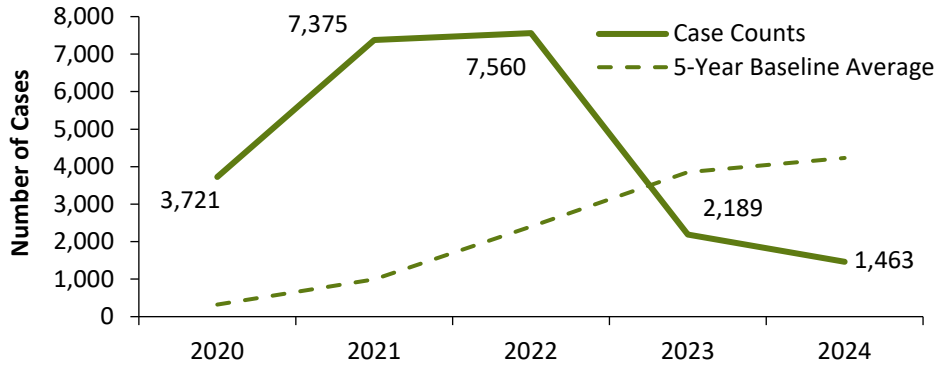
Union County Annual Communicable Disease Report, 2024

Communicable Disease Summary

This report provides an overview of the reportable infections occurring within Union County, Ohio. Nearly 90 diseases are reportable to the local and state health departments per Ohio Administrative Code 3701-3 (see Page 3 for a complete list of these illnesses). These diseases are separated into classes based on their severity and potential for epidemic spread. Each class of disease has a different timeframe in which they are required to be reported to the local health department. Class A diseases must be reported by telephone within one hour while Class B and C diseases are required to be reported by the end of the next business day. Class B diseases are reported by fax or direct entry into the Ohio Disease Reporting System (ODRS) and Class C diseases are primarily reported by telephone. Using ODRS, health departments monitor the health of the community, investigate how individuals became ill, provide education to those ill, and assist medical providers in the treatment and management of these contagious diseases.

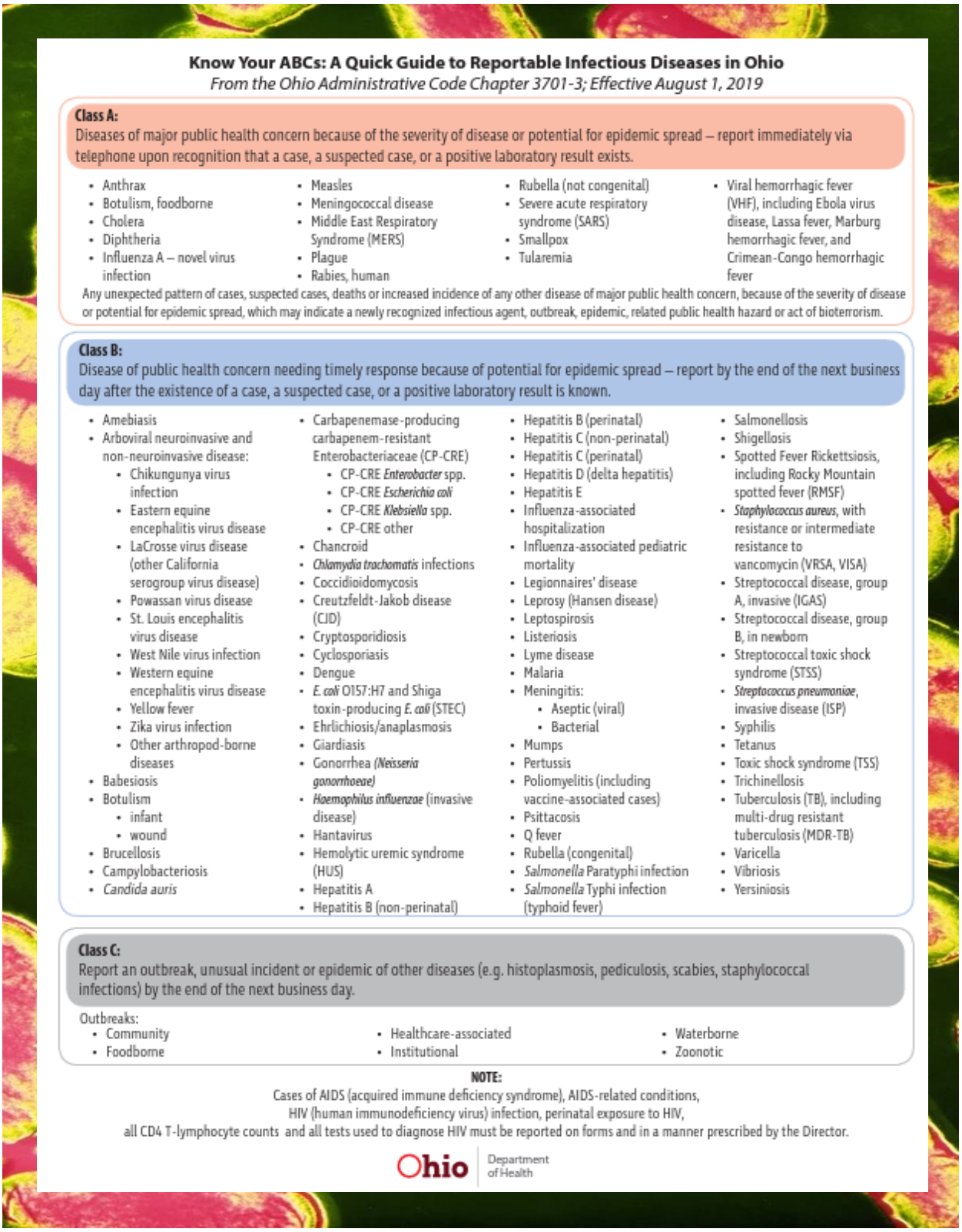
In 2024, Union County saw a 33.2% decrease in communicable disease cases from 2023 (2,189 and 1,463 cases, respectively). Overall, 57.2% of cases were female, 42.4% were male, and 0.4% were unknown. Cases ranged in age from 0 days to 100 years old with an average age of 42.2 years and a median age of 41 years. The most frequently reported illnesses were COVID-19 (1,168 cases), chlamydia (79 cases), pertussis (37 cases), campylobacteriosis (34 cases), and gonorrhea (20 cases). Figure 1. shows the number of disease cases occurring annually over the past five years. Table 1. on Page 4 lists the diseases reported in the community in 2024 and the number of cases for each of these illnesses. Additionally, the figure on Page 5 categorizes those illnesses by type. The remainder of this document provides epidemiological information, brief demographic information, and disease trends for each of the top five illnesses reported over the past five years.

