WEEKLY EPIDEMIOLOGIST REPORT January 16, 2024



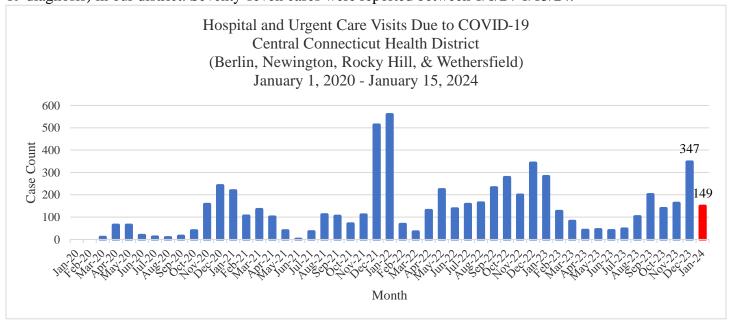
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RESPIRATORY VIRAL SEASON

It appears COVID-19 and Respiratory Syncytial Virus (RSV) are on a downward trend, while influenza is continues to increase slightly. Visit www.ccthd.org for an interactive graph on respiratory illness in our district. Remember, if you are sick stay home to prevent the spread of germs to others.

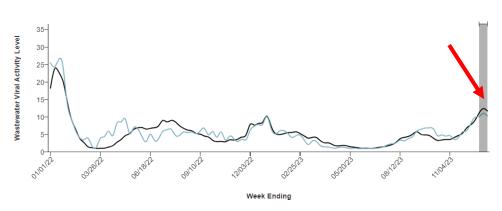
COVID-19 SURVEILLANCE

Data for COVID-19 is as of January 15, 2024 from EpiCenter. The bar graph below illustrates the syndromic surveillance of hospital and urgent care visits due to COVID-19 (those experiencing symptoms with a COVID-19 diagnosis) in our district. Seventy-seven cases were reported between 1/6/24-1/15/24.



COVID-19 Wastewater Surveillance

As of January 6, 2024, the nationwide wastewater viral activity level for COVID-19 is currently very high at a level of 11.79 (see the black line in the figure to the right) along with the Northeast region with a level of 10.32 (blue line). Connecticut has paused wastewater surveillance until capacity at the State Public Health Laboratory has increased and additional water



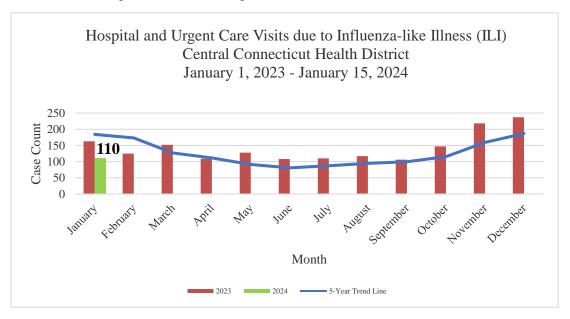
management facilities are onboarded to the Connecticut Wastewater Surveillance Program.

In the Northeast, the predominant variant sequenced in wastewater is JN.1 (74.9%). There is currently no evidence that JN.1 presents an increased risk to public health relative to other circulating variants (CDC).

For more information on wastewater surveillance please visit: COVID-19 Wastewater Data - Variants | NWSS | CDC

INFLUENZA SURVEILLANCE

Data for Influenza-like Illness (ILI) is as of January 15, 2024 from EpiCenter. The graph below is the syndromic surveillance of hospital and urgent care visits due to ILI five-year average trend line (2018-2022) compared to this year and last year's cases. Other circulating respiratory viruses can present as influenza-like illness. ILI is defined as having a fever and a cough or sore throat.



In Connecticut, the majority of those hospitalized with laboratory-confirmed influenza are those who are 65 years of age or older (109.5 per 100,000 population) followed by those who are 50-64 years of age (47.7 per 100,000 population) and those who are 0-4 years of age (22.2 per 100,000 population). Data was last updated on January 6th. The figure to the right can be found at https://gis.cdc.gov/GRASP/Fluview/FluHospRates.html

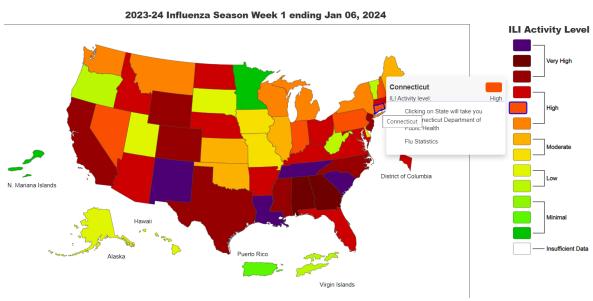
reset zoom. Rates per 100,000 populatior 130 Season: 2023-24 120 110 Week Ending: Jan 06, 2024 100 MMWR Week: 1 90 80 Overall: 39.6 70 0-4 yr: 22.2 60 5-17 yr: 7.4 50 40 18-49 yr: 16.5 30 50-64 yr: 47.7 20 >= 65 yr: 109.5 10 per 100,000 population Jan 32 com Kright Mar Jan Aproba 2024 Watiga Jak Wat Ob Joy Jan 2 2024 F80,10,2024 1890 Jr. John

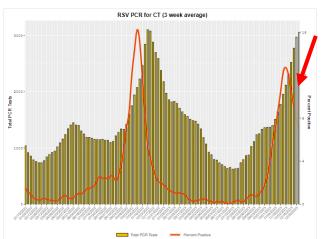
EIP:: Connecticut:: 2023-24:: Cumulative Rate To zoom, hold down Alt key and click and drag to create a rectangle. Double click to

Calendar Week Ending (MMWR Week No.)

