

WEEKLY EPIDEMIOLOGIST REPORT

March 11, 2024



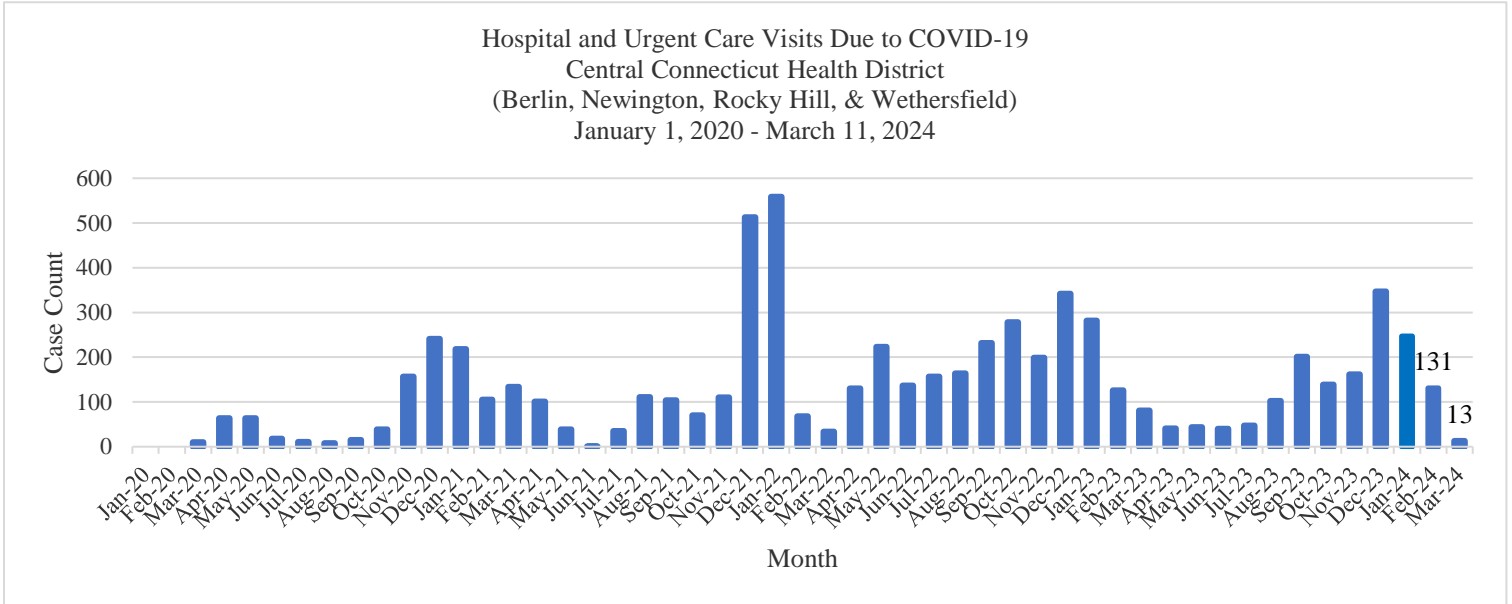
**Central
Connecticut
Health
District**

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RESPIRATORY VIRAL SEASON

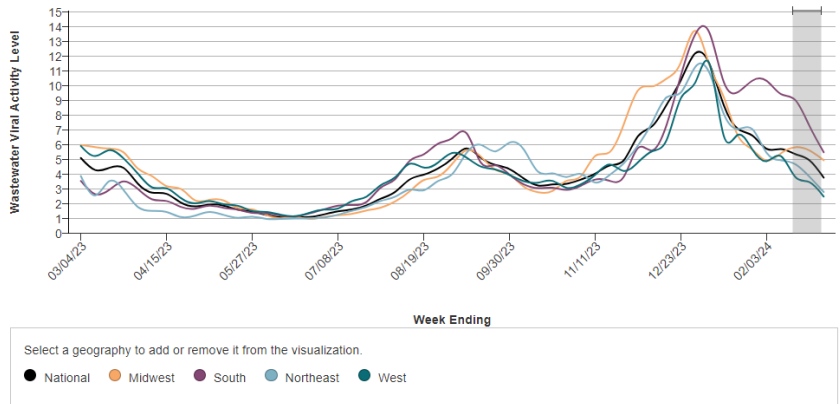
COVID-19 SURVEILLANCE

Data for COVID-19 is as of March 11, 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. Nine cases were reported between 3/5/24-3/11/24.



