



MARYLAND
Department of Health

Public Health Preparedness and Situational Awareness Report: #2021:43

Reporting for the week ending 10/30/21 (MMWR Week #43)

November 5, 2021

CURRENT HOMELAND SECURITY THREAT LEVELS

National: No Active Alerts

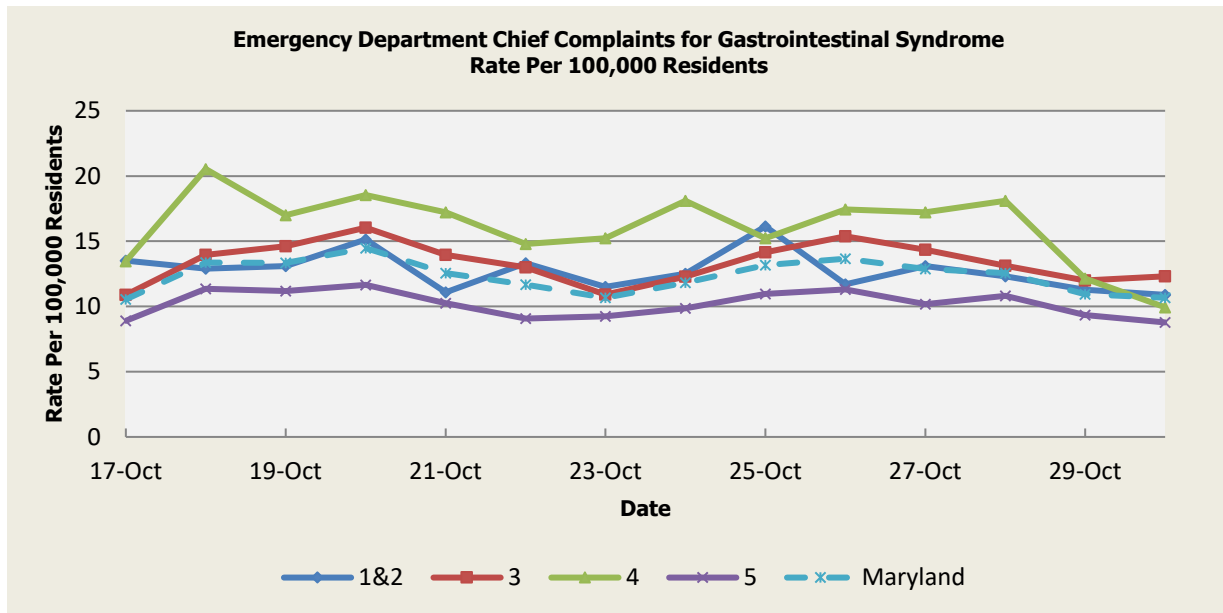
Maryland: **ENHANCED** (MEMA status)

SYNDROMIC SURVEILLANCE REPORTS

ESSENCE (Electronic Surveillance System for the Early Notification of Community-based Epidemics): Graphical representation is provided for all syndromes (excluding the “Other” category; see Appendix 1) by Health and Medical Regions (See Appendix 2). Emergency Department chief complaint data is presented as rates per 100,000 residents using data from the 2010 census. Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE). Baltimore, MD: Maryland Department of Health; 2021.

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Gastrointestinal Syndrome



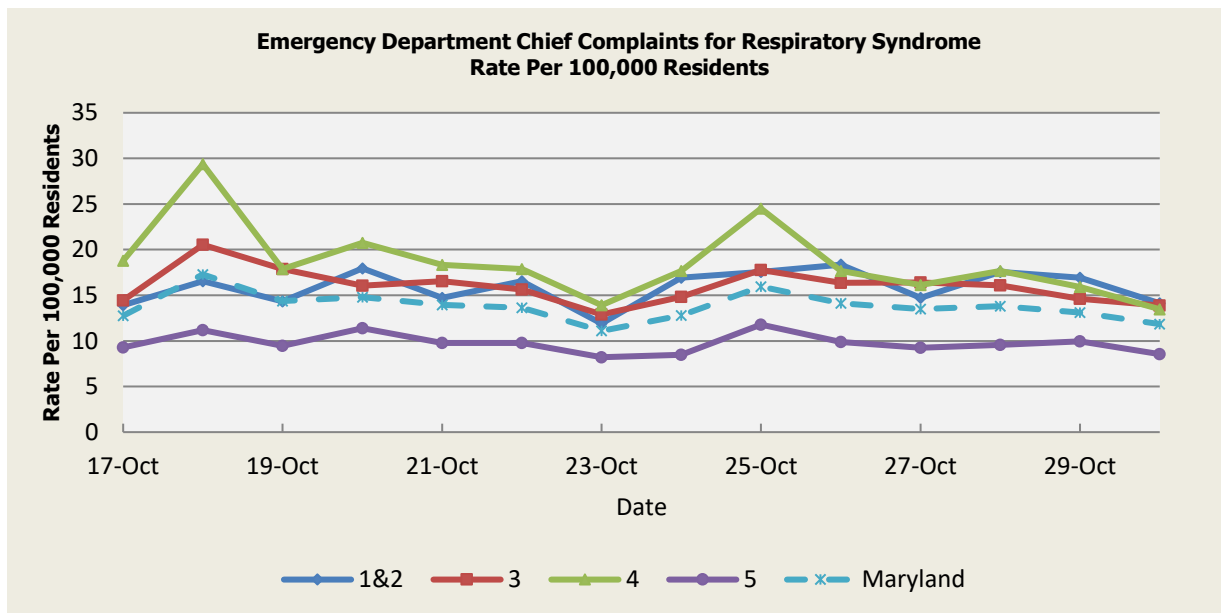
There were two (2) Gastrointestinal Syndrome outbreaks reported this week. one (1) outbreak of Gastroenteritis in a Hospital (Region 3), one (1) outbreak of Gastroenteritis / Foodborne in a Restaurant (Region 3).

Gastrointestinal Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	13.16	14.70	15.90	10.07	12.89
Median Rate*	13.11	14.58	15.46	10.04	12.85

