

Public Health Preparedness and Situational Awareness Report: #2021:23

Reporting for the week ending 06/12/21 (MMWR Week #23)

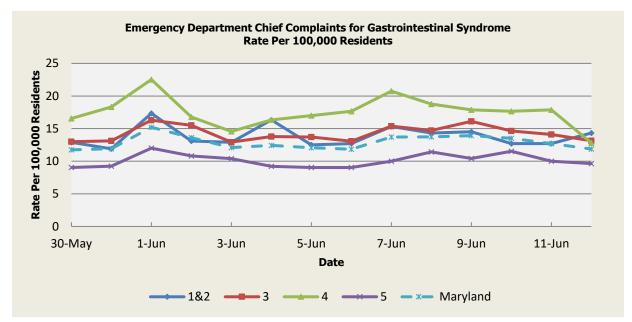
June 18th, 2021

CURRENT HOMELAND SECURITY THREAT LEVELSNational:No Active AlertsMaryland: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.

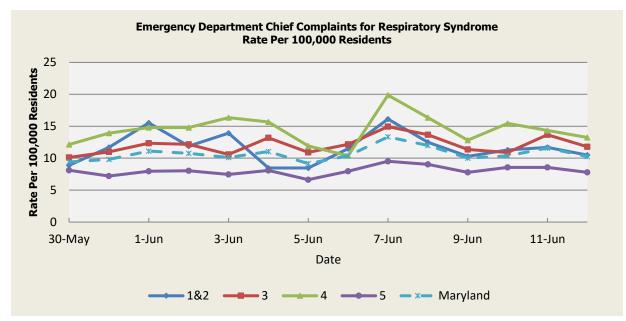
Gastrointestinal Syndrome



There were three (3) Gastrointestinal Syndrome outbreaks reported this week: one (1) outbreak of Gastroenteritis in an Assisted Living Facility (Region 5), two (2) outbreaks of Gastroenteritis in Nursing Homes (Region 5).

	Gastrointestinal Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2 3 4 5 Maryla						
Mean Rate*	13.14	14.72	15.84	10.05	12.88		
Median Rate*	13.11	14.61	15.46	10.00	12.83		
* Per 100,000 Residents							

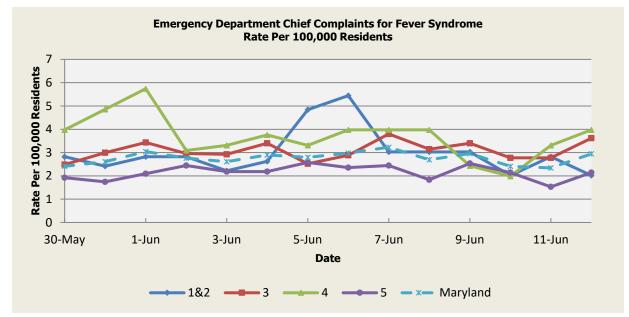
Respiratory Syndrome



There were fifteen (15) respiratory syndrome outbreaks reported this week: One (1) outbreak of COVID-19 in an Assisted Living Facility (Region 3), four (4) outbreaks of COVID-19 in Correctional Facilities (Regions 1&2,3), three (3) outbreaks of COVID-19 in Group Homes (Regions 1&2,3), six (6) outbreaks of COVID-19 in Nursing Homes (Regions 1&2,3,4,5), one (1) outbreak of COVID-19 in a School (Region 3).