Figure 1. Annual Communicable Disease Totals in Union County, 2020-2024



1. Case counts include confirmed, probable, and suspect disease classifications
2. COVID-19 case counts include confirmed and probable disease classifications
3. Case counts do not include cases among those incarcerated

Ohio's Reportable Diseases[1,2]



Know Your ABCs: A Quick Guide to Reportable Infectious Diseases in Ohio

From the Ohio Administrative Code Chapter 3701-3; Effective August 1, 2019

Class A:
Diseases of major public health concern because of the severity of disease or potential for epidemic spread – report immediately via telephone upon recognition that a case, a suspected case, or a positive laboratory result exists.

- Anthrax
- Botulism, foodborne
- Cholera
- Diphtheria
- Influenza A – novel virus infection
- Measles
- Meningococcal disease
- Middle East Respiratory Syndrome (MERS)
- Plague
- Rabies, human
- Rubella (not congenital)
- Severe acute respiratory syndrome (SARS)
- Smallpox
- Tularemia
- Viral hemorrhagic fever (VHF), including Ebola virus disease, Lassa fever, Marburg hemorrhagic fever, and Crimean-Congo hemorrhagic fever

Any unexpected pattern of cases, suspected cases, deaths or increased incidence of any other disease of major public health concern, because of the severity of disease or potential for epidemic spread, which may indicate a newly recognized infectious agent, outbreak, epidemic, related public health hazard or act of bioterrorism.

Class B:
Disease of public health concern needing timely response because of potential for epidemic spread – report by the end of the next business day after the existence of a case, a suspected case, or a positive laboratory result is known.

- Amebiasis
- Arboviral neuroinvasive and non-neuroinvasive disease:
  - Chikungunya virus infection
  - Eastern equine encephalitis virus disease
  - LaCrosse virus disease (other California serogroup virus disease)
  - Powassan virus disease
  - St. Louis encephalitis virus disease
  - West Nile virus infection
  - Western equine encephalitis virus disease
  - Yellow fever
  - Zika virus infection
  - Other arthropod-borne diseases
- Babesiosis
- Botulism
  - infant
  - wound
- Brucellosis
- Campylobacteriosis
- *Candida auris*
- Carbapenemase-producing carbapenem-resistant Enterobacteriaceae (CP-CRE)
  - CP-CRE *Enterobacter* spp.
  - CP-CRE *Escherichia coli*
  - CP-CRE *Klebsiella* spp.
  - CP-CRE other
- Chancroid
- *Chlamydia trachomatis* infections
- Coccidioidomycosis
- Creutzfeldt-Jakob disease (CJD)
- Cryptosporidiosis
- Cyclosporiasis
- Dengue
- *E. coli* O157:H7 and Shiga toxin-producing *E. coli* (STEC)
- Ehrlichiosis/anaplasmosis
- Giardiasis
- Gonorrhea (*Neisseria gonorrhoeae*)
- *Haemophilus influenzae* (invasive disease)
- Hantavirus
- Hemolytic uremic syndrome (HUS)
- Hepatitis A
- Hepatitis B (non-perinatal)
- Hepatitis B (perinatal)
- Hepatitis C (non-perinatal)
- Hepatitis C (perinatal)
- Hepatitis D (delta hepatitis)
- Hepatitis E
- Influenza-associated hospitalization
- Influenza-associated pediatric mortality
- Legionnaires' disease
- Leprosy (Hansen disease)
- Leptospirosis
- Listeriosis
- Lyme disease
- Malaria
- Meningitis:
  - Aseptic (viral)
  - Bacterial
- Mumps
- Pertussis
- Poliomyelitis (including vaccine-associated cases)
- Psittacosis
- Q fever
- Rubella (congenital)
- *Salmonella* Paratyphi infection
- *Salmonella* Typhi infection (typhoid fever)
- Salmonellosis
- Shigellosis
- Spotted Fever Rickettsiosis, including Rocky Mountain spotted fever (RMSF)
- *Staphylococcus aureus*, with resistance or intermediate resistance to vancomycin (VRSA, VISA)
- Streptococcal disease, group A, invasive (IGAS)
- Streptococcal disease, group B, in newborn
- Streptococcal toxic shock syndrome (STSS)
- *Streptococcus pneumoniae*, invasive disease (ISP)
- Syphilis
- Tetanus
- Toxic shock syndrome (TSS)
- Trichinellosis
- Tuberculosis (TB), including multi-drug resistant tuberculosis (MDR-TB)
- Varicella
- Vibriosis
- Yersiniosis

