



Epi Update

A newsletter for healthcare professionals in Platte County, MO

VOLUME 1, ISSUE 3

OCTOBER 15, 2014

SPECIAL POINTS OF INTEREST:

- Reporting notifiable diseases in Missouri can be done simply by filling out a 1 page case report
- October is Breast Cancer Awareness Month
- Stress the importance of hand washing this flu season

INSIDE THIS ISSUE:

- Breast Cancer Quick Stats 2
- Handwashing tips 2
- September CD Report 3
- References 3

Reportable Diseases and Conditions in Missouri

Missouri's code of state regulations mandates the reporting of selected diseases and conditions to the local health authority or to the Department of Health and Senior Services ([19 CSR 20-20.040](#)).¹ This case reporting enables local and state health departments and the CDC to monitor disease occurrence. Unusually high incidence of disease may indicate an outbreak and the need for follow-up investigations.

A complete [list of reportable disease and conditions](#)² for the state of Missouri (first page pictured) can be found on the [DHSS communicable disease website](#).³ Diseases are grouped based on the immediacy with which they should be reported. Some of the reportable diseases and conditions for the state of Missouri include:

- Animal bites
- Gastrointestinal diseases such as Campylobacteriosis, *E. coli* O157:H7, *E. coli* Shiga Toxin, Giardiasis, Salmonellosis, and Shigellosis
- Sexually transmitted diseases such as Chlamydia, Gonorrhea, HIV/Aids, Syphilis, and Hepatitis viruses A, B, and C
- Vaccine preventable diseases, including Chickenpox, Influenza, Measles, Meningococcal disease, Mumps, and Pertussis
- Vector-borne illnesses such as Ehrlichiosis, Lyme disease, Malaria, Rocky Mountain spotted fever, and West Nile Virus
- Tuberculosis infection and Tuberculosis disease

Reporting can be done simply by filling out a one-page Disease Case Report. Disease Case Reports and instructions are available on the [DHSS communicable disease website](#)³ in PDF⁴ or fillable Microsoft Word⁵ format. Faxing this form to

the local public health department or DHSS provides the information local health authorities need to move forward with the necessary disease investigations.

Any questions about communicable disease reporting in Platte County can be directed to Erin Sanders, Platte County Health Department Epidemiology Specialist, at (816) 858-2412. Disease case reports can be faxed to PCHD at (816) 858-2087.

Diseases and Conditions Reportable in Missouri (19 CSR 20-20.020)

Numbers in parenthesis represent ICD-9 and ICD-10 Codes

Report Diseases and Conditions to your local health agency or to: Missouri Department of Health and Senior Services during business hours 573-751-6113, after hours and on weekends 800-392-0272 or by fax 573-526-0235

1. Immediately reportable diseases or findings shall be reported to the local health authority or to the Department of Health and Senior Services immediately upon knowledge or suspicion by telephone, facsimile or other rapid communication. Immediately reportable diseases or findings are—

(A) Selected high priority diseases, findings or agents that occur naturally, form accidental exposure, or as the result of a bioterrorism event:

- Anthrax (022, A22)
- Botulism (005.1, A05.1)
- Plague (059, A20)
- Rabies (Human) (071, A82)
- Ricin Toxin (988, T62)
- Severe Acute Respiratory Syndrome-associated Coronavirus (SARS-CoV) Disease (480.3, J12.8)*
- Smallpox (varicella) (050, B03)
- Tuberculosis (paratuberc) (021.2, A21.2)
- Viral hemorrhagic fevers (Ebolavirus (e.g., Ebola, Marburg) and arenaviruses (e.g., Lassa, Machupo)) (078.7, 078.89, A96, A98, A99)

(B) Instances, clusters, or outbreaks of unusual diseases or manifestations of illness and clusters or instances of unexpected deaths which appear to be a result of a terrorist act or the intentional or deliberate release of biological, chemical, radiological, or physical agents, including exposures through food, water, or air

(C) Instances, clusters, or outbreaks of unusual, novel, and/or emerging diseases or findings not otherwise named in this rule, appearing to be naturally occurring, but posing a substantial risk to public health and/or social and economic stability due to their ease of dissemination or transmittal, associated mortality rates, or the need for special public health actions or control.

2. Reportable within one (1) day diseases or findings shall be reported to the local health authority or to the Department of Health and Senior Services within one (1) calendar day of first knowledge or suspicion by telephone, facsimile or other rapid communication. Reportable within one (1) day diseases or findings are—

(A) Diseases, findings or agents that occur naturally, or from accidental exposure, or as a result of an unselected bioterrorism event:

- Acute respiratory distress syndrome (ARDS) in patients under fifty (50) years of age (without a contributing medical history)
- Animal (mammal) bite, wound, laceration
- Brucellosis (033, A23)
- Cholera (001, A00)
- Dengue fever (065.4, A90, A91)
- Diphtheria (032, A36)
- Elanders (024, A24.0)
- Hemorrhagic influenza, invasive disease (038.41, 041.3, 320.0, A41.3, J14, 050.0)
- Infectious pulmonary syndrome (079.81, 480.8, B33.8)
- Hemolytic uremic syndrome (HUS), post-dysenteric (283.11, D59.3)
- Hepatitis A (070.0, 070.1, B15)
- Influenza - associated pediatric mortality (18 years of age or younger) (487, J10)
- Influenza - associated public and/or private school closures (487, J10)
- Lead (blood) level greater than or equal to forty-five micrograms per deciliter (≥45 µg/dL) in any person equal to or less than seventy-one (71) months of age
- Measles (rubella) (055, B05)
- Meningococcal disease, invasive (036, A39)
- Novel influenza A virus infections, human (487, J10)
- Outbreaks (including nosocomial) or epidemics of any illness, disease or condition that may be of public health concern, including illness in a food handler that is potentially transmissible through food
- Pertussis (031.0, A37.0)
- Pulmonary edema (045, A80)
- Poliovirus infection, nonparalytic
- Q fever (083.0, A78)
- Rabies (animal)
- Rubella, including congenital syndrome (056, 771.0, B06, P35.0)
- Shiga toxin-producing *Escherichia coli* (STEC) (008.04, A04.3)
- Shiga toxin positive, unknown organism (005.8, 005.9, A04.3, A04.9)
- Shigellosis (004, A03)
- Staphylococcal enterotoxin B (988, T62)
- Streptococcus pneumoniae, drug resistant invasive disease (038.2, 481, 482.1, A40.3, J13)
- Syphilis, including congenital syphilis (096, 099-097, A50-A52)
- T-2 mycotoxins (989.2, 989.9, T64)
- Tetanus (037, A35)
- Tuberculosis disease (010-018, A15-A19)
- Tuberculosis (non-pulmonary) (021.5-9, A21.0-1, A21.3-9)
- Typhoid fever (*Salmonella typhi*) (002.0, A01.0)
- Vancomycin-intermediate *Staphylococcus aureus* (VISA), and Vancomycin-resistant *Staphylococcus aureus* (VRSA) (038.11, 041.1, A41.0, A49.0)
- Venezuelan equine encephalitis virus neuroinvasive disease (066.2, A92.2)
- Venezuelan equine encephalitis virus non-neuroinvasive disease (066.2, A92.2)
- Yellow fever (060.9, A95)

(B) Diseases, findings or adverse reactions that occur as a result of inoculation to prevent smallpox, including but not limited to the following:

- Accidental administration
- Contact transmission (i.e., vaccinia virus infection in a contact of a smallpox vaccinee)
- Eczema vaccinatum
- Erythema multiforme (toxicity vaccine, toxic urticaria)
- Fetal vaccinia (congenital vaccinia)
- Generalized vaccinia
- Inadvertent autoinoculation (accidental implantation)
- Myocarditis, pericarditis, or myocarditis
- Ocular vaccinia (can include keratitis, conjunctivitis, or blepharitis)
- Post-vaccinal encephalitis or encephalomyelitis
- Progressive vaccinia (vaccinia necrosum, vaccinia gangrenosa, disseminated vaccinia)
- Prognostic infection of the vaccination site
- Stevens-Johnson Syndrome

3. Reportable within three (3) days diseases or findings shall be reported to the local health authority or the Department of Health and Senior Services within three (3) calendar days of first knowledge or suspicion. These diseases or findings are—

- Acquired immunodeficiency syndrome (AIDS) (042, B20)
- Asbestos poisoning

For more information or questions about Epi Update, contact Erin Sanders, PCHD Epidemiology Specialist at: (816) 858-2412



Breast Cancer Quick Stats

In observance of Breast Cancer Awareness month, here are some quick statistics about breast cancer in Platte County residents.

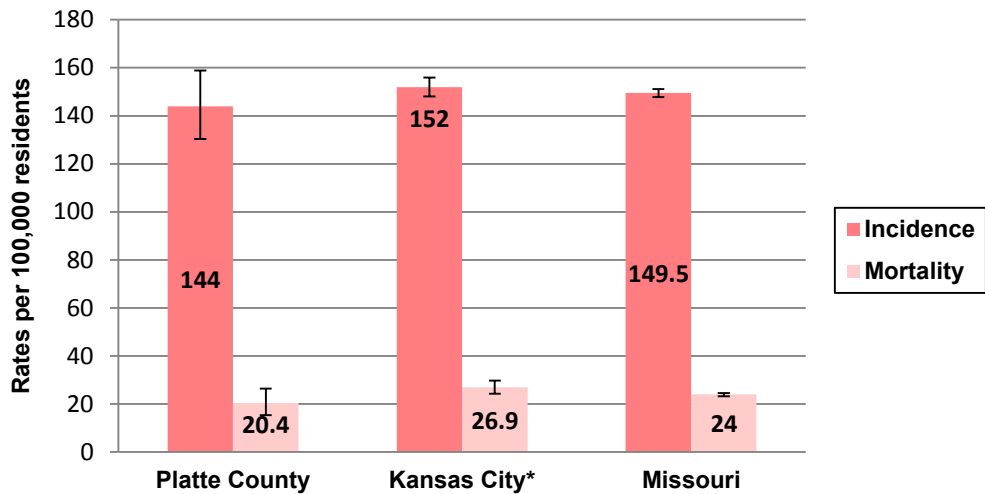
Cancer is the **leading cause of death** and breast cancer is the **second leading cause of cancer death** in Platte County women.⁶ In addition, in Platte County and in Missouri and the U.S. as a whole, breast cancer has **higher incidence** in females than any other type of cancer.^{7,8}