	Respiratory Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2	3	4	5	Maryland		
Mean Rate*	12.43	14.67	15.20	9.88	12.69		
Median Rate*	12.10	13.99	14.35	9.47	12.13		
* Per 100,000 Residents							

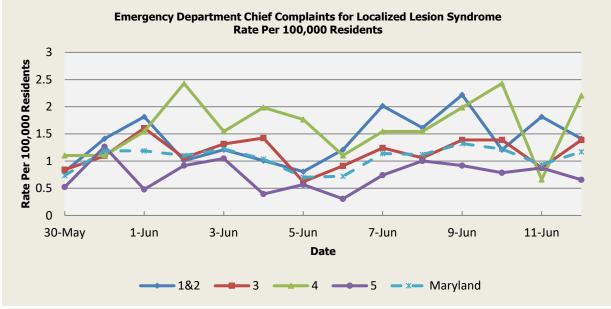
Fever Syndrome



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*	3.03	3.87	4.10	2.99	3.48		
Median Rate*	2.82	3.73	3.97	2.88	3.35		
*Per 100,000 Residents							

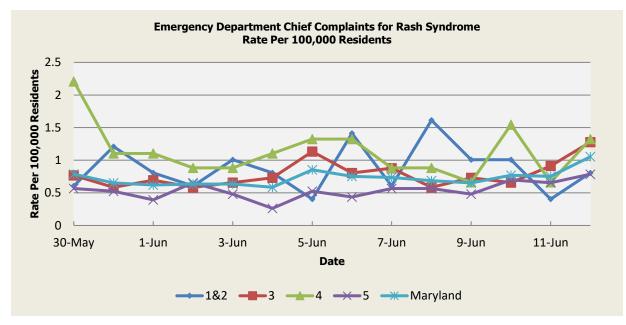
Localized Lesion Syndrome



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 Maryla						
Mean Rate*	1.16	1.67	1.95	0.85	1.33		
Median Rate*	1.01	1.61	1.77	0.83	1.29		
* Per 100,000 Residents							

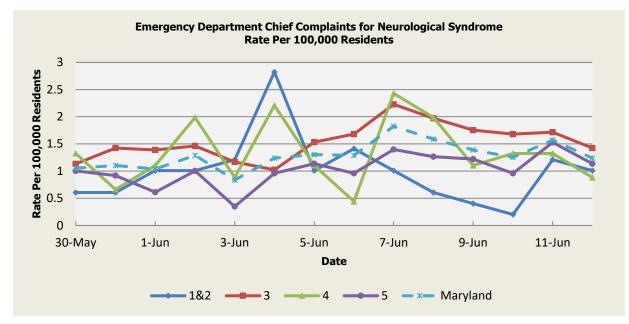
Rash Syndrome



There were no Rash illness outbreaks reported this week.

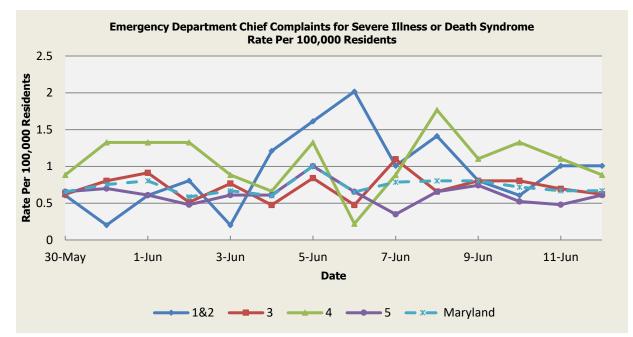
	Rash Syndrome Baseline Data January 1, 2010 - Present							
Health Region	1&2 3 4 5 Maryland							
Mean Rate*	1.17	1.55	1.64	0.90	1.28			
Median Rate*	1.01	1.50	1.55	0.87	1.25			
* Per 100,000 Residents								

Neurological Syndrome



There were no Neurological Syndrome outbreaks reported this week.