Class C:
Report an outbreak, unusual incident or epidemic of other diseases (e.g. histoplasmosis, pediculosis, scabies, staphylococcal infections) by the end of the next business day.

Outbreaks:

- Community
- Foodborne
- Healthcare-associated
- Institutional
- Waterborne
- Zoonotic

NOTE:
Cases of AIDS (acquired immune deficiency syndrome), AIDS-related conditions, HIV (human immunodeficiency virus) infection, perinatal exposure to HIV, all CD4 T-lymphocyte counts and all tests used to diagnose HIV must be reported on forms and in a manner prescribed by the Director.

Ohio Department of Health

[1]COVID-19 was added as a Class A disease in 2021 then moved to a Class B in 2023.
[2]Mpox formerly known as monkeypox was added as a Class A disease in 2023

Diseases Reported in 2024

Table 1. Communicable Disease Cases[1] Reported in Union County, 2024		
	Number of Cases[2]	**Case Rate[3]**
Class B Reportable Diseases		
Brucellosis	1	1
Candida auris (C. auris)	1	1
Campylobacteriosis	34	49
Chlamydia	79	113
Coccidioidomycosis	1	1
Coronavirus Disease 2019 (COVID-19)[4]	1,168	1,677
Carbapenemase-Producing Organisms (CPO)	2	3
Cryptosporidiosis	7	10
E. coli, Shiga Toxin-Producing	5	7
Ehrlichiosis	1	1
Giardiasis	3	4
Gonorrhea	20	29
Haemophilus influenzae (invasive disease)	2	3
Hepatitis B (including delta)	10	14
Hepatitis C	17	24
Hepatitis C - Perinatal Infection	2	3
Influenza-Associated Hospitalization	19	27
Legionnaires' Disease	1	1
Lyme Disease	6	9
Meningitis - aseptic/viral	2	3
Mumps	3	4
Pertussis	37	53
Q fever, acute	1	1
Salmonella Typhi	1	1
Salmonellosis	13	19
Shigellosis	4	6
Streptococcal Disease - Group A -invasive	1	1
Streptococcus pneumoniae - invasive antibiotic resistance	2	3
Syphilis	13	19
Tuberculosis	1	1
Varicella	1	1
Vibriosis (not cholera)	1	1
Yersiniosis	4	6
Grand Total	**1,463**	**2,101**

