

WEEKLY EPIDEMIOLOGIST REPORT

April 8, 2024



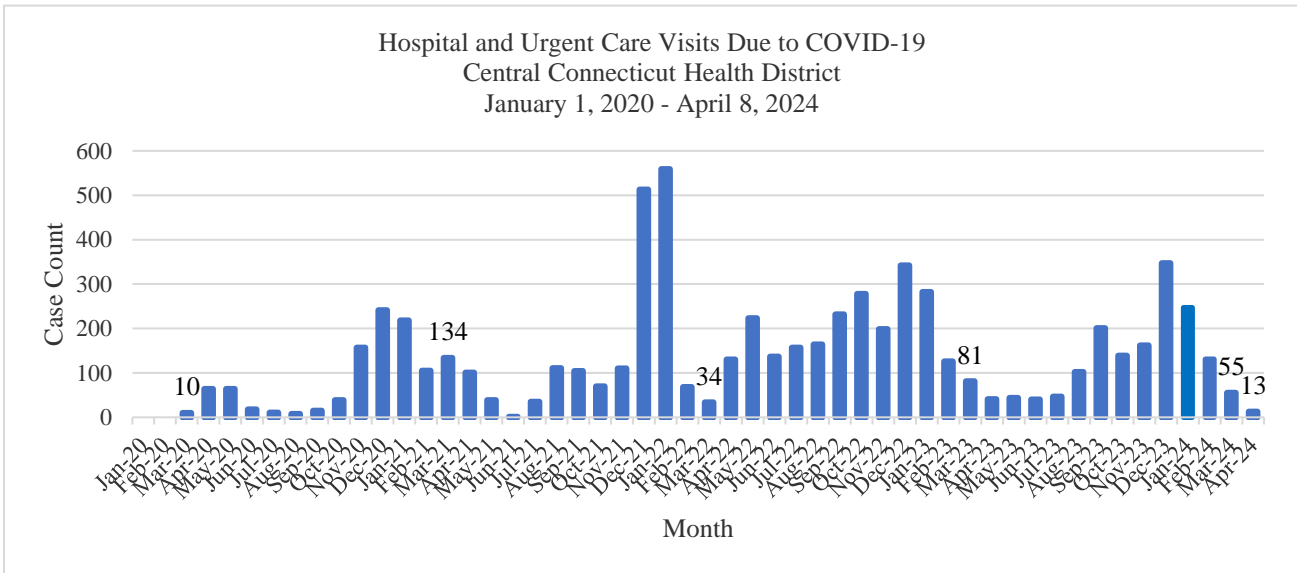
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RESPIRATORY VIRAL SEASON

We have seen a surge in respiratory virus activity for COVID-19 and RSV this past December, while influenza peaked in February. While respiratory virus season is past its peak, its not officially over; CCHD advises to not let your guard down in terms of prevention.