	Neurological Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland	
Mean Rate*	0.83	1.03	0.96	0.66	0.87	
Median Rate*	0.81	0.99	0.88	0.61	0.85	
* Per 100.000 Residents						



Severe Illness or Death Syndrome

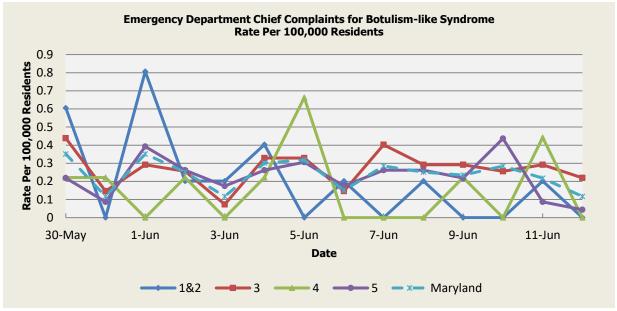
There were no Severe Illness or Death Syndrome outbreaks reported this week.

	Severe Illness or Death Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2 3 4 5 Maryla						
Mean Rate*	0.66	0.87	0.85	0.55	0.73		
Median Rate*	0.60	0.84	0.88	0.52	0.70		
* Par 100 000 Pasidants							

* Per 100,000 Residents

SYNDROMES RELATED TO CATEGORY A AGENTS

Botulism-like Syndrome

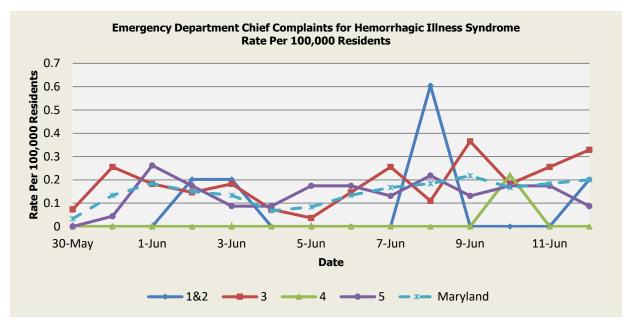


There was an appreciable increase above baseline in the rate of ED visits for Botulism-like Syndrome on 5/30 (Regions 1&2,3,4,5), 5/31 (Region 4), 6/1 (Regions 1&2,3,5), 6/2 (Regions 1&2,4,5), 6/3 (Regions 1&2), 6/4 (Regions 1&2,3,4,5), 6/5 (Regions 3,4,5), 6/6 (Regions 1&2), 6/7(Region 5), 6/8 (Regions 1&2,3,5), 6/9 (Regions 3,4), 6/10 (Region 5), 6/11 (Regions 1&2,3,4). 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	0.09	0.11	
Median Rate*	0.00	0.11	0.00	0.09	0.10	

* Per 100,000 Residents

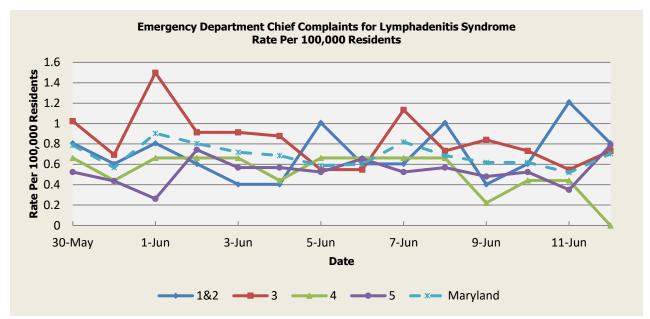
Hemorrhagic Illness Syndrome



There was an appreciable increase above baseline in the rate of ED visits for Hemorrhagic Illness Syndrome on 6/2 (Regions 1&2), 6/3 (Regions 1&2), 6/8 (Regions 1&2), 6/9 (Region 3), 6/10 (Region 4), 6/12 (Regions 1&2). 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	0.11	0.00	0.09	0.12		
* Per 100,000 Residents							

Lymphadenitis Syndrome



There was an appreciable increase above baseline in the rate of ED visits for Lymphadenitis Syndrome on 6/1 (Region 3), 6/5 (Regions 1&2), 6/8 (Regions 1&2), 6/11 (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*	0.41	0.61	0.41	0.40	0.50		
Median Rate*	0.40	0.55	0.44	0.35	0.49		
* Per 100,000 Residents							

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 (abbreviated COVID-19) in the State of Maryland.