COVID-19 Wastewater Surveillance

As of March 2, 2024, the nationwide wastewater viral activity level for COVID-19 has dropped to a moderate level of 3.79 (-1.32 from previous reporting period) (see the black line in the figure to the right). Good news, the Northeast Region has moved down from a moderate level to a low level of 2.82 (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.

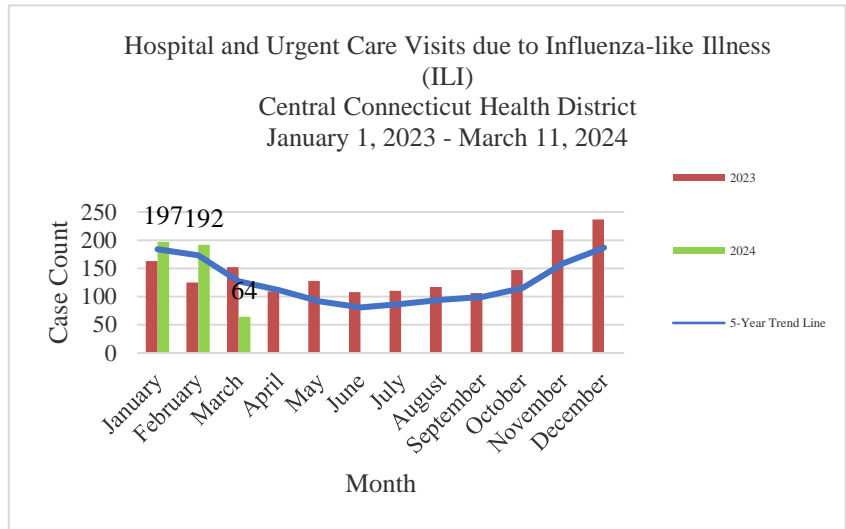


For more information on wastewater surveillance please visit : <https://www.cdc.gov/nwss/rv/COVID19-nationaltrend.html>

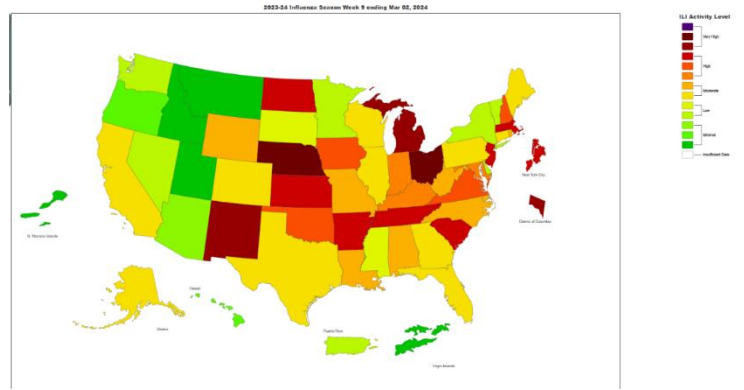
Nationally and in the Northeast, the predominant variant sequenced in wastewater is JN.1. There is currently no evidence that JN.1 presents an increased risk to public health relative to other circulating variants (CDC).