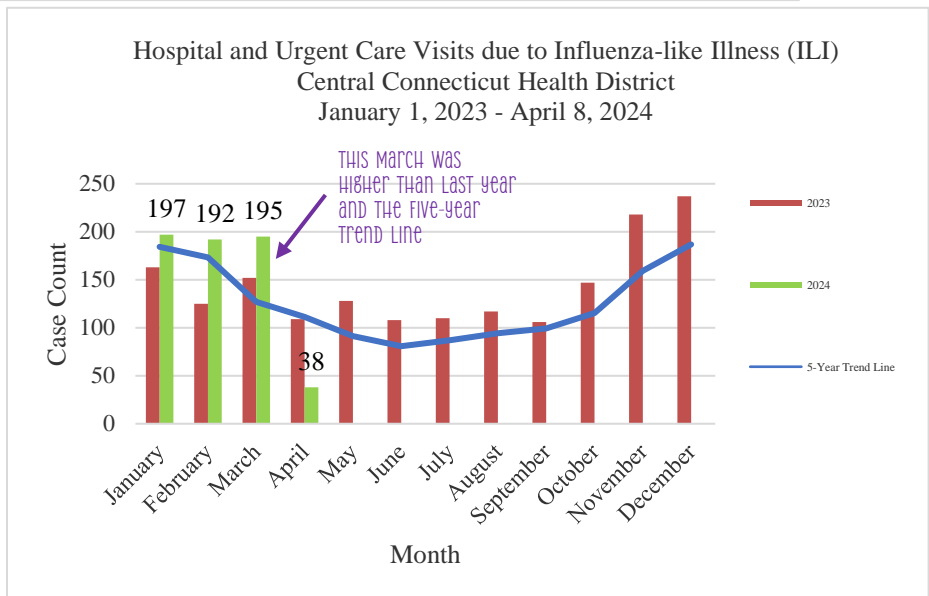
COVID-19 SURVEILLANCE

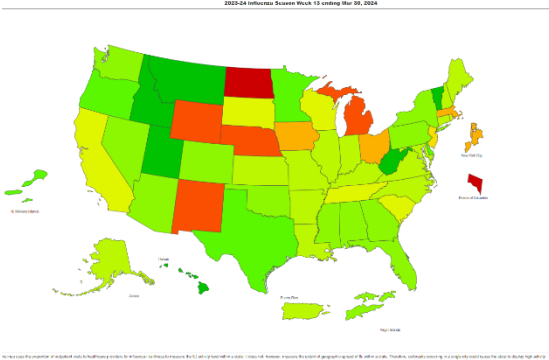
Data for COVID-19 is as of April 8, 2024 from EpiCenter. The bar graph below illustrates the syndromic surveillance of hospital and urgent care visits due to COVID-19 (those experiencing symptoms with a COVID-19 diagnosis) in our district. Twelve cases were reported between 4/2/24-4/8/24. Nationally, wastewater surveillance for COVID-19 indicates a low viral activity level. COVID-19 appears to be on the downward trend all around and will hopefully remain low throughout the Spring and Summer months.



INFLUENZA SURVEILLANCE

Data for Influenza-like Illness (ILI) is as of April 8, 2024 from EpiCenter. The graph on the right illustrates 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. Thirty-two cases of ILI were reported during the week of 4/1/24-4/8/24.





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 bounced up from **MINIMAL** to **LOW** level as of March 30, 2024.

HPAI

Avian influenza A(H5N1) continues to circulate nationally and globally. Recently avian influenza A(H5N1) has been detected in a human in Texas who works directly with dairy cows. The risk for HPAI infection in Connecticut is low. See the figure to the right on the Connecticut Department of Public Health recommendations for HPAI prevention.

For the general public:

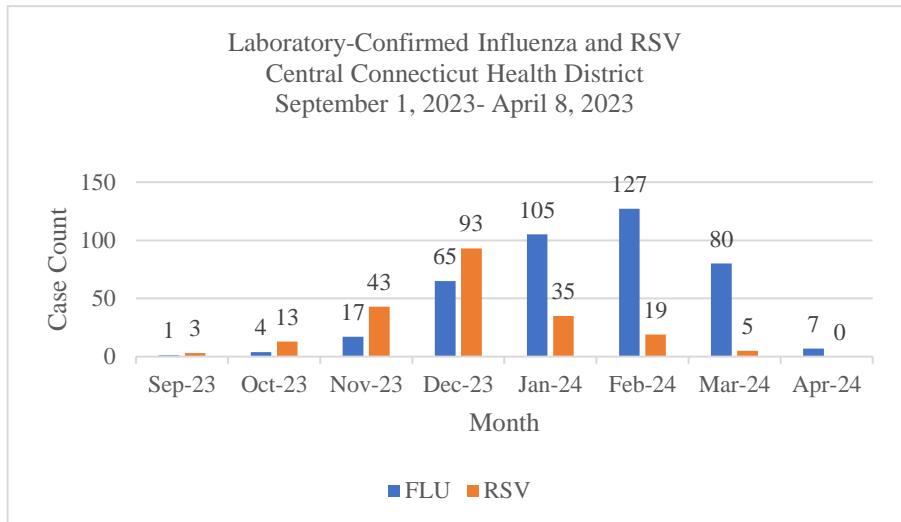
- Avoid unprotected exposures** to sick or dead animals
- Do not eat or prepare uncooked or undercooked food products** (e.g. raw milk, raw cheeses) from animals with suspected or confirmed infection

Farmers/Livestock owners/Workers:

- Avoid unprotected exposures** to sick or dead animals and their environment
- Wear appropriate PPE** when handling potentially infected animals or materials