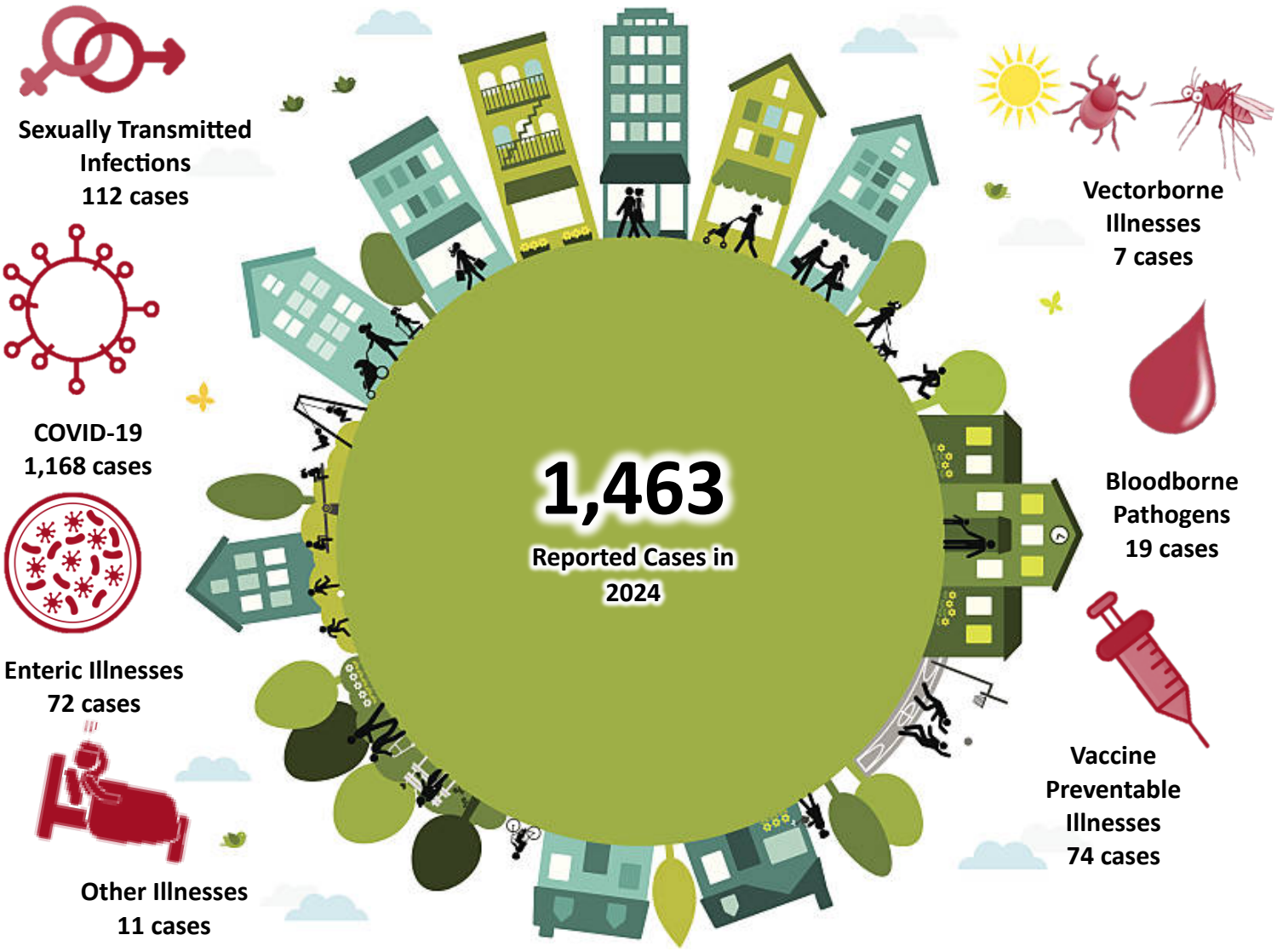
[1]Case counts include confirmed, probable and suspected disease classifications

[2]Case counts do not include cases occurring among those incarcerated in Union County

[3]Case rates per 100,000 people

[4]COVID-19 cases only include confirmed and probable disease classifications

Types of Diseases Reported



Notes:
Case counts include confirmed, probable, and suspect disease classifications
Case counts for COVID-19 include confirmed and probable disease classifications
Sexually transmitted infections include chlamydia, gonorrhea, and syphilis
Enteric illnesses include campylobacteriosis, cryptosporidiosis, *E. coli*, giardia, salmonella, shigella, vibriosis, and yersiniosis
Vaccine preventable illnesses include *Haemophilus influenzae*, Hepatitis B, influenza-associated hospitalizations, mumps, pertussis, *Streptococcus pneumoniae*, and varicella
Bloodborne pathogens include Hepatitis C and perinatal Hepatitis C
Vectorborne illnesses include Ehrlichiosis and Lyme disease
Other illnesses include brucellosis, *C. auris*, coccidioidomycosis, CPO, Legionnaires' disease, viral meningitis, Q-fever, streptococcal disease, and tuberculosis

COVID-19

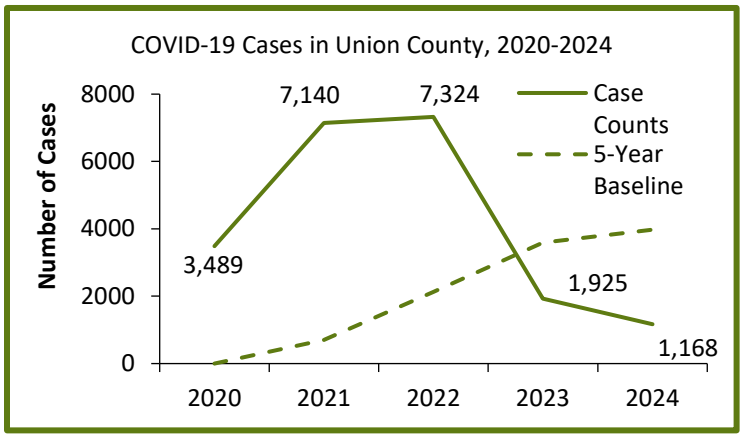
This illness is caused by the species of the Coronaviridae virus family- SARS-CoV-2. First discovered in Wuhan, China in 2019, this virus quickly transmitted worldwide causing the COVID-19 pandemic. People often develop symptoms 1-14 days after exposure. Prevention includes avoiding those ill with COVID-19, social distancing, wearing a cloth facemask that covers the mouth and nose, handwashing, and disinfecting frequently touched surfaces. Vaccination reduces likelihood of serious illness.