INFLUENZA SURVEILLANCE

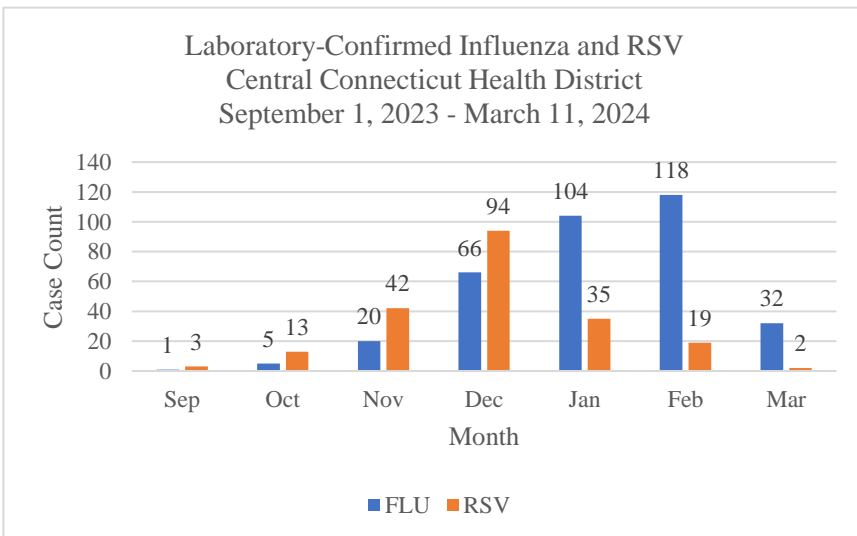
Data for Influenza-like Illness (ILI) is as of March 11, 2024 from EpiCenter. The graph below is the syndromic surveillance of hospital and urgent care visits due to ILI five-year average trend line (2018-2022) compared to this year and last year's cases. Other circulating respiratory viruses can present as influenza-like illness. ILI is defined as having a fever and a cough or sore throat. Forty-one cases of ILI were reported during the week of 3/5/24-3/11/24.



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 remains at the **MODERATE** level as of March 2, 2024.



RESPIRATORY SYNCYTIAL VIRUS (RSV)



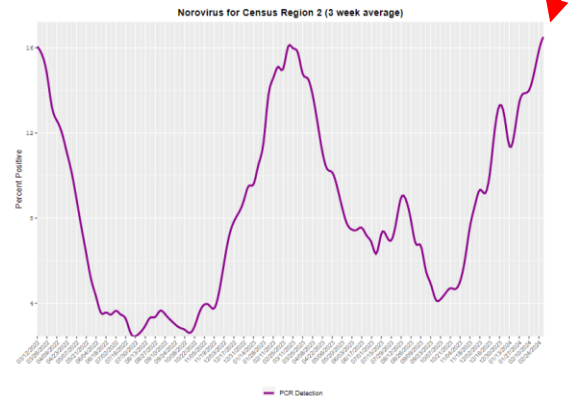
Nationally RSV positivity continues on the downward trend, as well as in the state of Connecticut according to the NRVES. The district was notified of 346 (+61) laboratory-confirmed of influenza (96% type A, 2% type B, and 2% unknown), and 208 laboratory-confirmed cases of RSV (+10) in the CTEDSS database (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 February 17, 2024.

Norovirus test positivity bumped up in the Northeast to 16.5%.

The figure to the right illustrates the three week average percent positivity since March 12, 2022. 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. The district has also seen increase in gastrointestinal outbreaks associated with norovirus in the community.



Nationally, HPIV 3 viral isolation positivity has leaped to

11.1%. HPIV 3 is more often associated with bronchiolitis, bronchitis, and pneumonia. HPIV is spread by direct contact with infectious droplets or by airborne spread when an infected person breathers, coughs, or sneezes. HPIV usually survive a few hours on surfaces depending on environmental conditions.

Nationally, adenovirus virus isolation has also increased to 11.1%. Adenoviruses most commonly cause respiratory illness. The illnesses can range from the common cold to pneumonia, croup, and bronchitis. Depending on the type, adenoviruses can cause other illnesses such as gastroenteritis, conjunctivitis, cystitis, and, less commonly, neurological disease.

Seasonal coronaviruses have decreased overall. Rotavirus and human metapneumovirus detection data appear to show no concerning increases; all test positivity data as of March 2, 2024 is under 5%.