* Per 100,000 Residents

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Respiratory Syndrome



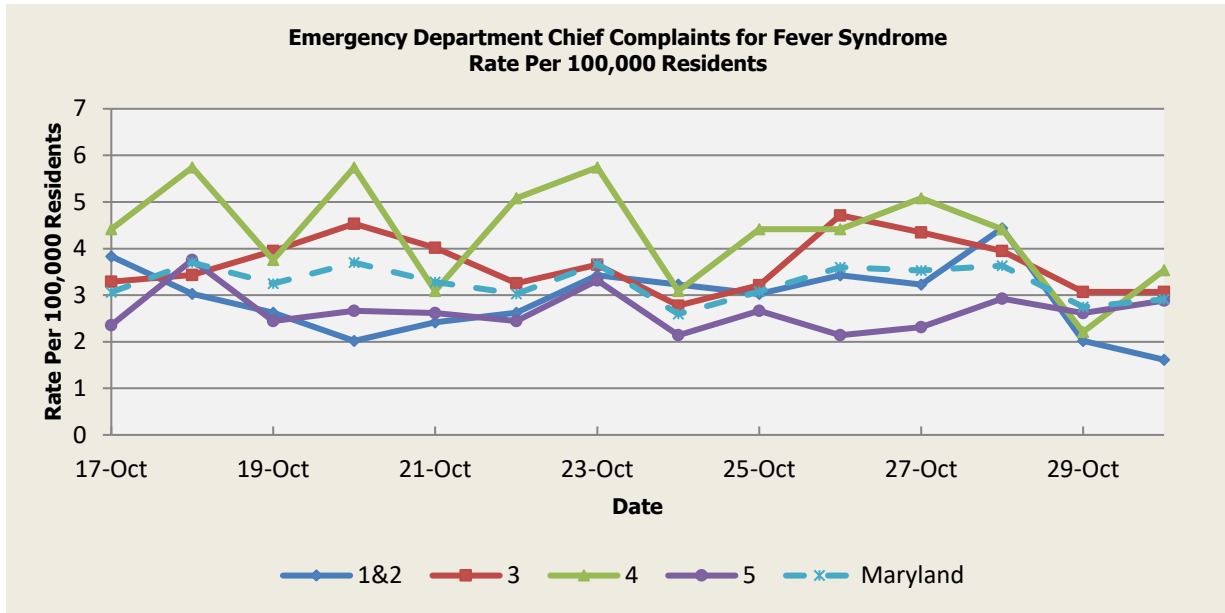
There were ninety-two (92) Respiratory Syndrome outbreaks reported this week: eleven (11) outbreaks of COVID-19 in Assisted Living Facilities (Regions 1&2,3,4,5), one (1) outbreak of COVID-19 in a Day Program (Region 3), seven (7) outbreaks of COVID-19 in Correctional Facilities (Regions 3,4), one (1) outbreak of COVID-19 in an Apartment Community (Region 4), seven (7) outbreaks of COVID-19 in Daycare Facilities (Regions 1&2,3,4,5), five (5) outbreaks of COVID-19 in Group Homes (Regions 1&2,4), four (4) outbreaks of COVID-19 in Hospitals (Regions 3,5), twelve (12) outbreaks of COVID-19 in Nursing Homes (Regions 1&2,3,5), twenty seven (27) outbreaks of COVID-19 in Schools (Regions 1&2,3,4,5), five (5) outbreaks of COVID-19 in Substance Use Treatment Facilities (Regions 3,5), three (3) outbreaks of COVID-19 in Shelters (Regions 3,4,5), two (2) outbreaks of RSV in Daycare Facilities (Regions 3,5), five (5) outbreaks of COVID-19 in Youth Sports Programs (Regions 1&2,3,4) and one (1) outbreak of Legionellosis in an Assisted Living Facility (Region 3).

Respiratory Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	12.50	14.68	15.31	9.89	12.71
Median Rate*	12.10	14.03	14.57	9.52	12.18

* Per 100,000 Residents

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Fever Syndrome



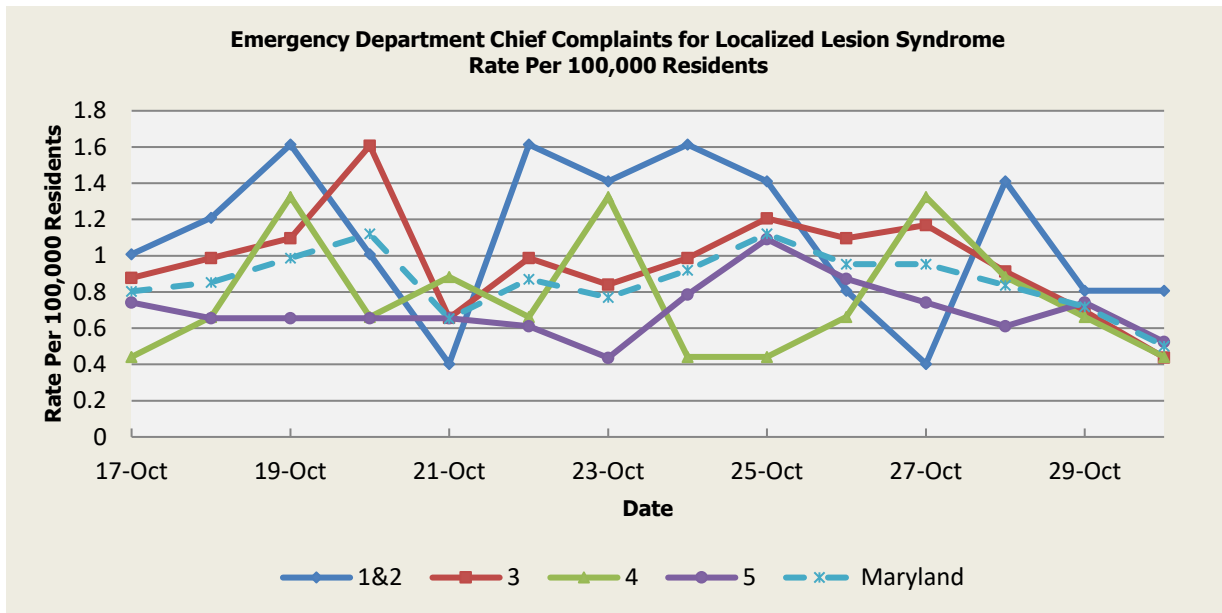
There were no Fever Syndrome outbreaks reported this week.

Fever Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	3.04	3.87	4.12	2.98	3.48
Median Rate*	2.82	3.73	3.97	2.88	3.35

*Per 100,000 Residents

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Localized Lesion Syndrome



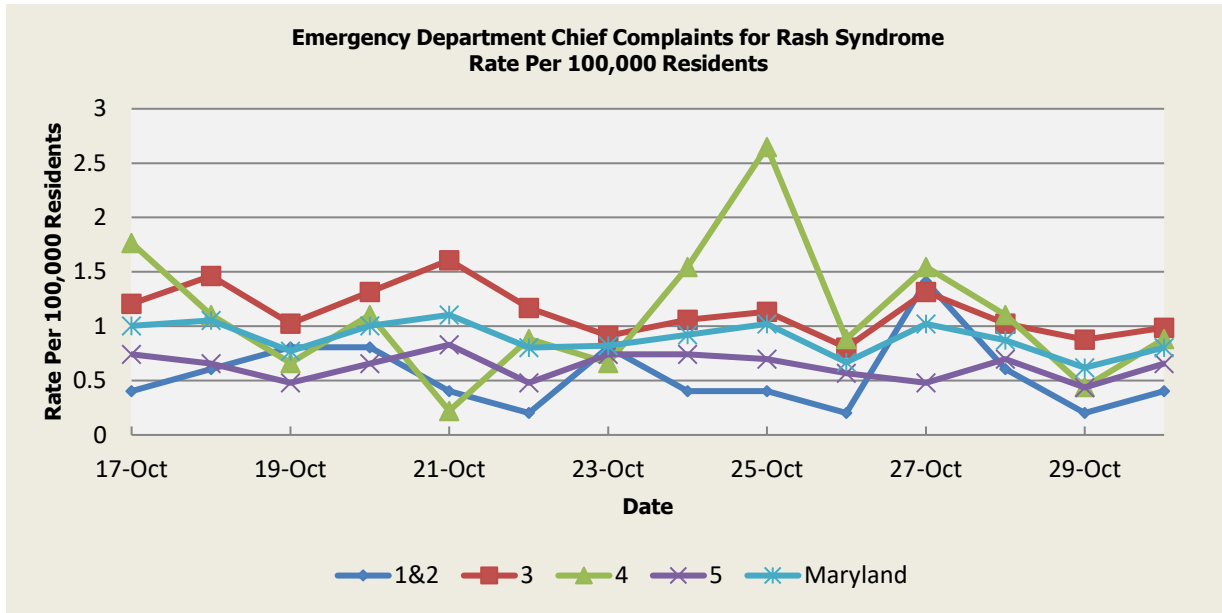
There were no Localized Lesion Syndrome outbreaks reported this week.