RESPIRATORY SYNCYTIAL VIRUS (RSV)

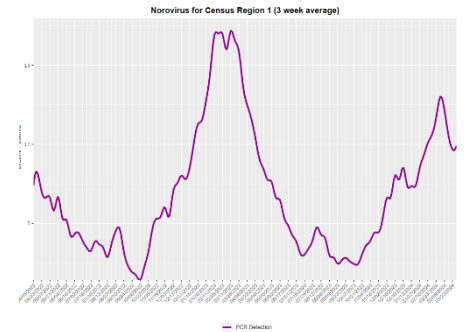
Nationally RSV positivity continues on the downward trend, as well as in the state of Connecticut according to the CDC NRVES. The district was notified of 406 laboratory-confirmed of influenza, and 211 laboratory-confirmed cases of RSV in the CTEDSS database (see figure to the right) since September 1, 2023. No RSV cases have been reported in April so far.



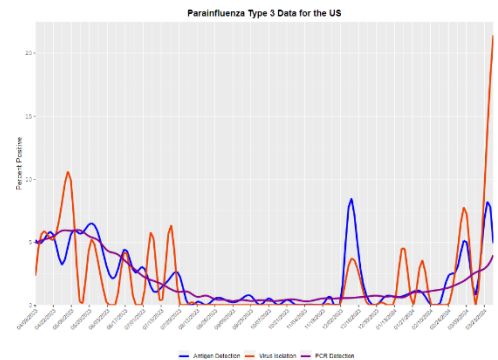
NATIONAL RESPIRATORY & ENTERIC VIRUS SURVEILLANCE SYSTEM (NREVSS)

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 April 5, 2024.

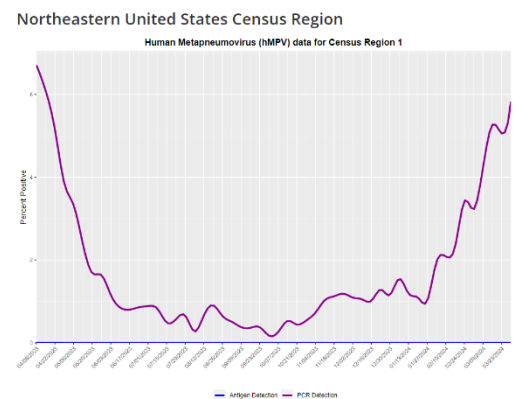
Norovirus test positivity dropped in the Northeast to 9.9%. Norovirus is the leading cause of vomiting and diarrhea, and foodborne illness in the United States.



Nationally, HPIV 3 viral isolation and PCR test positivity continue to increase (see figure to the right). 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 breathes, coughs, or sneezes. HPIV usually survive a few hours on surfaces depending on environmental conditions.

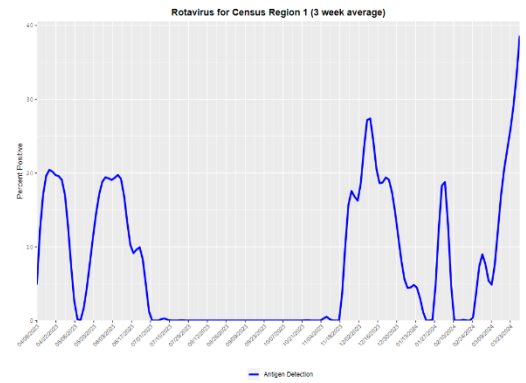


Human Metapneumovirus (HMPV) test positivity for PCR (5.82%) detection remains elevated. HMPV symptoms include cough, fever, nasal congestion, and shortness of breath. HMPV infection may progress to bronchitis or pneumonia and are similar to other viruses that cause upper and lower respiratory infections. The estimated incubation period is 3 to 6 days, and the median duration of illness can vary depending upon severity but is similar to other respiratory infections caused by viruses.