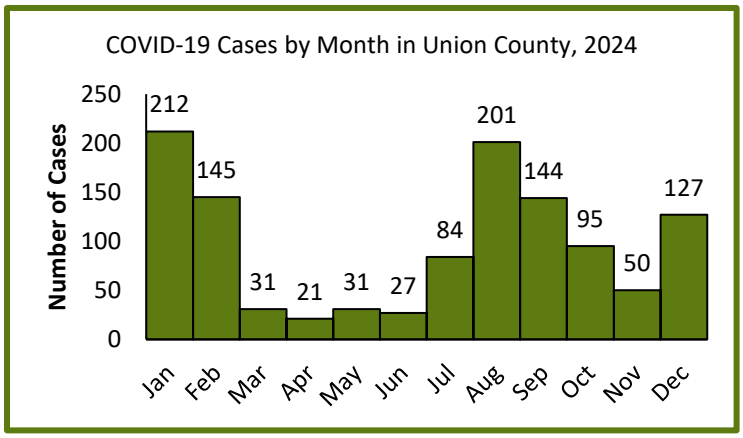
1,168

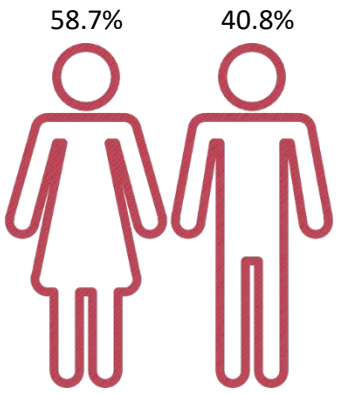
Cases of COVID-19

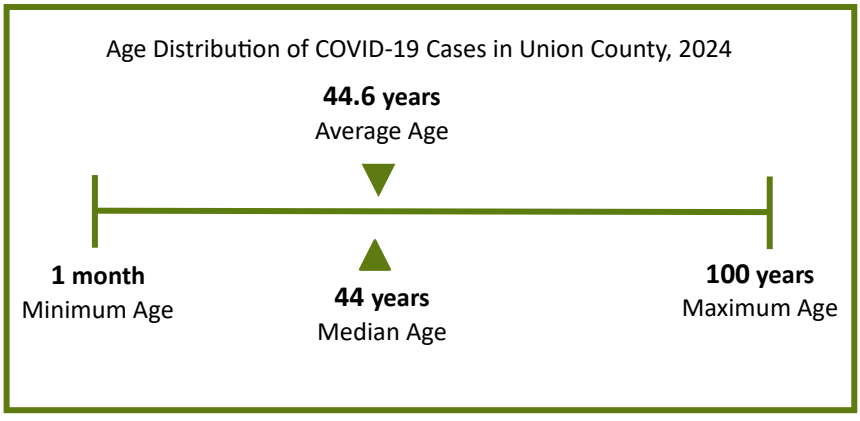
39.3%

Decrease from 2023









Chlamydia

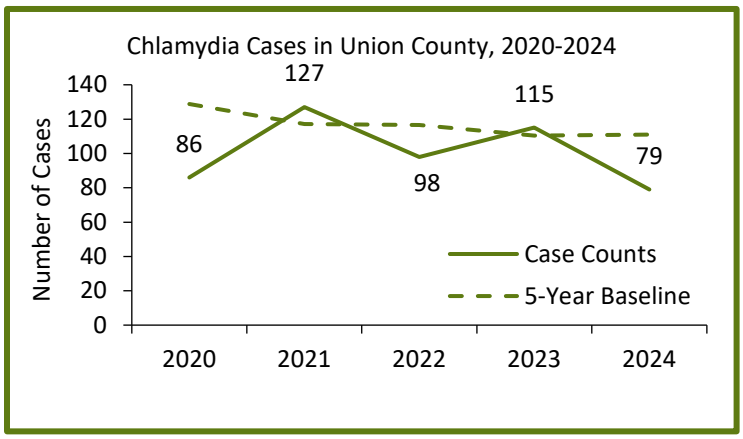
This sexually transmitted infection is caused by the bacteria *Chlamydia trachomatis*. People often develop symptoms 7-21 days after exposure. Prevention includes abstinence, appropriate condom use, and identification and treatment of sexual contacts of those infected with Chlamydia.