Localized Lesion Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	1.17	1.65	1.94	0.85	1.33
Median Rate*	1.01	1.61	1.77	0.83	1.29

* Per 100,000 Residents

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Rash Syndrome



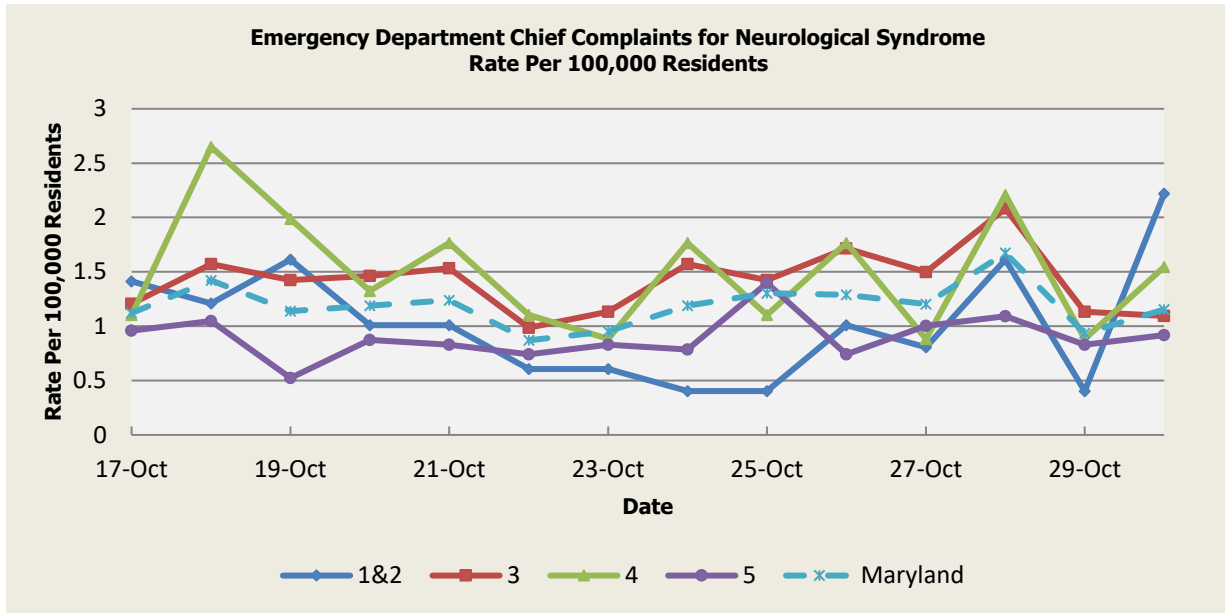
There were seven (7) Rash illness outbreaks reported this week: seven (7) outbreaks of Hand, Foot, and Mouth Disease in Daycare Facilities (Regions 3,5).

Rash Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	1.16	1.54	1.64	0.90	1.27
Median Rate*	1.01	1.50	1.55	0.87	1.24

* Per 100,000 Residents

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Neurological Syndrome



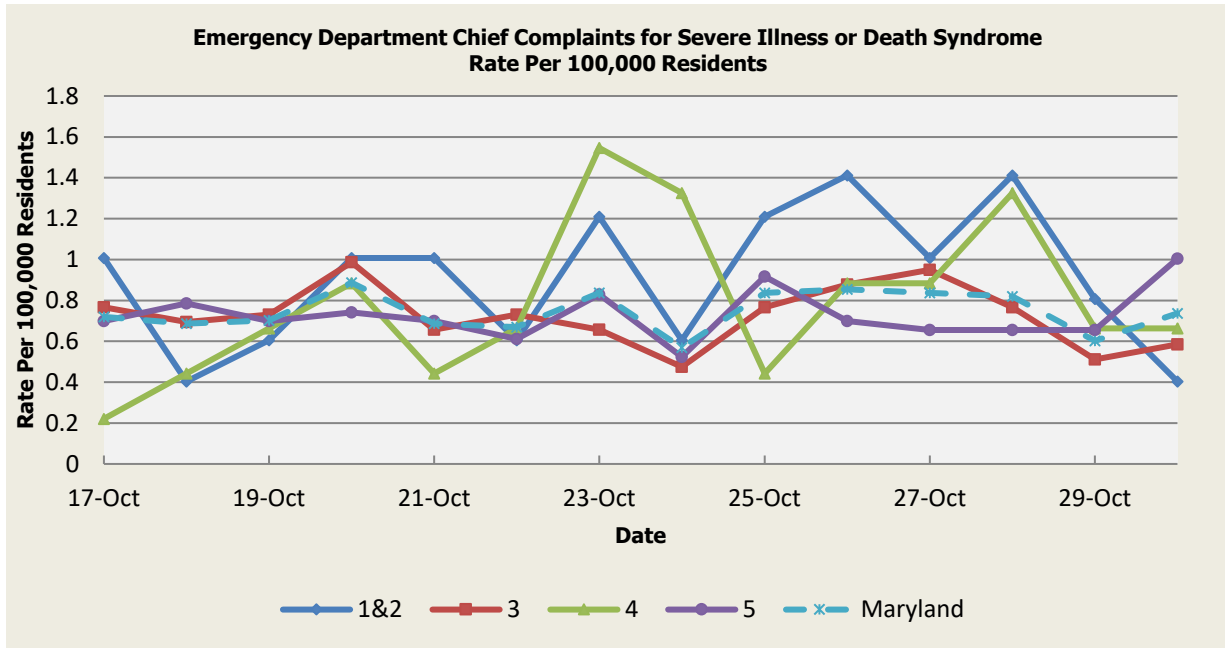
There was no appreciable increase above baseline in the rate of ED visits for Neurological Syndrome.

Neurological Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.84	1.04	0.97	0.67	0.88
Median Rate*	0.81	0.99	0.88	0.61	0.85

* Per 100,000 Residents

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Severe Illness or Death Syndrome



There were no Severe Illness or Death Syndrome outbreaks reported this week.

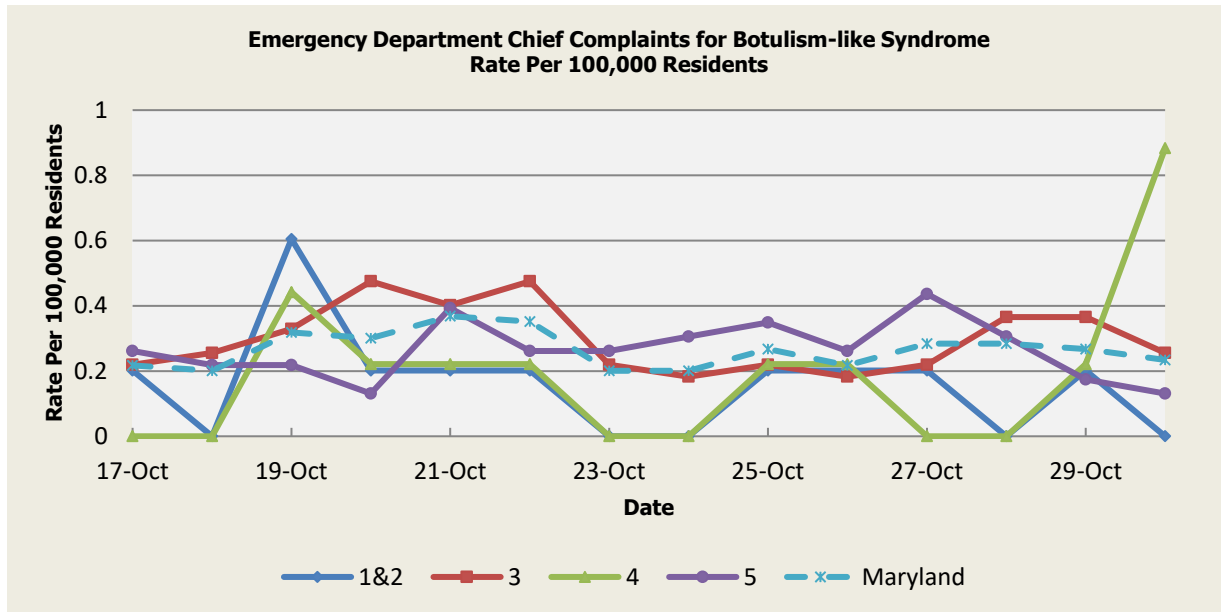
Severe Illness or Death Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.67	0.87	0.85	0.55	0.73
Median Rate*	0.60	0.84	0.88	0.52	0.70

