# **Public Health Points**

## York City Bureau of Health

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2013

103

5

511

2

1

223

1

3

90

%

Change

个24%

↓17%

√5%

0%

 $\uparrow$ 

**↓**24%

 $\uparrow$ 

0%

**1**6%

**↓**100<sup>∞</sup>

**↓4%** 

0

1120

1172

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Reportable Conditions Summary Report for Year 2013 City of York, Pa.

Overall, the total number of Reportable Conditions in the City of York decreased in 2013 according to records compiled by the York City Bureau of Health. In 2013 there was a total of 1,120 reports received compared to 1,172 reports in 2012, a 4% decrease.

The most frequently reported group of conditions in the City of York for 2013 continued to be the Sexually Transmitted Diseases (STD's): Chlamydia – 511 reports and Gonorrhea – 223 reports. Chlamydia showed a 5% decrease and Gonorrhea decreased by 24% from 2012 to 2013. There were no cases of primary or secondary Syphilis reported in 2013 compared to 4 cases in 2012. Sexually active teens and young adults in their 20's comprise the bulk of STD cases. Behavioral studies show that this age group is more likely to engage in unprotected intercourse and have sex with multiple partners.

The third most frequently reported condition in 2013 was animal bites with 103 cases compared to 83 cases in 2012, representing a 24% increase. Public awareness efforts such as dog bite prevention programs for children and dog law enforcement efforts by the City Police Department's Animal Enforcement Officer continue.

Hepatitis C was the fourth most frequently reported condition. Hepatitis C cases increased from 85 in 2012 to 90 in 2013, a 6 % increase. Hepatitis B cases remained the same (3 cases) from one year to the next, and there was 1 case of acute Hepatitis A in 2013 compared to no cases in 2012.

Sixty-eight cases of Influenza were reported in 2013 compared to 19 cases in 2012 – a 258% increase from one year to the next. The majority of Influenza infections were Type A. Type B Influenza infections occurred less frequently and mostly near the end of the Influenza season. Many more Influenza cases, of course, occurred in York for the year but were not reported to the Health Bureau since a laboratory test for Influenza was not performed.

Respiratory Syncytial Virus (RSV) infection showed only sight fluctuation from one year to the next – 53 cases in 2013

**1**47% **HIV Infection** 15 22 ↑206% 16 49 Influenza Type A Influenza Type B 3 18 ↑500%  $\uparrow$ Influenza not specified 0 1 Invasive Beta Strep Disease 2 2 0% 18 **↓**57% **Lead Poisoning** 42 Legionnaire's Disease 2 0 ↓100% Lyme Disease 个75% 4 ↓100% Malaria 1 0 Meningitis - Aseptic (Viral) **↑**100% **↓**50% Meningitis - Bacterial 2 1 Meningitis - Fungal 0 Pertussis 2 0 ↓100% 0  $\uparrow$ Rabies (Animal) Respiratory Syncytial Virus (RSV) Infection 55 53 **↓**4% 9 **↓**44% Salmonellosis 5 2 0 ↓100% Shigellosis Syphilis -Primary/Secondary ↓100%

West Nile Virus Infection

**Total Case Reports** 

Reportable Conditions – City of York, Pa Summary Report 2012-2013

2012

83

540

2

0

292

0

3

85

0

**Reported Cases** 

Cryptosporidiosis

Foodborne Outbreak

Campylobacter Enteritis

Animal Bites

Chlamydia

Gonorrhea

Hepatitis A

Hepatitis B

Hepatitis C

Histoplasmosis

compared to 55 in 2012, a 4% decrease. RSV causes an acute febrile, respiratory illness, occasionally severe enough to require hospitalization and is especially harsh on infants and children under two years of age. It is the major known etiologic agent of bronchiolitis and is a cause of pneumonia, croup, bronchitis, otitis media and febrile upper respiratory illness. RSV may cause symptomatic disease also in adults, particularly the debilitated elderly.

Elimination of the Childhood Lead Poisoning Prevention Program midway in 2013 had a significant impact on the number of elevated blood lead cases reported for the year – down from 42 in 2012 to 18 in 2013

(57% decrease). Lead poisoning in City children under 6 years of age still remains a too frequent and serious problem, but the lack of funding for testing and case management by Health Bureau staff now shifts responsibility for lead screening and case management to the primary medical care setting.

There were 22 new cases of HIV infection reported in York City residents in 2013, 7 more cases or a 47% increase compared to the previous year. Individuals reported include males and females, whites and African-Americans, Latinos and non-Latinos, a wide range of adult ages, IV drug users, heterosexuals, and men who have sex with men (MSM). This diverse group remains a far cry from two and three decades ago when AIDS cases were primarily white, non-Latino MSM's. Also, in contrast to those early days of this epidemic, HIV infection has now become a treatable rather than a fatal disease. Regrettably, however, a cure for HIV infection still remains elusive.

Bacterial and parasitic infections that lead to vomiting, diarrhea, abdominal pain, as well as other gastrointestinal symptoms, decreased by 37% in 2013 compared to 2012. Cases of *Campylobacter* enteritis, Cryptosporidiosis, Salmonellosis and Shigellosis totaled 12 in 2013 compared to 19 in 2012. In addition, 1 foodborne outbreak was investigated by the Health Bureau in 2013. The outbreak involved approximately 20 individuals. Inadequate holding temperature of the perishable food item appeared to be the problem and the infectious agent involved was suspected to be *Norovirus*.

Lyme Disease cases increased in York City residents – 7 cases in 2013 compared to 4 cases in 2012, a 75% increase. This infection results from tick bites and most frequently causes arthritic and neurological symptoms. Prompt antibiotic treatment can prevent or mitigate many complications. Lyme Disease is a much more frequent problem in rural and suburban areas elsewhere in York County than in urban York City.

Meningitis cases in the City increased from 3 cases in 2012 to 4 cases in 2013. Two cases of viral meningitis, 1 case of bacterial meningitis, and 1 case of fungal meningitis were reported in 2013.

Of special note, for the third year in a row there were no cases of active Tuberculosis disease reported in the City of York. The occurrence of active TB in the City remains very low due to aggressive surveillance and prevention strategies at our local level. In the past 28 years since the beginning of the City Health Bureau, this is the sixth annual occurrence for zero cases (1997, 2007, 2008, 2011, 2012 and 2013).

Invasive Group A Beta Streptococcal Disease occurred 2 times in 2013, the same number as in 2012. One case of each of the following diseases was also reported in 2013: Histoplasmosis and a rabid feral cat.

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