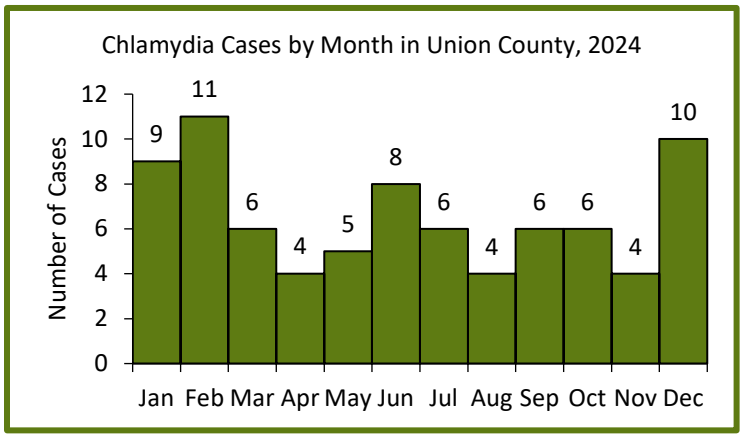
79

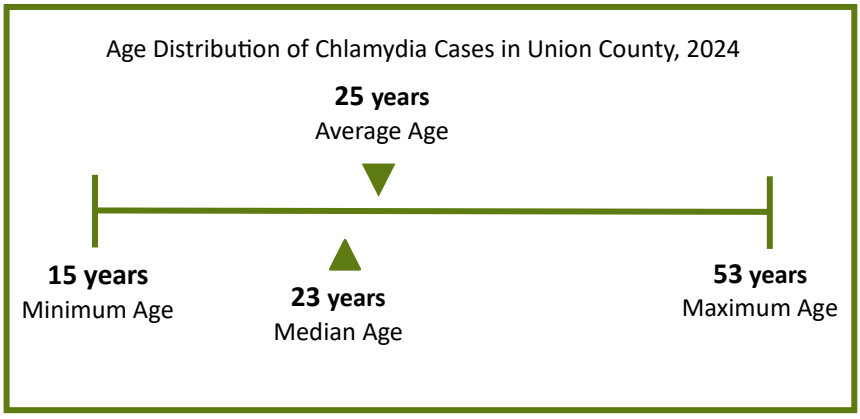
Cases of Chlamydia

31.3%

Decrease from 2023

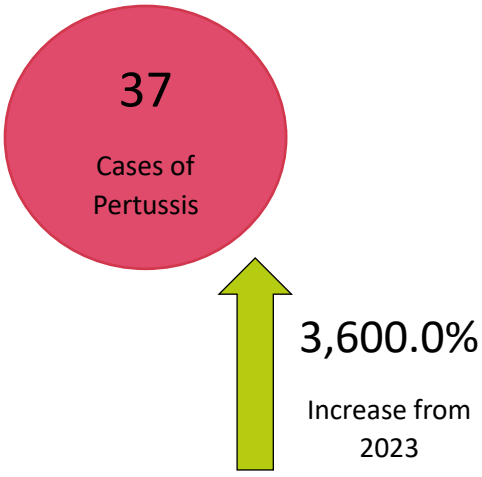


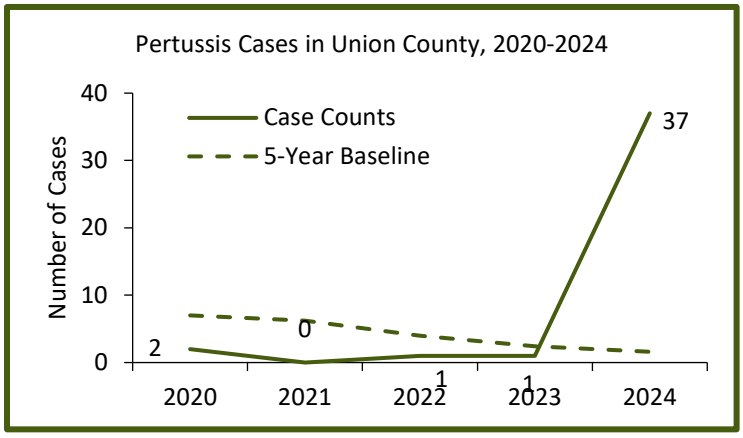


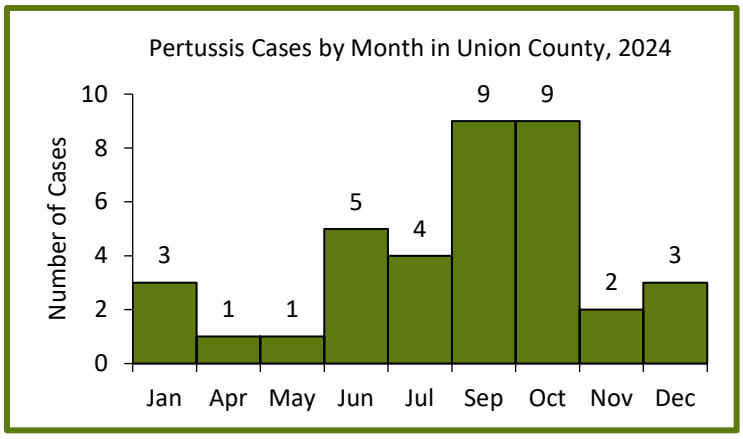


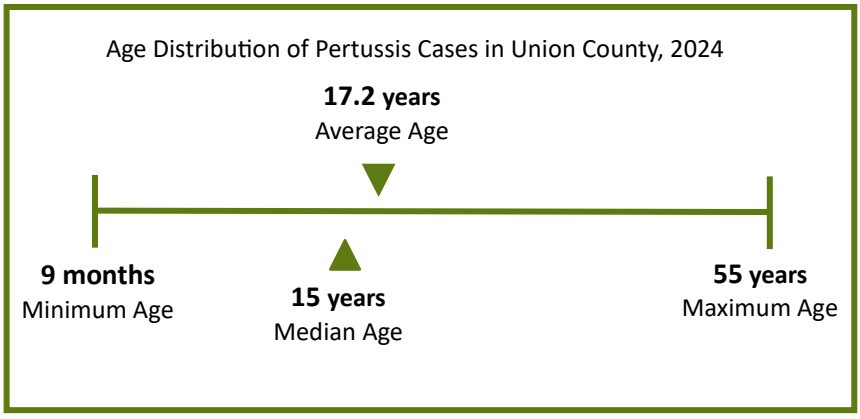
Pertussis

Pertussis is spread through direct contact with respiratory droplets from an infected person. People often develop symptoms 7-10 days after exposure. Symptoms can persist from weeks to months after infection and it is often referred to as the 100-day cough. The best prevention is vaccination.