PREVENTION

The best way to prevent the spread of infectious respiratory or gastrointestinal illness is to:

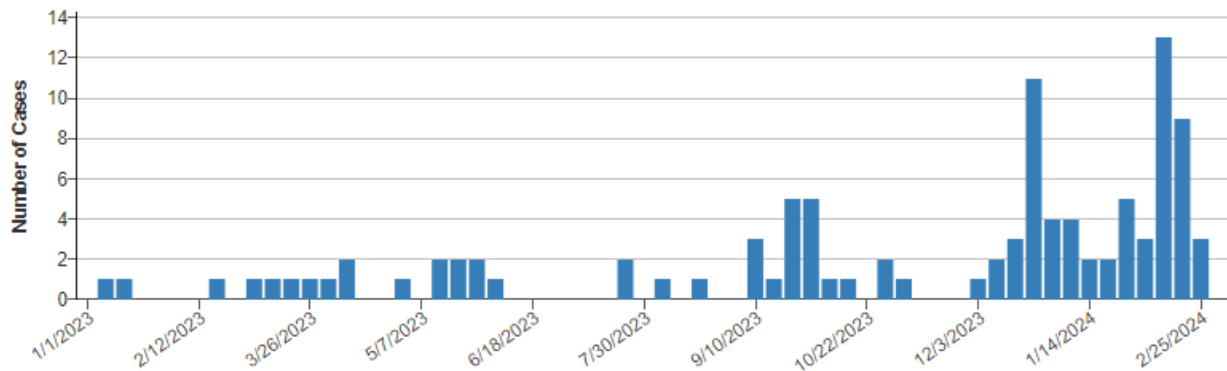
- Cover your cough and sneezes,
- **Wash your hands often,**
- Get vaccinated,
- Stay home when you are ill,
- Wear a mask in crowded places,
- Minimize close contact with sick people,
- Frequently clean and disinfect high touch surfaces,
- Eat healthy, well-balanced meals, and
- Stay hydrated.

MEASLES

As of March 7, 2024, a total of 45 measles cases were reported in 17 States: Arizona, California, Florida, Georgia, Illinois, Indiana, Louisiana, Maryland, Michigan, Minnesota, Missouri, New Jersey, New York City, Ohio, Pennsylvania, Virginia, and Washington since January 1, 2024.

Number of measles cases reported by week

2023-2024* (as of March 7, 2024)



Measles is a highly contagious virus that can lead to serious health complications. If one person has measles, up to 90% of the people close to that person who are not immune will also become infected. Measles is spread through coughing and sneezing of an infected person.

The first symptoms of measles are high fever, cough, runny nose and red, watery eyes. Usually two to three days after symptoms begin tiny white spots (Koplik spots) may appear inside the mouth. Three to five days after symptoms begin, a rash breaks out. The rash usually begins as flat red spots that appear on the face at the hairline and spread downward to the neck, trunk, arms, legs and feet. Measles can be very dangerous for babies and young children.

Good news is there is a vaccine available to protect you and your loved ones from contracting the virus that causes measles. If you are unsure of your vaccination status, contact your doctor or go to the State of Connecticut's Immunization Information System to access your vaccine records at www.ctwizpublicportal.dph.ct.gov. If you need help getting you or a family member up-to-date with vaccinations, please contact (860)785-8380 x 216.



For more information on measles please visit: <https://www.cdc.gov/measles/index.html>

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:

- Ground Cinnamon Products by La Fiesta, SWAD, El Chilar, and Colonna due to elevated blood levels:



- Aji Mori Chillimami Sauce due to potential foodborne illness- Clostridium botulinum

Previously reported:

- Roland Foods, LLC Tahini due to potential Salmonella contamination
- Enchiladas by Rico for for potential Listeria monocytogenes contamination
- Alipotect Raiz de Tejocote by Alipotec King and Brazil Seed Pute Natural Semilla de Brasil & Tejo Root, Raiz de Tejocote by H&Natural for poisonous yellow oleander
- Raw Cheddar Cheese by Raw Farm LLC for potential contamination with E. Coli 0157:H7
- Cheese, yogurt, and sour cream by Rizo Brothers California Creamery expanded recall for potential *Listeria monocytogenes* contamination

For more information on recalls due to food with undeclared allergens, drugs, or medical devices please visit: <https://www.fda.gov/safety/recalls-market-withdrawals-safety-alerts>

Do not 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.