Rotavirus antigen detection in the Northeast has increased substantially to 38.6%. Rotavirus disease is characterized by vomiting and watery diarrhea for three to eight days. Fever and abdominal pain also are common. Additional symptoms include loss of appetite and dehydration. Rotavirus is a vaccine preventable disease. For more information on rotavirus please visit:

<https://www.cdc.gov/rotavirus/index.html>



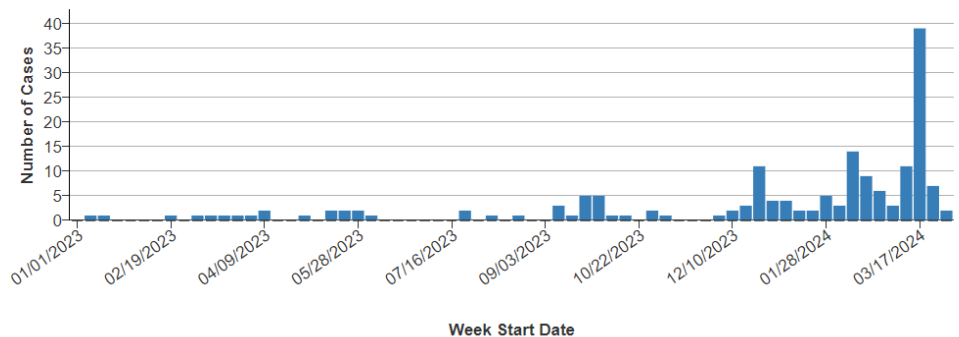
Seasonal coronaviruses have decreased overall and test positivity remains under 3%. Adenovirus test positivity have decreased all around.

MEASLES

As of April 5, 2024, a total of 113 (16 more since last reporting period) measles cases were reported in 18 States: Arizona, California, Florida, Georgia, Illinois, Indiana, Louisiana, Maryland, Michigan, Minnesota, Missouri, New Jersey, New York City, New York State, Ohio, Pennsylvania, Virginia, and Washington since January 1, 2024. Of the 113 cases, 65 (58%) have been hospitalized for isolation or management of measles complications. Of the 65 hospitalized, 37 were under 5 years of age, nine were 5-19 years of age, and 19 were 20 years of age or older. Of the 113 cases, 83% were unvaccinated, 12% only received 1 dose of the MMR vaccine, 5% received two doses of the MMR vaccine.

Number of measles cases reported by week

2023-2024* (as of April 4, 2024)



Measles is a highly contagious virus that can lead to serious health complications. Measles is a vaccine preventable disease. 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>

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.

TICK-BORNE DISEASES

The weather is beautiful today and hopefully you will get a chance to get outdoors to enjoy nature while staying protected from tick-borne diseases. Please visit <https://www.ccthd.org/vectorbornedisease> to find out how to prevent tick bites, how to properly remove a tick and how to submit it to us for testing.

FISHING

With beautiful weather arriving this month, you can expect to see more anglers along the Connecticut River and local fishing holes. The Connecticut Department of Public Health issues a yearly advisory for reducing fish consumption when chemical levels in fish tissue are unsafe. Fish from Connecticut waters are a good, low cost source of protein. Unfortunately, fish can build up chemicals in their bodies such as mercury and polychlorinated biphenyls (PCBs) that may be contaminants in the water. Eating these fish may affect your family's health. For more information on the fish advisory, please visit:

<https://portal.ct.gov/dph/Environmental-Health/Environmental-and-Occupational-Health-Assessment/CT-Fish-Consumption-Advisory-and-the-Safe-Eating-of-Fish-Caught-in-Connecticut>



If you like to fish in the Connecticut River, at this time American Shad are the only fish in the Connecticut River that do not have a

consumption limit, as they are migratory fish. For more information on shad please visit:

<https://portal.ct.gov/DEEP/Fishing/Freshwater/Freshwater-Fishes-of-Connecticut/American-Shad>.

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:

- **No food or beverage recalls to report.**

Previously reported:

- Helados Mexico, mango bars in the variety pack by Tropicale Foods due to the potential to be contaminated with Salmonella.
- Trader Joes Nuts- 50% Less Sodium Roasted and Salted Whole Cashews by Wenders LLC due to potential contamination with *Salmonella*.
- Ground Cinnamon Products by La Fiesta, SWAD, El Chilar, and Colonna due to elevated lead levels.
- Aji Mori Chillimami Sauce due to potential foodborne illness- *Clostridium botulinum*
- 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 Tejocte by H&Natural for poisonous yellow oleander

For more information on recalls due to food with undeclared allergens, drugs, nutritional/dietary supplements 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.