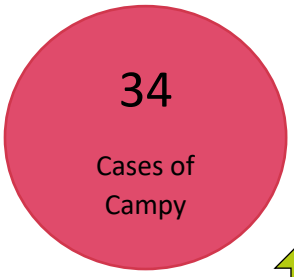


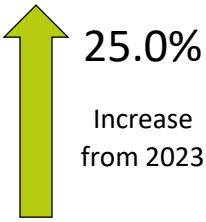


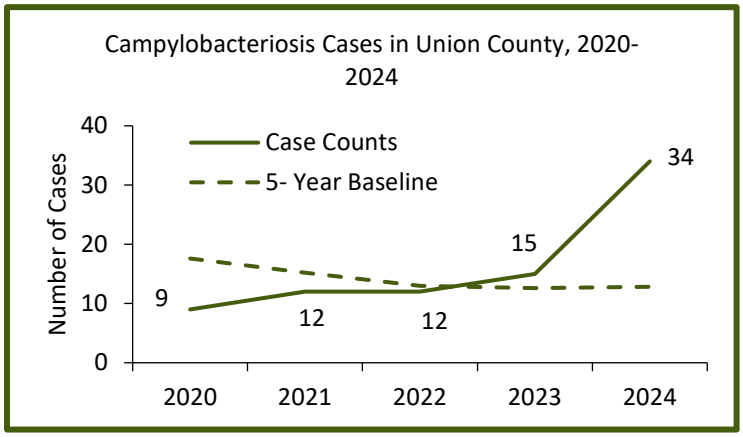


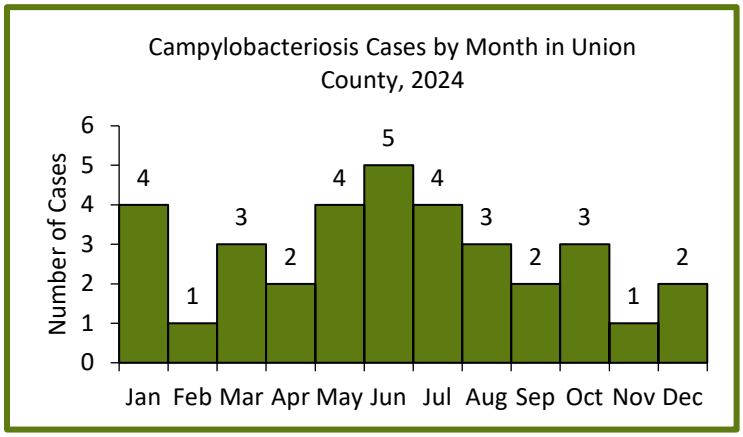
Campylobacteriosis

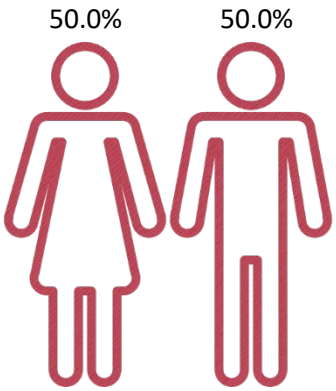
This infection is caused by the Campylobacter bacteria. It is commonly found in many wild/domestic animals including poultry, cattle, dogs, and cats. It is spread fecal-orally; primarily by eating raw or undercooked poultry or food contaminated by raw or undercooked poultry. Individuals often become ill 2-4 days after exposure. Prevention includes hand washing, safe food preparation and pasteurization.