Confirmed COVID-19 Case Counts in Maryland by County (As of June 22nd, 2021)

County	Number of
	Confirmed Cases
Allegany	7,044
Anne Arundel	43,934
Baltimore City	65,888
Baltimore County	53,098
Calvert	4,238
Caroline	2,350
Carroll	9,523
Cecil	6,328
Charles	10,955
Dorchester	2,847
Frederick	19,826
Garrett	2,044
Harford	16,632
Howard	19,305
Kent	1,353
Montgomery	71,113
Prince George's	85,430
Queen Anne's	3,006
St. Mary's	6,051
Somerset	2,621
Talbot	2,182
Washington	14,652
Wicomico	7,720
Worcester	3,688
Total	461,828

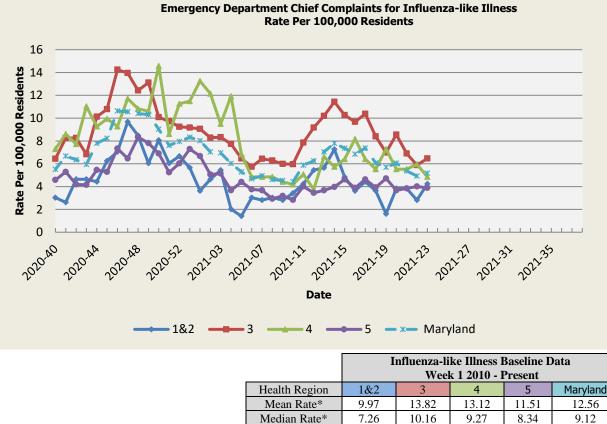
The most up-to-date information may be found on the Maryland Department of Health website at https://coronavirus.maryland.gov.

SYNDROMIC INFLUENZA SURVEILLANCE

Seasonal Influenza reporting occurs from MMWR Week 40 through MMWR Week 20 (October 2020 through May 2021). Due to the COVID-19 pandemic, influenza reporting will be extended to the beginning of the 2021-2022 reporting season (MMWR Week 40/Week Ending October 9, 2021).

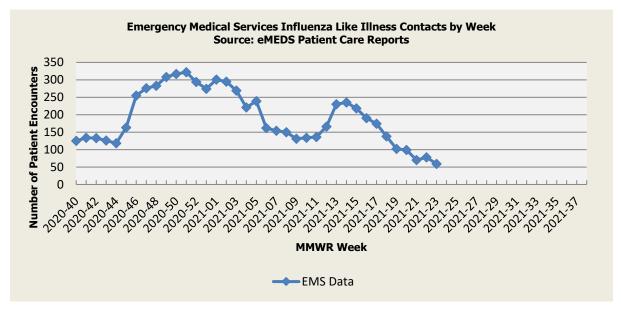
Seasonal Influenza activity for Week 23:

Influenza-like Illness



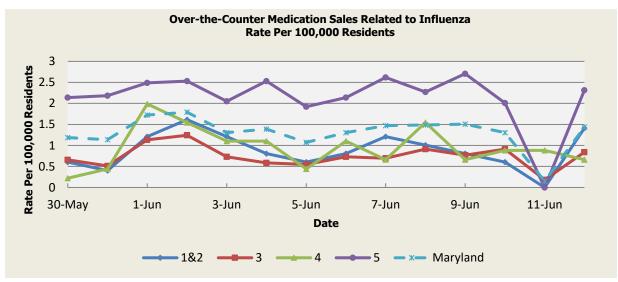
	Influenza-like Illness Baseline Data Week 1 2010 Present								
		Week 1 2010 - Present							
Health Region	1&2	3	4	5	Maryland				
Mean Rate*	9.97	13.82	13.12	11.51	12.56				
Median Rate*	7.26	10.16	9.27	8.34	9.12				
* D 100.000 D 11									

* Per 100,000 Residents



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.