* Per 100,000 Residents

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SYNDROMES RELATED TO CATEGORY A AGENTS

Botulism-like Syndrome



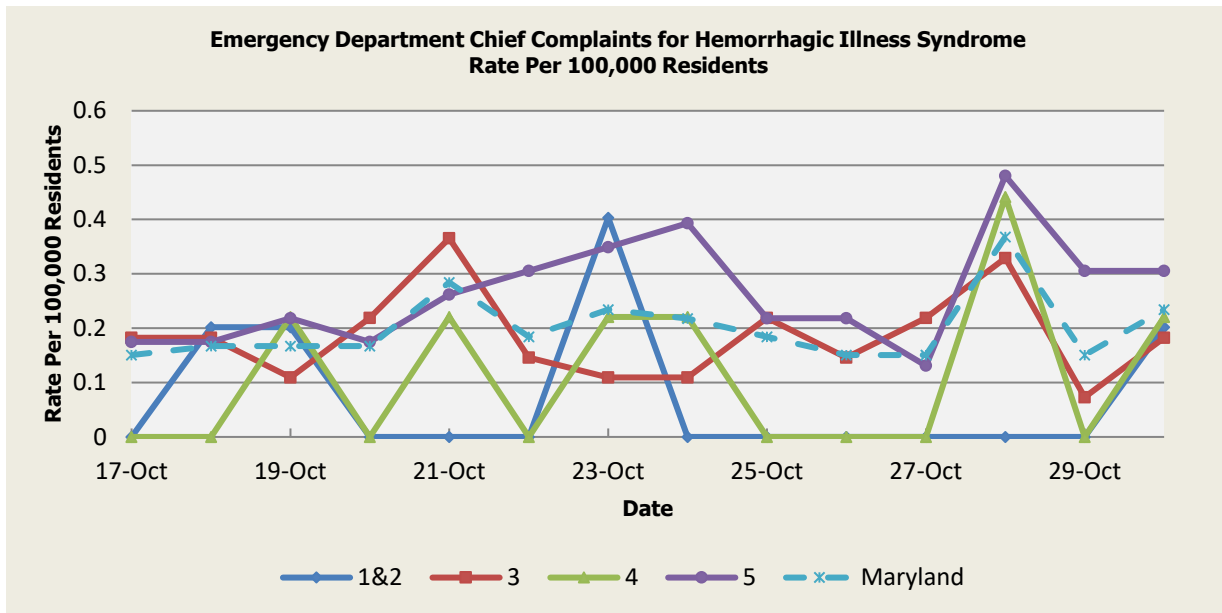
There was an appreciable increase above baseline in the rate of ED visits for Botulism-like Syndrome on 10/17 (Regions 1&2,5), 10/18 (Region 5), 10/19 (Regions 1&2,3,4,5), 10/20 (Regions 1&2,3,4), 10/21 (Regions 1&2,3,4,5), 10/22 (Regions 1&2,3,4,5), 10/23 ((Region 5). These increases are not known to be associated with any outbreaks.

Botulism-like Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.08	0.14	0.07	0.10	0.11
Median Rate*	0.00	0.11	0.00	0.09	0.10

* Per 100,000 Residents

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Hemorrhagic Illness Syndrome



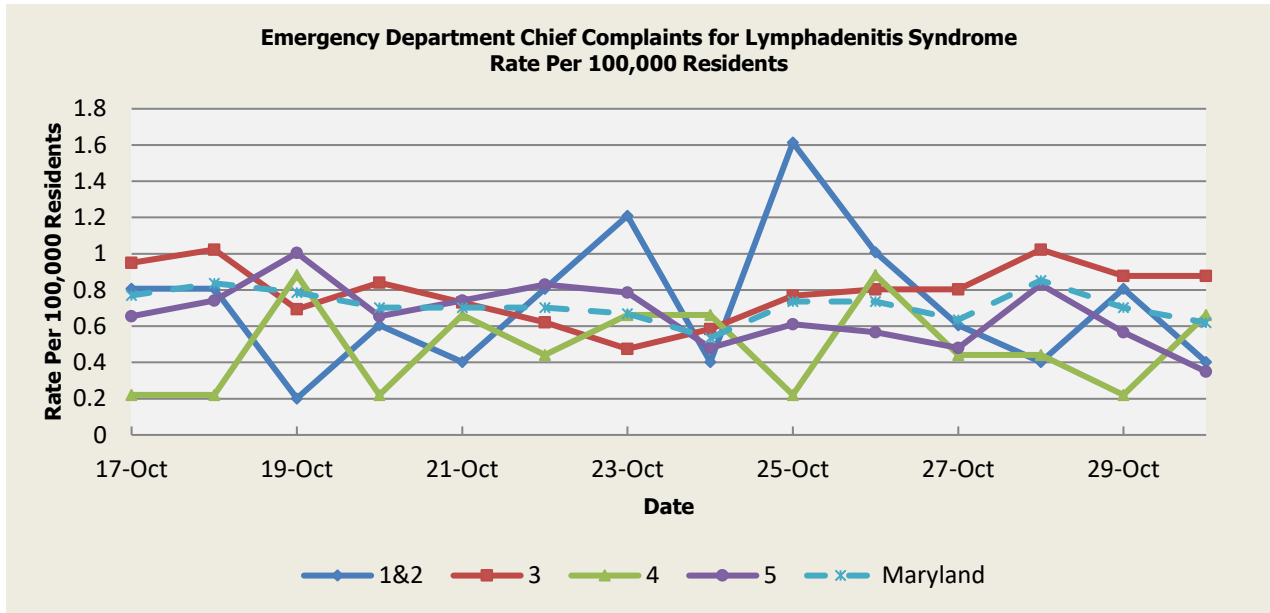
There was an appreciable increase above baseline in the rate of ED visits for Hemorrhagic Illness Syndrome on 10/18 (Regions 1&2.), 10/19 (Regions 1&2,4), 10/21 (Regions 3,4), 10/22 (Region 5), 10/23 (Regions 4,5). These increases are not known to be associated with any outbreaks.

Hemorrhagic Illness Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.05	0.17	0.04	0.15	0.14
Median Rate*	0.00	0.15	0.00	0.09	0.12

* Per 100,000 Residents

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Lymphadenitis Syndrome



There was an appreciable increase above baseline in the rate of ED visits for Lymphadenitis Syndrome on 10/19 (Regions 4,5), 10/22 (Region 5), 10/23 (Regions 1&2). These increases are not known to be associated with any outbreaks.

Lymphadenitis Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.42	0.62	0.41	0.41	0.51
Median Rate*	0.40	0.58	0.44	0.35	0.50

* Per 100,000 Residents

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MARYLAND REPORTABLE DISEASE SURVEILLANCE

Coronavirus Disease 2019 (COVID-19) Situation Summary

On March 5th, 2020, the Maryland Department of Health announced the first cases of Coronavirus disease 2019 (d COVID-19) in the State of Maryland.

Confirmed COVID-19 Case Counts in Maryland by County (As of November 5th, 2021)

County	Number of Confirmed Cases
Allegany	9,912
Anne Arundel	53,496
Baltimore City	77,347
Baltimore County	62,004
Calvert	5,769
Caroline	3,263
Carroll	11,950
Cecil	8,959
Charles	14,597
Dorchester	4,186
Frederick	24,540
Garrett	3,363
Harford	20,978
Howard	22,819
Kent	1,744
Montgomery	82,890
Prince George's	100,178
Queen Anne's	3,929
St. Mary's	10,077
Somerset	3,378
Talbot	2,911
Washington	19,987
Wicomico	11,227
Worcester	5,060
Total	564,564

The most up-to-date information may be found on the Maryland Department of Health website at <https://coronavirus.maryland.gov>.