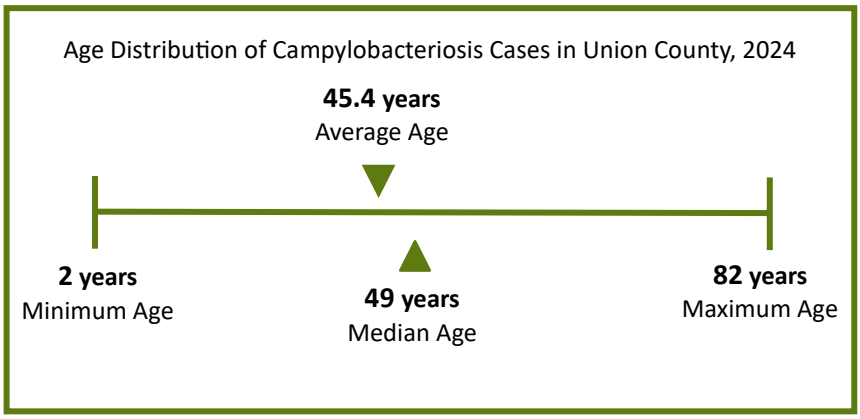






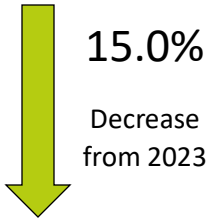






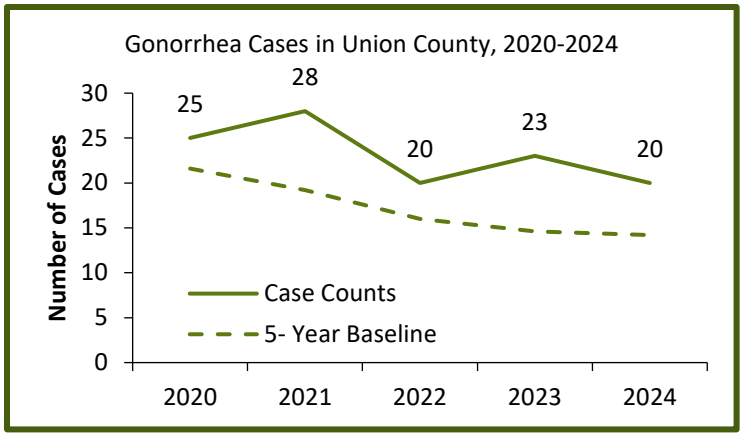
Gonorrhea

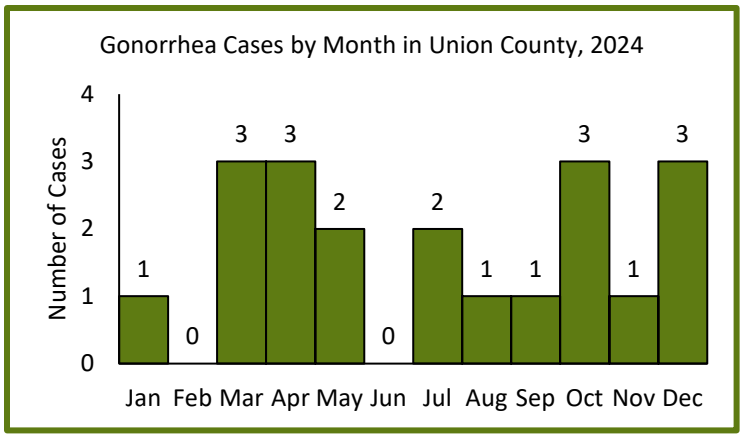
This infection is caused by the sexually transmitted bacteria *Neisseria gonorrhoeae*. People often develop symptoms 3-8 days after exposure. The best prevention for this infection includes abstinence, appropriate condom use, and identification and treatment of sexual contacts of those infected with gonorrhea.

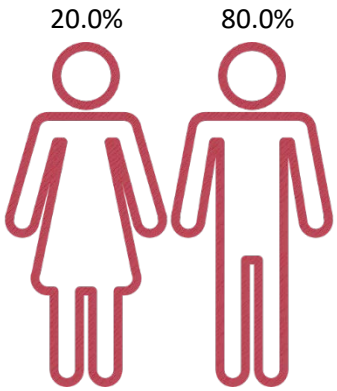


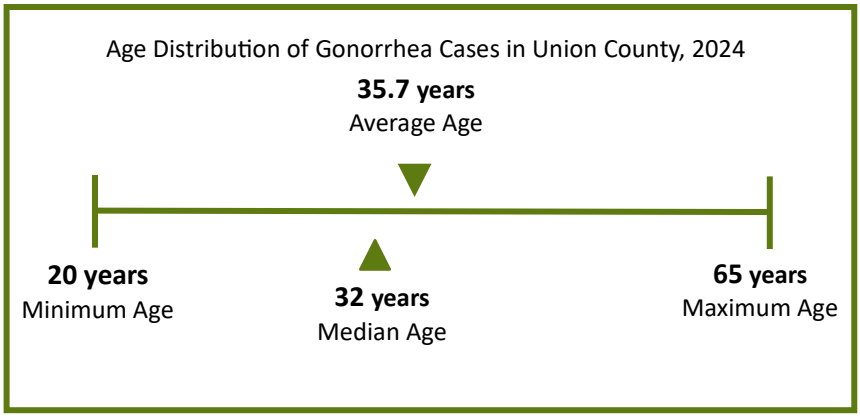
15.0%

Decrease from 2023









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UNION COUNTY
HEALTH DEPARTMENT

Prepared by the Union County Health Department's epidemiologist.

All data was queried from the Ohio Disease Reporting System's

Data Extract on February 4, 2025