

Barry-Eaton County
Monthly Summary of Reportable Diseases
December 2022

The data in the Monthly Disease Reports are provisional, based on current reports in the Michigan Disease Surveillance System (MDSS) made by local public health departments. The MDSS is a dynamic, continually active system; total and year to date (YTD) disease counts are constantly changing as cases are investigated, confirmed as cases, or ruled out as not meeting the case definition. Each Monthly Disease Report reflects this constant activity as the numbers may slightly fluctuate each month. Therefore, it should be kept in mind that numbers in the Monthly Disease Reports are not final and should be used only to generally monitor Barry-Eaton District trends over time. Unknown, suspect, probable, and confirmed cases of the reportable condition are included in the report. An updated report is published each month. Specific data requests and questions should be directed to the following:

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Barry-Eaton District
Health Department

| YTD Cases** | | | |
|---|--------------|--------------|--|
| Disease | 2021 | 2022 | |
| Foodborne | | | |
| Campylobacter | 24 | 31 | |
| Cryptosporidiosis | 2 | 7 | |
| Giardiasis | 9 | 7 | |
| Norovirus | 3 | 3 | |
| Salmonellosis | 29 | 29 | |
| Shiga toxin-producing Escherichia coli --(STEC) * | 8 | 8 | |
| Shigellosis | 5 | 2 | |
| Yersinia enterocolitica | 1 | 10 | |
| Foodborne Subtotal | 82 | 98 | |
| Influenza | | | |
| Flu Like Disease* | 2536 | 6856 | |
| Influenza | 8 | 203 | |
| Influenza Subtotal | 2545 | 7061 | |
| COVID19/MIS | | | |
| Multisystem Inflammatory Syndrome | 1 | 1 | |
| Novel Coronavirus COVID-19 | 23428 | 23010 | |
| COVID19/MIS Subtotal | 23429 | 23011 | |
| Meningitis | | | |
| Meningitis - Aseptic | 5 | 4 | |
| Meningitis - Bacterial Other | 1 | 2 | |
| Streptococcus pneumoniae, Inv | 12 | 22 | |
| Meningitis Subtotal | 18 | 28 | |
| Other | | | |
| Blastomycosis | 2 | 2 | |
| Brucellosis | 1 | - | |
| Candida auris | - | 1 | |
| Coccidioidomycosis | 1 | 1 | |
| Guillain-Barre Syndrome | 1 | 1 | |
| Histoplasmosis | 33 | 18 | |
| Legionellosis | 3 | 2 | |
| Monkeypox | - | 2 | |
| Streptococcus pneumoniae, Drug Resistant | - | 1 | |
| Streptococcal Dis, Inv, Grp A | 2 | 4 | |
| Streptococcal Toxic Shock | 1 | - | |
| Vibriosis-non Cholera * | 4 | 6 | |
| VISA | - | 1 | |
| Other Subtotal | 48 | 39 | |
| Rabies | | | |
| Rabies Animal | 1 | 3 | |
| Rabies: Potential Exposure & PEP * | 43 | 151 | |
| Rabies Subtotal | 44 | 154 | |

* Indicates includes historic and current forms in MDSS

** Data for cases reported by month is based on the week the case was referred to the health department

YTD cases in 2022 are less than YTD cases in 2021 as of report date

YTD cases in 2022 are greater than YTD cases in 2021 as of report date

Data as of 1/3/2023

| Sexually Transmitted Diseases | | | |
|---|-------------|-------------|---|
| Chlamydia (Genital) | 507 | 442 | ↘ |
| Gonorrhea | 196 | 168 | ↘ |
| Syphilis - Unknown Duration or Late | 11 | 9 | ↘ |
| Syphilis - To Be Determined | 760 | 774 | ↗ |
| Syphilis - Primary, Secondary, Early Latent | 13 | 10 | ↘ |
| STD Subtotal | 1487 | 1403 | ↘ |
| Tuberculosis | | | |
| Latent Tuberculosis Infection | 15 | 25 | ↗ |
| Nontuberculous Mycobacterium | 16 | 17 | ↗ |
| Tuberculosis | - | 1 | ↗ |
| Tuberculosis Subtotal | 31 | 42 | ↗ |
| Vaccine-Preventable Diseases | | | |
| Chickenpox (Varicella) | 7 | 23 | ↗ |
| H. influenzae Disease - Inv. | 2 | 17 | ↗ |
| Pertussis | 2 | 2 | |
| Shingles | 13 | 16 | ↗ |
| VZ Infection, Unspecified | 1 | 2 | ↗ |
| VPD Subtotal | 25 | 60 | ↗ |
| Vectorborne | | | |
| Lyme Disease | 30 | 41 | ↗ |
| Malaria | 1 | - | ↘ |
| Vectorborne Subtotal | 31 | 44 | ↗ |
| Viral Hepatitis | | | |
| Hepatitis A | 1 | - | ↘ |
| Hepatitis B, Acute | 1 | 8 | ↗ |
| Hepatitis B, Chronic | 32 | 31 | ↘ |
| Hepatitis C, Acute | 1 | 5 | ↗ |
| Hepatitis C, Chronic | 80 | 50 | ↘ |
| Viral Hepatitis Subtotal | 146 | 138 | ↘ |
| Total (excludes COVID-19/MIS cases) | 4457 | 9067 | ↗ |