In 2011, of Platte County women aged 40 and older who were surveyed⁹:

- 5.7%** had never had a mammogram
- 1 in 5** had not had a mammogram or clinical breast exam in the last year.

“Breast cancer is the second leading cause of cancer death in Platte County women.”

Breast cancer incidence and mortality rates in female residents, 2006-2011



*Incidence rates are for Kansas City Metro area, mortality rates for city of Kansas City

Source: MDHSS, Death MICA⁶ and Cancer MICA⁷, 2006-2011

Posters and other handwashing promotional materials similar to this are available at <http://www.cdc.gov/handwashing/resources.html> and <http://health.mo.gov/living/families/handwashing/>.



Stay Healthy! Handwashing Tips

In preparation for the upcoming flu season, here are some quick reminders to share with health care workers, patients, parents, and students about the importance of handwashing to prevent the spread of the flu and other diseases.

- * Remember to **scrub hands for at least 20 seconds**.¹⁰
- * **Thoroughly dry hands after washing**. Germs can be transferred more easily to and from wet hands.¹⁰
- * If soap and water are not available, use an alcohol-based hand sanitizer that contains **at least 60% alcohol**.¹¹ However, please note that:
 - **Soap and water are more effective than hand sanitizers** at re-

moving or inactivating certain kinds of germs, like *Cryptosporidium*, norovirus, and *Clostridium difficile*.¹¹

- Non enveloped viruses such as **enteroviruses are less susceptible to alcohol** than other viruses.¹²
- When **hands are heavily soiled** or greasy, hand sanitizers may not work well.¹¹
- * **Remember, washing hands with soap and water is the best way to reduce the number of microbes on them in most situations**.¹¹

For more resources on handwashing and the science behind it, please visit <http://www.cdc.gov/handwashing>.

Communicable Disease Report

Notable this month:

Tick-borne illnesses continued to persist into September.

Possible pertussis cases have been reported to PCHD in early October, and other local area health departments have reported cases of pertussis as well. Remember to consider pertussis in addition to enteroviruses and rhinoviruses as a potential cause of respiratory illness and to report any cases of pertussis to the local health department.

Overall, September numbers reflect expected reporting for this time of year.

September Reportable Diseases	2014		YTD				5Y AVG
	Sep	YTD	2013	2012	2011	2010	
Animal bites	0	24	29	28	29	8	24
Gastrointestinal Diseases	2	17	35	16	33	23	25
Hepatitis	5	47	58	68	50	23	49
Sexually Transmitted Diseases	6	45	25	80	28	62	48
Tuberculosis	5	32	56	40	37	22	37
Other	11	84	67	104	43	24	64
<i>-Tick-borne Diseases</i>	3	N/A	N/A	N/A	N/A	N/A	N/A
TOTAL	29	249	270	336	220	162	247

Please note that categories are grouped communicable diseases or conditions, most of which are mandatory by law to report (see links below). Totals reported for each category represent total number of reports and inquiries to the health department, not total number of cases.

Categories: Animal bites category includes any type of bite. Gastrointestinal Disease category includes all reportable GI diseases. Hepatitis category could include chronic or acute infections of Hepatitis A, B or C. Sexually Transmitted Disease category includes all reportable STDs other than Hepatitis. Tuberculosis category includes all reports, calls/inquiries, requests for previous records, etc., regarding active or latent cases of TB. Other category includes reports or inquiries regarding individual diseases that do not fit previous categories.

List of Reportable Diseases & Conditions: <http://health.mo.gov/living/healthcondiseases/communicable/communicabledisease/pdf/reportablediseaselist2.pdf>

Rules of Department of Health and Senior Services - Division 20—Division of Community and Public Health Chapter 20—Communicable Diseases: <http://www.sos.mo.gov/adrules/csr/current/19csr/19c20-20.pdf>

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Services Provided

- Disease Surveillance
- Emergency Preparedness
- Environmental Health
 - *Restaurant & Septic Inspections*
- Health Education
- Special Deliveries Program
- Women, Infants & Children (WIC)
- Vital Records
 - *Birth & Death Certificates*
- Family Healthcare Clinic
 - *Physician*
 - *Nurse Practitioner*
- Walk-In Clinic
 - *Adult/Child /Travel Vaccinations*
 - *HIV/STD Testing*
 - *Pregnancy Testing*

Find us online at
www.plattecountyhealthdept.com