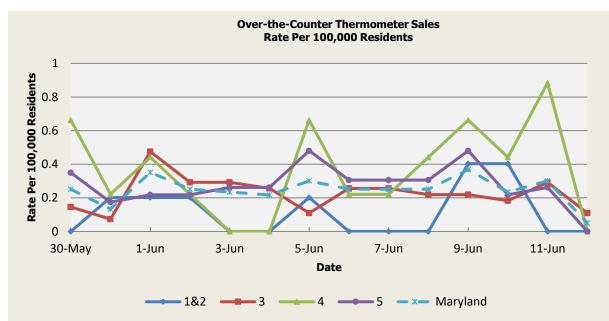


Over-the-Counter Influenza-Related Medication Sales

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*	3.15	4.01	2.46	7.27	5.07
Median Rate*	2.42	3.03	1.99	6.33	4.17
* Per 100,000 Residents					

Over-the-Counter Thermometer Sales

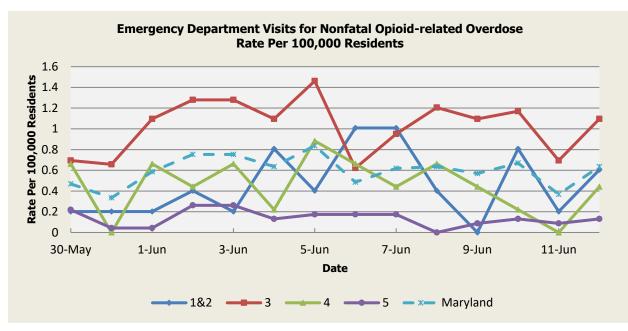


There was no appreciable increase above baseline in the rate of OTC Thermometer Sales during this reporting period.

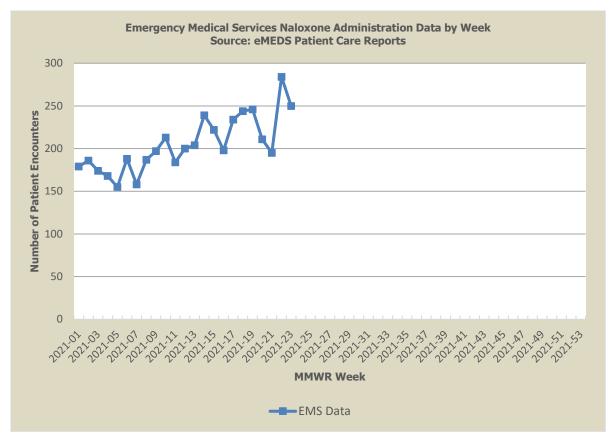
	Thermometer Sales Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	2.62	2.48	2.03	3.28	2.76
Median Rate*	2.42	2.45	1.99	3.32	2.79
* Per 100.000 Residents					

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.



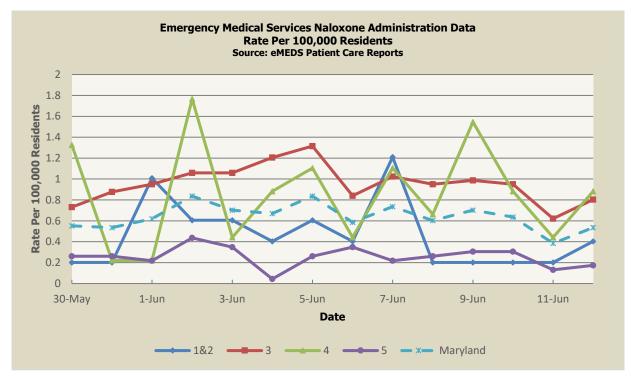
Nonfatal Opioid-related Overdose



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.

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.