The CDC's FLUView Interactive Map https://gis.cdc.gov/grasp/fluview/main.html is a system that monitors visits for respiratory illness that includes fever plus a cough or sore throat (ILI), not laboratory-confirmed influenza and

may capture patient visits due to other respiratory pathogens that cause similar symptoms.
Connecticut's ILI Activity Level is still in the HIGH range as of January 6th.

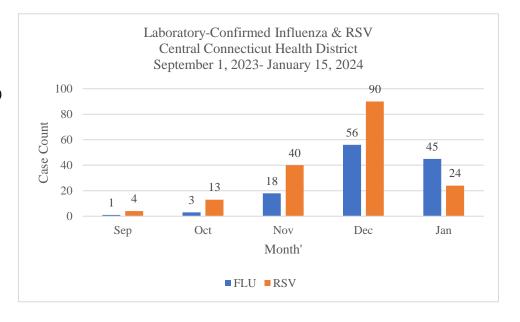




RESPIRATORY SYNCYTIAL VIRUS (RSV)

Nationally RSV positivity is on the downward trend. In Connecticut, RSV PCR test positivity (red line) is following suit as of January 11th (see bar graph to the left).

Our district was notified of 123 (+26) laboratory-confirmed of influenza (98% influenza type A), and 171 (+12) laboratory-confirmed cases of RSV in the CTEDSS database (see figure to the left) since September 1, 2023.

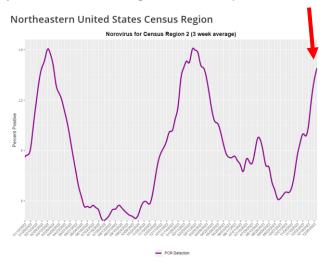


NATIONAL RESPIRATORY & ENTERIC VIRUS SURVEILLANCE SYSTEM (NREVSS)

The National Respiratory and Enteric Virus Surveillance System (NREVSS) is a laboratory-based system that monitors temporal and geographic circulation patterns (patterns occurring in time and place) of respiratory syncytial virus (RSV), human parainfluenza viruses (HPIV), human metapneumovirus (HMPV), respiratory adenoviruses, human coronavirus, and gastrointestinal viruses: rotavirus, and norovirus. Participating laboratories report weekly to CDC the total number of tests performed that week, and the number of those tests that were positive. Middlesex and Yale are the only contributing health organizations in Connecticut that report respiratory and enteric virus surveillance data to the CDC. Data from NREVSS was updated January 11, 2024.

Norovirus test positivity remains high in the Northeast (13.2%). The figure to the right illustrates the three week average percent positivity since January 15, 2022. CCHD will continue to conduct surveillance and report on significant trends. Norovirus is the leading cause of vomiting and diarrhea, and foodborne illness in the United States. People of all ages can get infected and sick with norovirus, which spreads very easily and quickly.

https://www.cdc.gov/norovirus/about/prevention.html



Seasonal coronaviruses, CoVOC43, CoVHku1, CoVNL63 and CoV229E, HPIV, adenovirus, rotavirus and human metappeumovirus detection data appear to show no concern

metapneumovirus detection data appear to show no concerning increases. All test positivity as of January 11, 2024 is under 5%.

PREVENTION

Not only are respiratory viruses circulating at this time, but gastrointestinal pathogens are as well. The best way to prevent the spread of infectious respiratory or gastrointestinal illness is to:

- Cover your cough and sneezes,
- Wash your hands often,
- Get vaccinated,
- Stay home when you are ill,
- Wear a mask in crowded places,
- Minimize close contact with sick people,
- Eat healthy, well-balanced meals, and
- Stay hydrated.



FOOD RECALLS

The following foods are being recalled because they are contaminated. Please check your cupboards and throw out any of these items:

New this week:

- Aged Cojita Mexican Grating Cheese by Rio Bros California Creamery, Rizo Lopez Foods, Inc. for potential *Listeria monocytogenes* contamination.
- Multiple brand names Cereal, bars, and snacks by The Quaker Oats Company for potential for *Salmonella* contamination

Previously reported:

• Enfamil Nutramigen Powder infant formula in 12.6 and 19.8oz cans, by Reckitt/Mead Johnson Nutrition for potential *Cronobacter sakazakii* contamination

For more information on recalls due to undeclared allergens please visit: https://www.fda.gov/safety/recalls-market-withdrawals-safety-alerts

FALLS

The Centers for Disease Control and Prevention reports that about 1 million U.S. adults are injured due to slips and falls every year, with the injury rate increasing significantly as temperatures decline. Here are a few ways to decrease your risk of falling:

- Wear proper footwear (you can purchase snow grips for the bottoms of your shoes or boots).
- Take your time and do not hurry while walking outside. Pay attention to your steps and walk slowly.
- Use assistance, such as handrails, a walking stick, walker or cane when out in winter weather.
- Take small steps to help you maintain your center of gravity by waddling a bit like a penguin.
- On days when it is icy and you do not need to go anywhere, stay inside.

lead to more injuries. Try to nd you will be on your way

If you do feel yourself falling, don't try to catch yourself with your arms. That can lead to more injuries. Try to take the hit on your buttocks or back. Be careful and aware of your surroundings, and you will be on your way to a safe and healthy winter.

Don't forget to follow Central Connecticut Health District on social media!

FaceBook: https://www.facebook.com/ccthd4/

Twitter: https://twitter.com/CCTHD

Instagram: https://www.instagram.com/centralcthealthdistrict/

The Central Connecticut Health District is committed to improving the quality of life in our communities through prevention of disease and injury, fostering of a healthy environment, and promotion of the health of our residents.