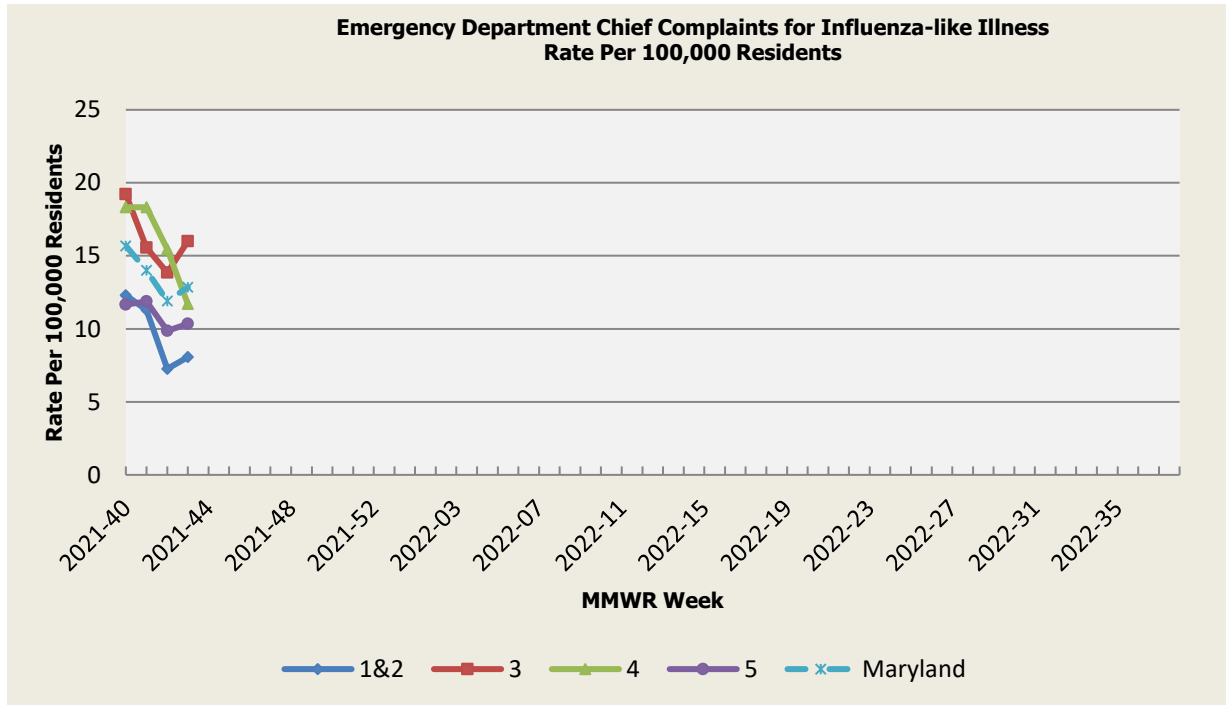
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SYNDROMIC INFLUENZA SURVEILLANCE

Seasonal Influenza reporting occurs from MMWR Week 40 through MMWR Week 20 (October 2021 through May 2022).

Seasonal Influenza activity for Week 43: Minimal

Influenza-like Illness

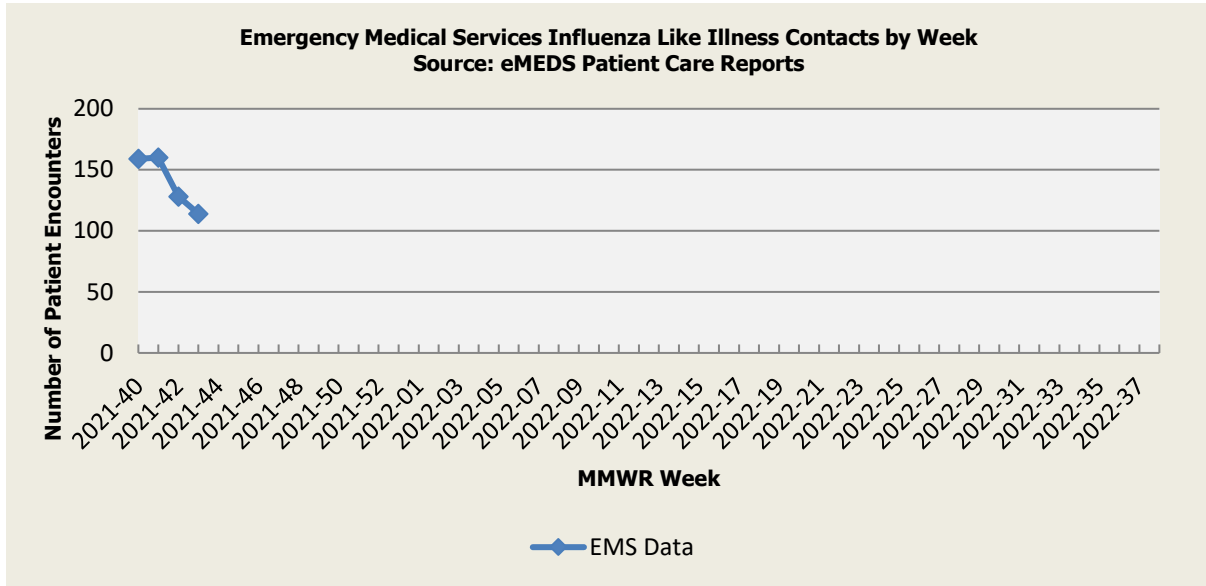


Influenza-like Illness Baseline Data Week 1 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	9.93	13.82	13.14	11.47	12.55
Median Rate*	7.26	10.27	9.50	8.56	9.32

* Per 100,000 Residents

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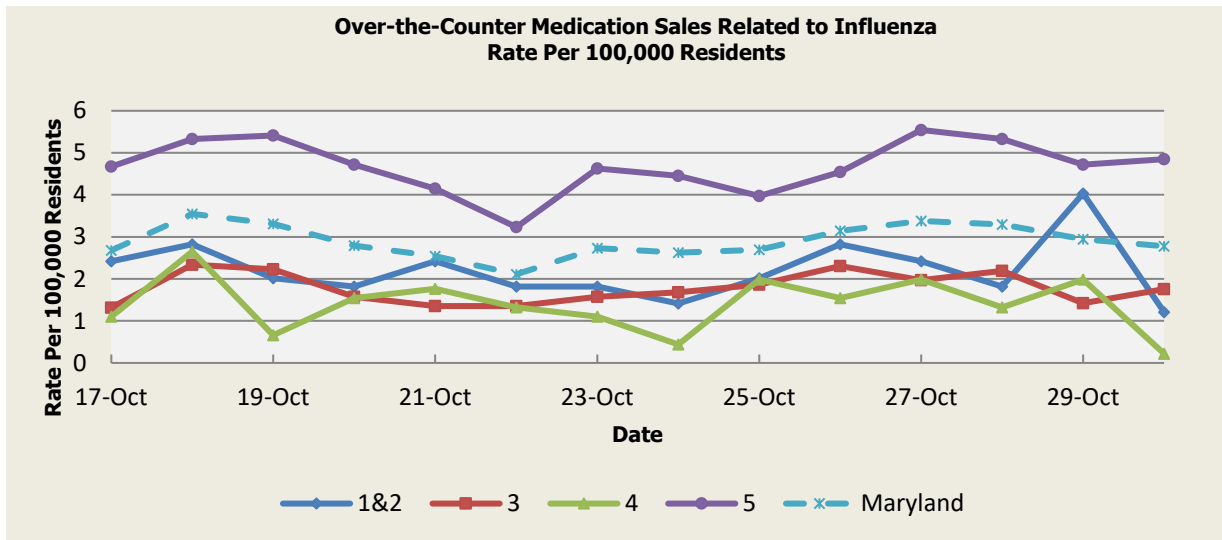
Influenza-like Illness Contacts by Week



Disclaimer on eMEDS flu related data: These data are based on EMS Pre-hospital care reports where the EMS provider has selected “flu like illness” as a primary or secondary impression of a patient’s illness. This impression is solely based on the signs and symptoms seen by the provider, not on any diagnostic tests. Since these numbers do not include all primary or secondary impressions that may be seen with influenza the actual numbers may be low. These data are reported for trending purposes only.

