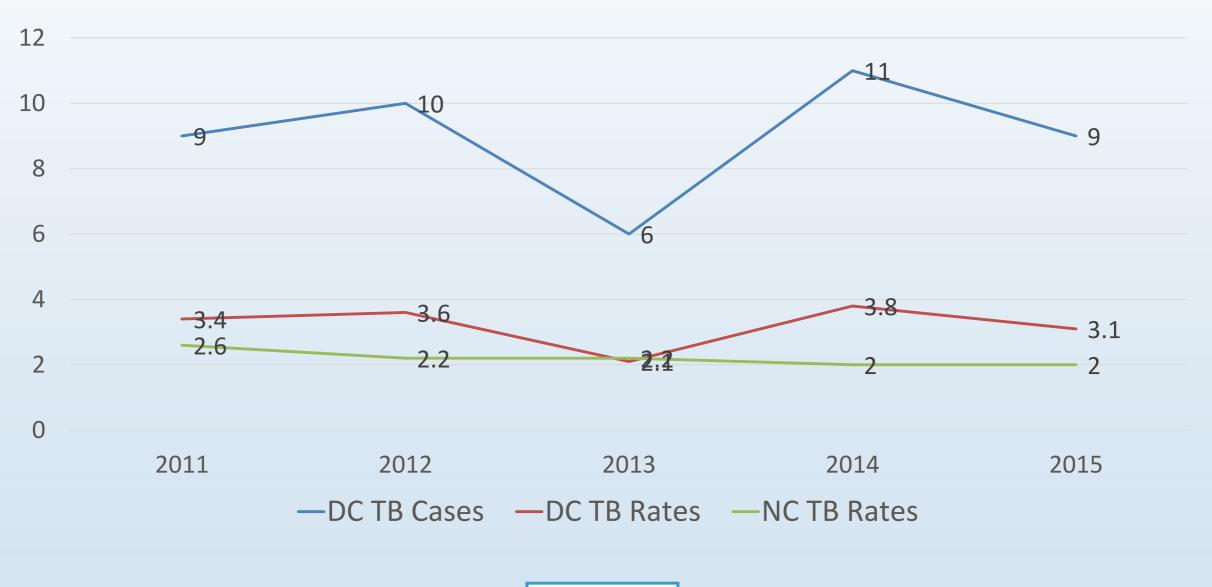
## **STD/HIV Program Challenges**

- Significant increase in early syphilis cases additional local Disease Intervention Specialist needed; working on local syphilis action plan with State.
- Increase in chlamydia cases and rates need to increase expedited partner therapy; continue increased screening through testing only and testing of extragenital sites.
- Staffing shortages and clinic process requesting more PHN support to improve efficiency; lengthy documentation in electronic medical records, and lab system interface impacts the number of patients seen per day.



## **Tuberculosis**

#### Durham County Cases/Rates and NC Rates, 2011-2015





## **TB Program Challenges:**

- Management of suspected cases contribute to work load in addition to confirmed cases, need to work with Duke on some referrals
- Follow-up of cases becomes complicated when patients move out of jurisdiction or travel requiring skype video
- Contact investigations coordination with other counties for large investigations (e.g. nail salon)
- Staffing shortages has affected "med start" appointments for latent TB infections

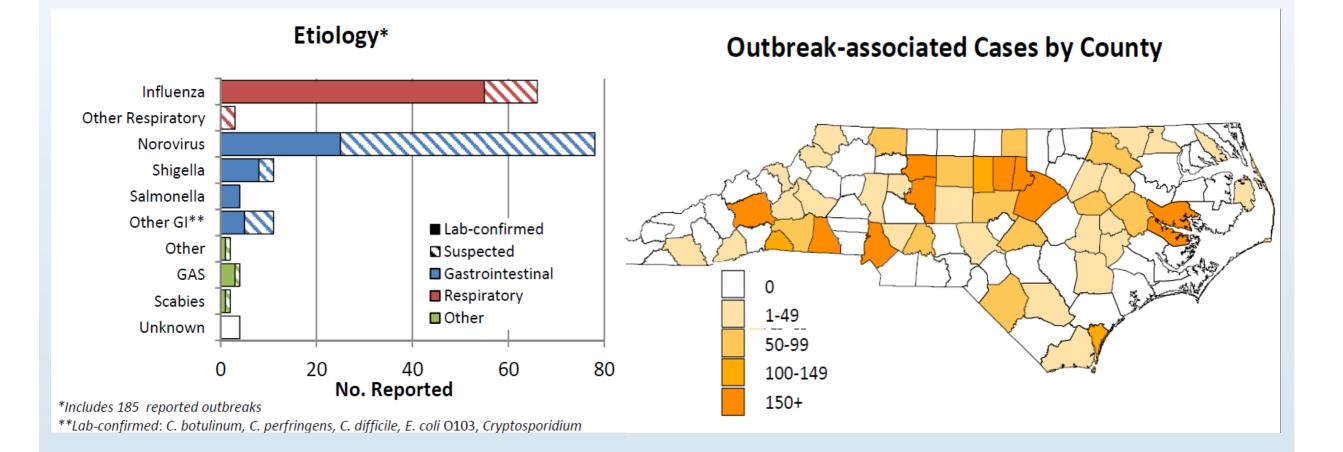


## **Communicable Diseases**

#### **Food-borne and Vaccine Preventable Illnesses\***



## NC Outbreak Report Summary, 2015





## **Rabies Control and Prevention**

- For 2015, DCoDPH Communicable Disease program conducted the following:
  - Reviewed 450 domestic bite reports and recommended confinement at home, with vet or shelter
  - Reviewed 113 wild animal reports and followed up on rabies testing of animals at State Laboratory
  - Referred 57 persons for rabies post-exposure prophylaxis





## **Communicable Disease Program Challenges:**

- Lack of adequate reporting by local healthcare providers.
- Developing and implementing effective methods by which to communicate with healthcare providers and others in the community.
- Challenges for managing volume of calls regarding rabies control and prevention activities results in 60-65% effort for 1 CD nurse; consider additional staffing or redistribution of other CD responsibilities.
- Staffing shortages need more cross-training to increase capacity in the event of an outbreak



## Durham County Communicable Disease Summary

- Durham County has had nearly a 2-fold increase in early syphilis cases and rates from 2014 to 2015.
- In 2015, rates of chlamydia and gonorrhea have remained high; fortunately, the HIV rate has decreased in Durham County.
- The CD program continue to deal with the increased work involved with rabies control and prevention, and CD outbreaks (i.e. norovirus).
- Challenges for all of the DCoDPH CD programs involve staffing (due to vacant positions) and efficiency due to shifting priorities.