* Indicates includes historic and current forms in MDSS

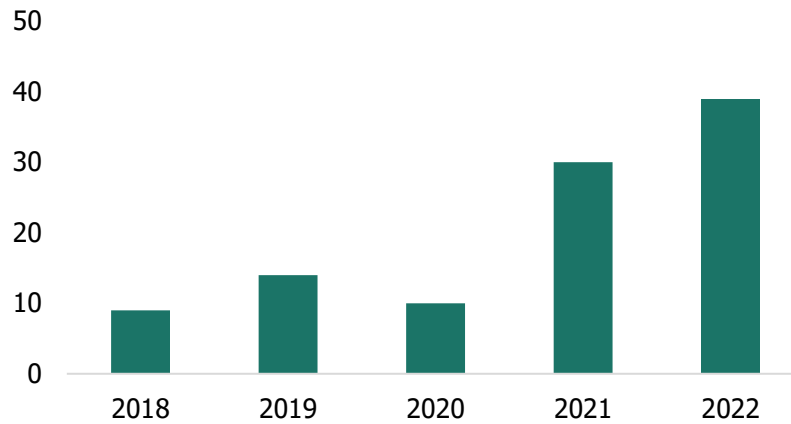
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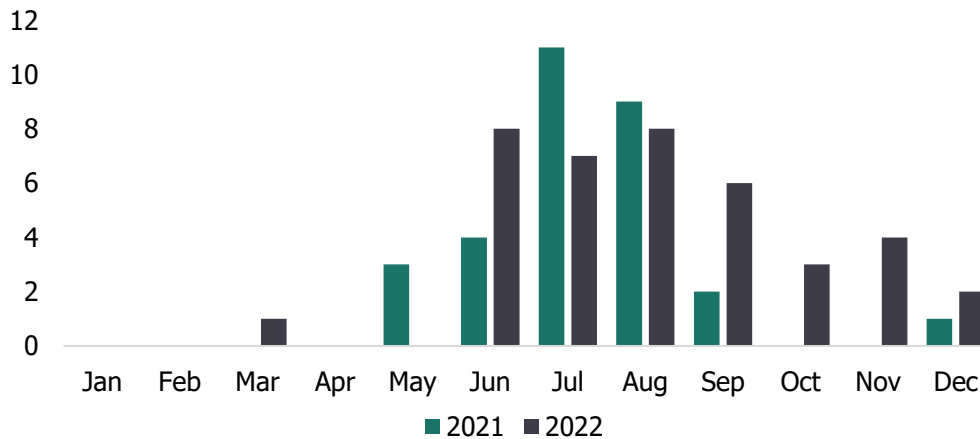
Data as of 1/3/2023

Lyme Disease Cases Barry-Eaton District, 2018-2022



With the exception of 2020, Lyme disease cases have been trending upwards each year since 2019. During 2022, Barry-Eaton District experienced a 30% increase in Lyme Disease cases since the previous year. Climate and changes in populations of host species (particularly deer) is just two of many factors that influence the transmission, distribution, and incidence of Lyme disease.

Lyme Disease Cases Barry-Eaton District



The above graph shows the seasonality of Lyme disease cases in 2021 and 2022. Climate can influence the distribution of cases meaning shorter winters could extend the period when ticks are active each year, increasing the time that humans could be exposed to Lyme disease. Preliminary data suggests that cases extended longer into the winter season versus in 2021 with more cases in October, November, and December.