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Over-the-Counter Influenza-Related Medication Sales



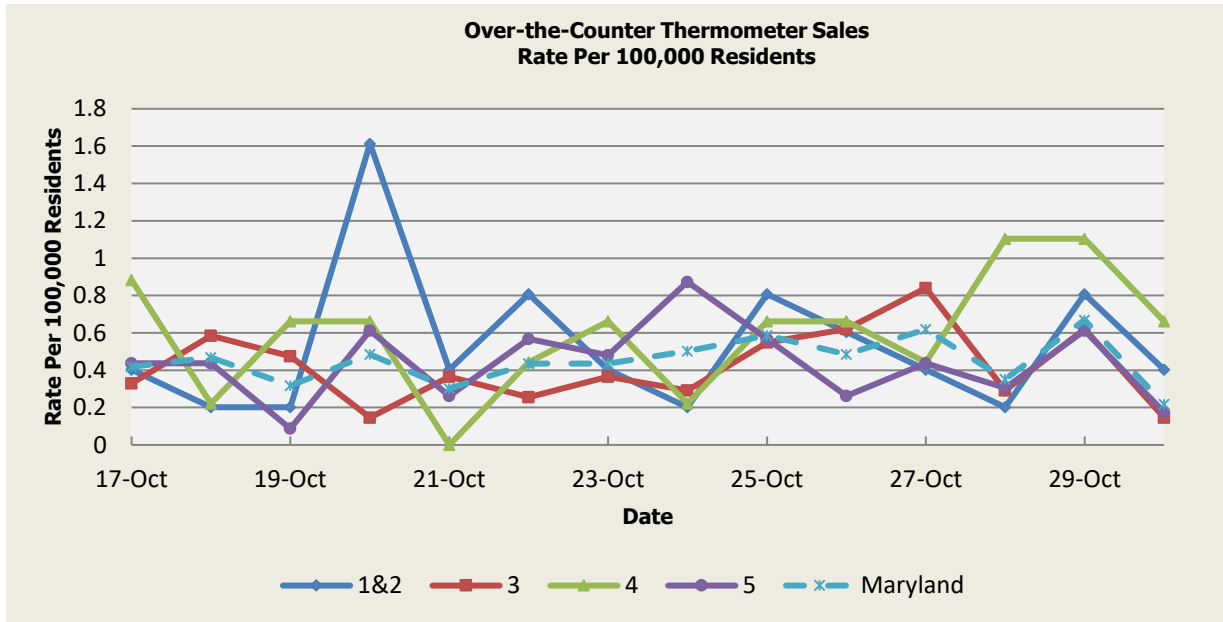
There was no appreciable increase above baseline in the rate of OTC Medication Sales during this reporting period.

OTC Medication Sales Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	3.09	3.92	2.42	7.15	4.97
Median Rate*	2.22	2.89	1.99	6.11	3.98

* Per 100,000 Residents

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Over-the-Counter Thermometer Sales



There was no appreciable increase above baseline in the rate of OTC Thermometer Sales during this reporting period.

Thermometer Sales Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	2.55	2.41	1.99	3.19	2.69
Median Rate*	2.22	2.37	1.77	3.23	2.74

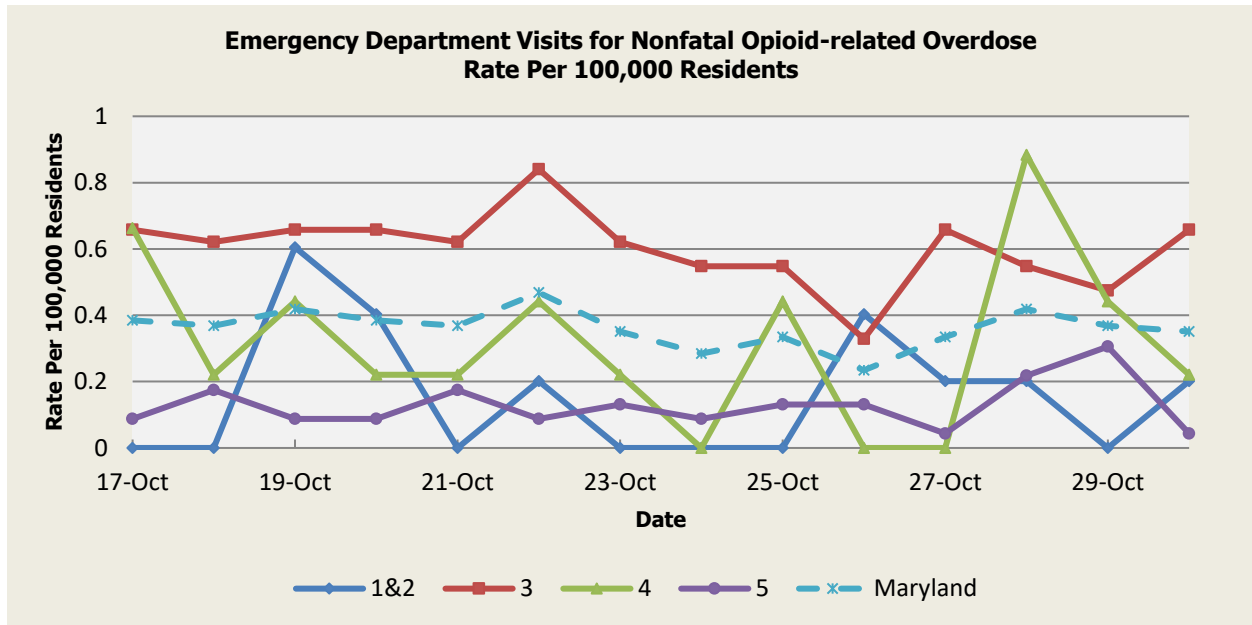
* Per 100,000 Residents

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SYNDROMIC OVERDOSE SURVEILLANCE