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 June 18th, 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 (IRAQ), 14 June 2021, [The following report, based upon the above and 4 additional Iraqi media sources in Arabic, has been translated and submitted by a reliable source who preferred to remain unnamed. ProMED-mail is very grateful to the submitter]. Read More: <u>https://promedmail.org/promed-post/?id=8447815</u>

AVIAN INFLUENZA (EUROPE), 14 June 2021, Highly pathogenic influenza A viruses (infection with) (non-poultry including wild birds), Germany. Read More: <u>https://promedmail.org/promed-post/?id=8446706</u>

AVIAN INFLUENZA (ALBANIA), 12 June 2021, Three outbreaks of HPAI H5N8 have been confirmed in backyard poultry flocks in Albania (2 in the central part and one in the north of the country). Read More: <u>https://promedmail.org/promed-post/?id=8443314</u>

AVIAN INFLUENZA (SOUTH AFRICA), 11 June 2021, Highly pathogenic influenza A viruses (Inf. with) (non-poultry including wild birds) (2017-), South Africa. Read More: https://promedmail.org/promed-post/?id=8441060

HUMAN AVIAN INFLUENZA

AVIAN INFLUENZA, HUMAN (CHINA), 12 June 2021, The Centre for Health Protection (CHP) of the Department of Health (DH) is today (8 Jun 2021) closely monitoring a human case of avian influenza A(H5N6) in Chengdu, Sichuan Province, and again urged the public to maintain strict personal, food, and environmental hygiene both locally and during travel. Read More: <u>https://promedmail.org/promed-post/?id=8437106</u>

NATIONAL DISEASE REPORTS

RABIES (USA), 18 June 2021, The Nevada Department of Agriculture Animal Disease Laboratory has confirmed 3 cases of rabies in bats -- one in Washoe County and 2 in Clark County, according to a release from the NDA. Read More: <u>https://promedmail.org/promed-post/?id=8457663</u>

POWASSAN VIRHS ENCEPHALITIS (CONNECTICUT), 18 June 2021, The Department of Public Health [DPH] said 2 Connecticut residents have tested positive for a tick infection known as the Powassan virus. Read More: <u>https://promedmail.org/promed-post/?id=8456880</u>

E. COLI EHEC (USA), 17 June 2021, Another child has been added to the list of patients in an _E. coli_ [O157] outbreak linked to local, organic yogurt. Some production at the implicated dairy, Pure Eire, remains shut down. Read More: <u>https://promedmail.org/promed-post/?id=8455832</u>

SALMONELLOSIS, SEROTYPE WELTEVREDEN (USA), 17 June 2021, FDA investigation shows shrimp as probable source of _Salmonella_ outbreak. Read More: https://promedmail.org/promed-post/?id=8455699

INTERNATIONAL DISEASE REPORTS

RIFT VALLEY FEVER (MADAGASCAR), 18 June 2021, From [26 Apr to 20 May 2021] 109 total, confirmed and suspected human Rift Valley fever (RVF) cases were reported in 4 regions of Madagascar (Vatovavy Fitovinany, Haute Matsiatra, Alaotra Mangoro, and Analamanga), according to the World Health Organization (WHO). Read More: https://promedmail.org/promed-post/?id=8456767

FOODBORNE ILLNESS (JAPAN), 17 June 2021, Numerous students, and preschoolers in the central Japan city of Toyama have developed symptoms such as stomachache in what appears to be a case of mass food poisoning, the city government said [Thu 17 Jun 2021]. Read More: https://promedmail.org/promed-post/?id=8455924

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: <u>http://preparedness.health.maryland.gov/</u> or follow us on Facebook at <u>www.facebook.com/MarylandOPR</u>.

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

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

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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Lindsey Hall, MPH Epidemiologist, Biosurveillance Program Office: 443-628-6550 Email: <u>Lindsey.hall@maryland.gov</u>

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

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

Appendix 2: Maryland Health and Medical Region Definitions