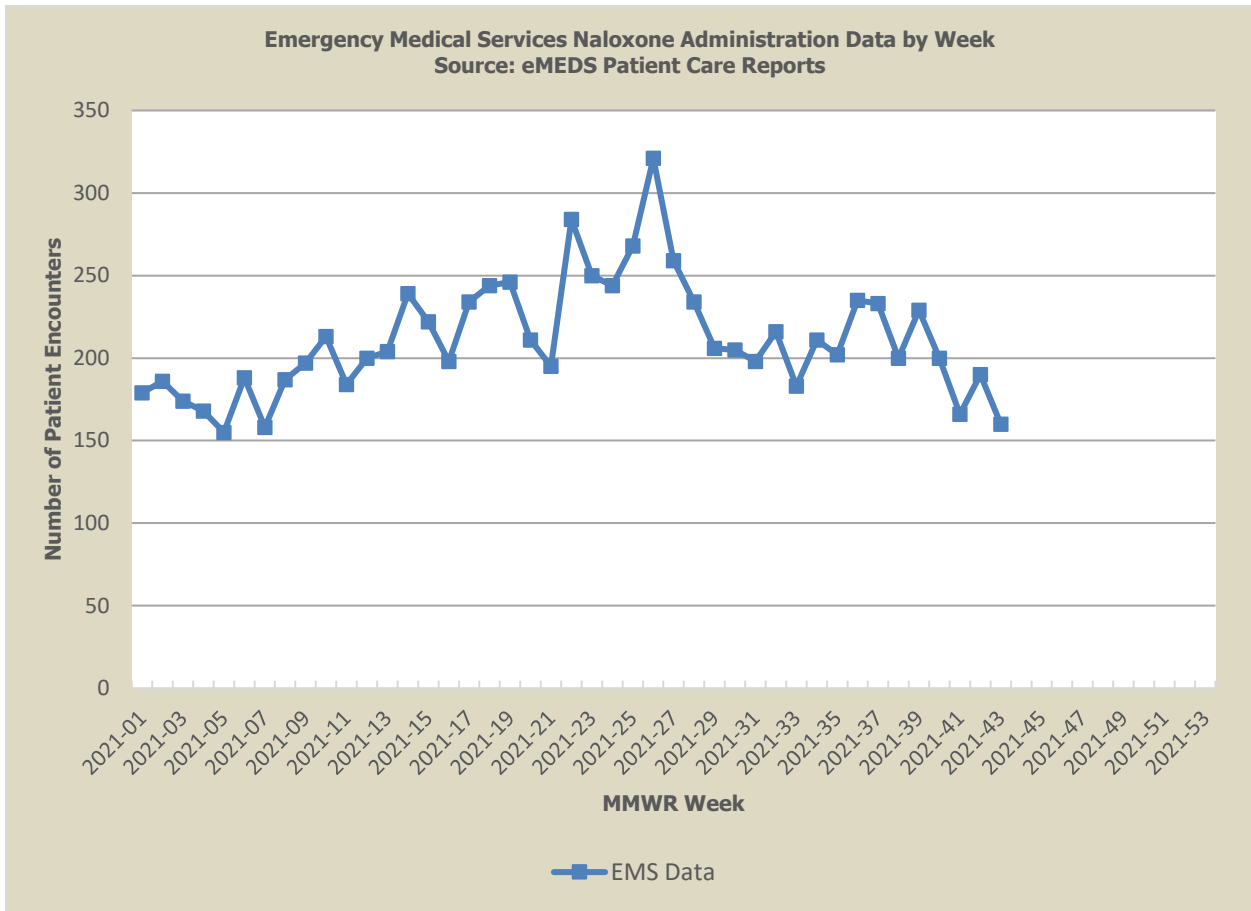
The purpose of this section is to characterize nonfatal overdose trends among Maryland residents captured by ESSENCE data, including emergency department (ED) chief complaint and discharge diagnosis as well as emergency medical services (EMS) patient care reports. Maryland uses ESSENCE data to track trends in nonfatal drug overdoses as a critical strategy for surveillance and tailoring prevention resources to populations most affected in the state.

Nonfatal Opioid-related Overdose



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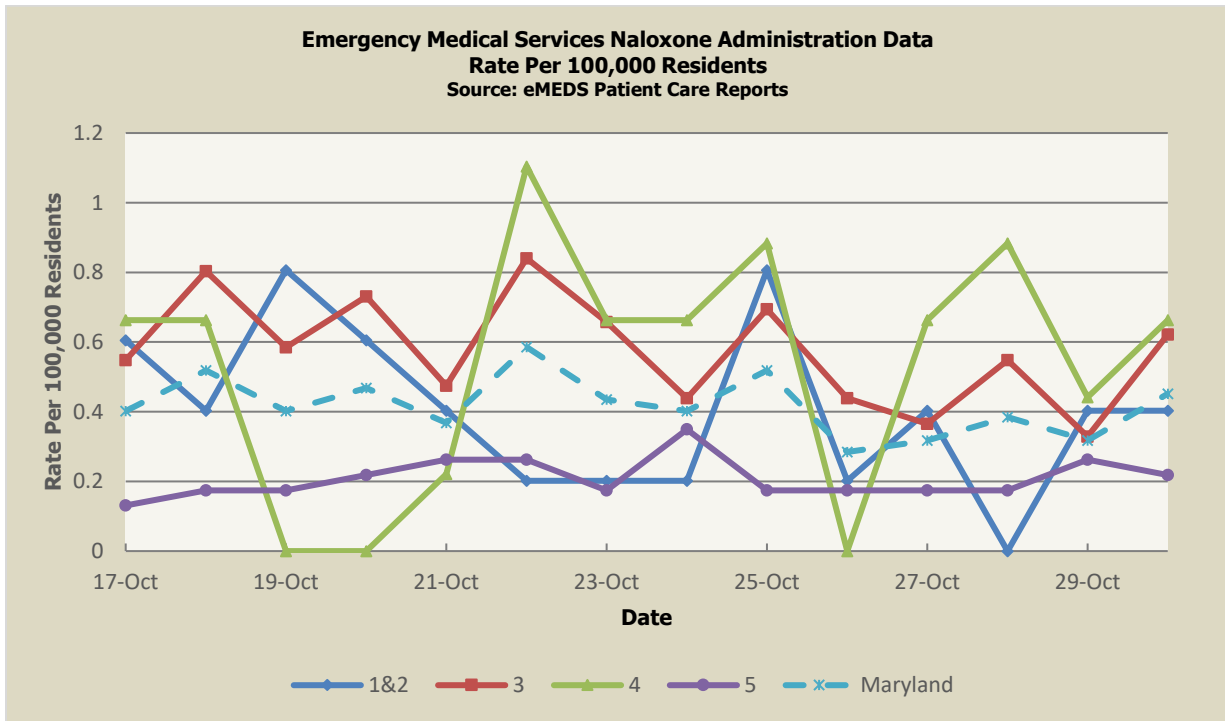
Naloxone Administration Data by Week



Disclaimer on eMEDS naloxone administration related data: These data are based on EMS Pre-hospital care reports where the EMS provider has documented that they administered naloxone. The administration of naloxone is based on the patient’s signs and symptoms and not on any diagnostic tests. These data are reported for trending purposes only.

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Naloxone Administration Data



Disclaimer on eMEDS Naloxone administration related data: These data are based on EMS Pre-hospital care reports where the EMS provider has documented that they administered naloxone. The administration of naloxone is based on the patient's signs and symptoms and not on any diagnostic tests. These data are reported for trending purposes only.

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PANDEMIC INFLUENZA UPDATE / AVIAN INFLUENZA-RELATED REPORTS

WHO update: The current WHO phase of pandemic alert for avian influenza is ALERT. Currently, the avian influenza H5N1 virus continues to circulate in poultry in some countries, especially in Asia and northeast Africa. This virus continues to cause sporadic human infections with some instances of limited human-to-human transmission among very close contacts. There has been no sustained human-to-human or community-level transmission identified thus far.

Influenza A (H7N9) is one of a subgroup of influenza viruses that normally circulate among birds. Until recently, this virus had not been seen in people. However, human infections have now been detected. Presently, there is limited information about the scope of the disease the virus causes and about the source of exposure. The disease is of concern because most patients have been severely ill. There is no indication thus far that it can be transmitted between people, but both animal-to-human and human-to-human routes of transmission are being actively investigated.

Alert phase: This is the phase when influenza caused by a new subtype has been identified in humans. Increased vigilance and careful risk assessment, at local, national, and global levels are characteristic of this phase. If the risk assessments indicate that the new virus is not developing into a pandemic strain, a de-escalation of activities towards those in the interpandemic phase may occur. As of November 5th, 2021, the WHO-confirmed global total (2003-2020) of human cases of H5N1 avian influenza virus infection stands at 862, of which 455 have been fatal. Thus, the case fatality rate for human H5N1 is approximately 53%.

AVIAN INFLUENZA

AVIAN INFLUENZA (UNITED KINGDOM), 4 November 2021, A flock of poultry that tested positive for bird flu has been culled in Angus, the Scottish government has announced. Public health advice is that the risk to human health from the avian influenza (H5N1) virus is very low. Read More: <https://promedmail.org/promed-post/?id=8699458>

AVIAN INFLUENZA (NETHERLANDS), 2 November 2021, Wageningen Bioveterinary Research (WBVR) has confirmed yet another outbreak of bird flu in the Netherlands. In Grootschermer, highly pathogenic H5N1 avian influenza was found in broiler chicken from a poultry farm. Read More: <https://promedmail.org/promed-post/?id=8699401>

AVIAN INFLUENZA (ISRAEL), 31 October 2021, A flock of breeding turkeys on a farm in Maayan-Tzvi has been found infected by HPAI H5N1. The affected flock is composed of 35-week-old birds. Read More: <https://promedmail.org/promed-post/?id=8699372>

HUMAN AVIAN INFLUENZA

There were no relevant human avian influenza reports this week

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NATIONAL DISEASE REPORTS

HEPATITIS B (USA), 4 November 2021, A government advisory committee on Wednesday [3 Nov 2021] recommended that all American adults younger than 60 be vaccinated against hepatitis B, because progress against the liver-damaging disease has stalled. Read More: <https://promedmail.org/promed-post/?id=8699457>

SYPHILIS (TEXAS), 3 November 2021, In April [2021], health officials in Houston issued an urgent notice about rising cases of congenital syphilis, imploring pregnant women to get tested and treated for a condition that can kill or debilitate infants. Read More: <https://promedmail.org/promed-post/?id=8699429>

CORONAVIRUS DISEASE 2019 UPDATE (374) – (USA), 24 October 2021. A 3rd dose of the Pfizer COVID-19 vaccine is 92% more effective in reducing severe COVID-related outcomes than 2 doses of the same vaccine received at least 5 months previously, according to a large real-world study late last week in The Lancet. Read More: <https://promedmail.org/promed-post/?id=8699415>

SYPHILIS (IOWA), 1 November 2021, Iowa state health officials are reporting an increase in congenital syphilis cases in 2021, the Carroll Broadcasting Company reports. Read More: <https://promedmail.org/promed-post/?id=8699393>

INTERNATIONAL DISEASE REPORTS

CHOLERA, DIARRHEA & DYSENTERY UPDATE (CAMEROON, NIGERIA), 4 November 2021, Health workers in Cameroon are fighting a cholera outbreak that claimed 13 lives this week in 2 major cities of the central African state. Read More: <https://promedmail.org/promed-post/?id=8699451>

SALMONELLOSIS, SEROTYPE ENTERITIDIS (DENMARK), 4 November 2021, More than a dozen people have been sickened by salmonella in Denmark since mid-September [2021]. Read More: <https://promedmail.org/promed-post/?id=8699449>

LEPROSY (MALAWI), 4 November 2021, Fear has gripped some Malawians following revelations that one of the most dangerous contagious diseases -leprosy- has resurfaced in the country. Read More: <https://promedmail.org/promed-post/?id=8699448>

LEISHMANIASIS (LIBYA), 2 November 2021, The National Center for Disease Control has confirmed that it received a report through the monitoring team in the municipality of Brak Al-Shati, Ashkada region [Wadi Ash Shati'], including the emergence of cases of leishmaniasis. Read More: <https://promedmail.org/promed-post/?id=8699416>

OTHER RESOURCES AND ARTICLES OF INTEREST

More information concerning Public Health and Emergency Preparedness can be found at the Office of Preparedness and Response website: <http://preparedness.health.maryland.gov/> or follow us on Facebook at www.facebook.com/MarylandOPR.

More data and information on influenza can be found on the MDH website: <http://phpa.health.maryland.gov/influenza/fluwatch/Pages/Home.aspx>

Please participate in the Maryland Resident Influenza Tracking System (MRITS): <http://flusurvey.health.maryland.gov>

NOTE: This weekly review is a compilation of data from various surveillance systems, interpreted with a focus on a potential BT event. It is not meant to be inclusive of all epidemiology data available, nor is it meant to imply that every activity reported is a definitive BT event. International reports of outbreaks due to organisms on the CDC Critical Biological Agent list will also be reported. While not "secure", please handle this information in a professional manner. Please feel free to distribute within your organization, as you feel appropriate, to other professional staff involved in emergency preparedness and infection control.

For questions about the content of this review or if you have received this and do not wish to receive these weekly notices, please e-mail us. If you have information that is pertinent to this notification process, please send it to us to be included in the routine report.

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Appendix 1: ESSENCE Syndrome Definitions and Associated Category A Conditions

Syndrome	ESSENCE Definition	Category A Conditions
Botulism-like	(Botulism or (DifficultyFocusing and DifficultySpeaking) or (DifficultySpeaking and DifficultySwallowing) or (DifficultySwallowing and DifficultyFocusing) or DoubleVision or FacialParalysis or GuillainBarre or Ptosis) and not GeneralExclusions	Botulism
Fever	(Chills or (FeverPlus and (Drowsiness or Seizure)) or FeverOnly or SepsisGroup or ViralSyndrome) and not GeneralExclusions	N/A
Gastrointestinal	(AbdominalCramps or AbdominalPainGroup or Diarrhea or FoodPoisoning or Gastroenteritis or GIBleeding or Peritonitis or Vomiting) and not (GeneralExclusions or Gynecological or Obstetric or Reproductive or UrinaryTract)	Anthrax (gastrointestinal)
Hemorrhagic Illness	(FeverOrChills and (AcuteBloodAbnormalitiesGroup or BleedingFromMouth or BleedingGums or GIBleeding or Hematemesis or Hemoptysis or Nosebleed or Petechiae or Purpura)) and not GeneralExclusions	Viral Hemorrhagic Fever
Localized Lesion	(Boils or Bump or Carbuncle or DepressedUlcer or Eschar or Furuncle or InsectBite or SkinAbscess or (SkinSores and not AllOverBody) or SkinUlcer or SpiderBite) and not (GeneralExclusions or Decubitus or Diabetes or StasisUlcer)	Anthrax (cutaneous) Tularemia
Lymphadenitis	(BloodPoisoning or Bubo or CatScratchDisease or SwollenGlands) and not GeneralExclusions	Plague (bubonic)
Neurological	((([Age<75] and AlteredMentalStatus) or (FeverPlus and (Confusion or Drowsiness or Petechiae or StiffNeck)) or Delirium or Encephalitis or Meningitis or UnconsciousGroup) and not GeneralExclusions	N/A
Rash	(ChickenPox or Measles or RashGeneral or Roseola or (Rubella and not Pregnancy) or Shingles or (SkinSores and AllOverBody) or Smallpox) and not GeneralExclusions	Smallpox
Respiratory	(Anthrax or Bronchitis or (ChestPain and [Age<50]) or Cough or Croup or DifficultyBreathing or Hemothorax or Hypoxia or Influenza or Legionnaires or LowerRespiratoryInfection or Pleurisy or Pneumonia or RespiratoryDistress or RespiratoryFailure or RespiratorySyncytialVirus or RibPain or ShortnessOfBreath or Wheezing) and not (GeneralExclusions or Cardiac or (ChestPain and Musculoskeletal) or Hyperventilation or Pneumothorax)	Anthrax (inhalational) Tularemia Plague (pneumonic)
Severe Illness or Death	CardiacArrest or CodeGroup or DeathGroup or (Hypotension and FeverPlus) or RespiratoryArrest or SepsisGroup or Shock	N/A

Appendix 2: Maryland Health and Medical Region Definitions

Health and Medical Region	Counties Reporting to ESSENCE
Regions 1 & 2	Allegany County Frederick County Garrett County Washington County
Region 3	Anne Arundel County Baltimore City Baltimore County Carroll County Harford County Howard County
Region 4	Caroline County Cecil County Dorchester County Kent County Queen Anne's County Somerset County Talbot County Wicomico County Worcester County
Region 5	Calvert County Charles County Montgomery County Prince George's County St. Mary's County

