

Outbreak Report, October- December, 2011, State of West Virginia

Outbreaks are immediately reportable in West Virginia. Between October and December 2011, there were 43 outbreaks reported in West Virginia. Of the 43 outbreaks reported during this period, 39 (91%) were confirmed as outbreaks or clusters of disease. Of the 39 confirmed outbreaks, 24 (62%) were reported from healthcare facilities. Outbreaks were reported from 20 counties. Of the 39 confirmed outbreaks, 18 (46%) were enteric disease outbreaks, 9 (23%) were respiratory disease outbreaks, 7 (18%) were rash illness outbreaks, and 5 (13%) outbreaks were categorized as “other”.

This report summarizes the types and settings of the confirmed outbreaks.

Enteric Disease Outbreaks

Eighteen enteric disease outbreaks were reported from 9 counties. Of the 18 enteric disease outbreaks, 11 (61%) were confirmed by laboratory testing.

The following table describes enteric disease outbreaks:

Table III: Enteric Disease Outbreaks, West Virginia, October- December, 2011 (N=18)

Type of Outbreak	Number of Outbreaks	Reporting Source	Laboratory Testing
Acute Gastroenteritis	6	1 Workplace Event 5 LTCFs	No testing done 4 Negative or non-contributory 1 No testing done
Norovirus Gastroenteritis	9	1 School 8 LTCFs	Confirmed
Salmonellosis	1	Hospital	Confirmed
Mesenteric Lymphadenitis	1	School	Negative or non-contributory
<i>Clostridium difficile</i>	1	LTCF	Confirmed

Respiratory Disease Outbreaks:

Nine respiratory disease outbreaks were reported from 7 counties. Of the 9 respiratory disease outbreaks 5 (56%) were confirmed by laboratory testing.

The following table describes respiratory disease outbreaks:

Table I: Respiratory Disease Outbreaks, West Virginia, October- December, 2011 (N=9)

Type of Outbreak	Number of outbreaks	Reporting Source	Laboratory Testing
Upper respiratory illness	2	LTCFs	Negative or non-contributory or No testing done
	1	Community	
Rhinovirus upper and lower respiratory illness	1	LTCF	Confirmed
<i>Mycoplasma pneumoniae</i> pneumonia	2	Community	Confirmed
Pertussis	1	Community	Confirmed
Influenza A H3N2v	1	Daycare	Confirmed
Pneumonia	1	LTCF	Negative or non-contributory

Rash Illness Outbreaks

Seven rash illness outbreaks were reported from 5 counties. None of the rash illness outbreaks were confirmed by laboratory testing.

The following table describes rash illness outbreaks:

Table IV: Rash Illness Outbreaks, West Virginia, October- December, 2011 (N=7)

Type of Outbreak	Number of Outbreaks	Reporting Source	Laboratory Testing
Scabies	3	School	No testing done/ clinical diagnosis
Varicella	2	School	No testing done/ clinical diagnosis
Hand, Foot and Mouth Disease	1	School	No testing done/ clinical diagnosis
Methicillin-sensitive <i>Staphylococcus aureus</i> (MSSA)	1	School	No testing done/ clinical diagnosis

Other Outbreaks

Five confirmed outbreaks characterized as “other” were reported from 5 counties. Of the 5 outbreaks described as other, 4 (80%) were confirmed by laboratory testing. Two of the 5 outbreaks were caused by multi-drug resistant organisms (MDROs).

The following table describes outbreaks categorized as other:

Table V: Outbreaks characterized as “other”, West Virginia, October- December, 2011 (N=5)

Type of Outbreak	Number of Outbreaks	Reporting Source	Laboratory Testing
Carbapenem-Resistant <i>Enterobacteriaceae</i> (CRE)	1	LTCF	Lab confirmed
Carbapenem-Resistant <i>Klebsiella pneumonia</i> (CRKP)	1	LTCF	Lab confirmed
Aseptic meningitis	1	Day Care	Negative or non-contributory
Viral Meningitis	1	School	Lab confirmed
<i>Tsukamurella</i> Bacteremia	1	Outpatient Clinic	Lab confirmed

Healthcare-Associated Outbreaks (HAOs)

Twenty- four of the 39 confirmed outbreaks were reported from healthcare facilities and were classified as health-care associated outbreaks (HAOs). Of the 24 HAOs, 21 (88%) outbreaks were reported from LTCFs and 2 (8%) from hospitals and 1 (4%) in an outpatient clinic.

The following table summarizes the types of HAOs:

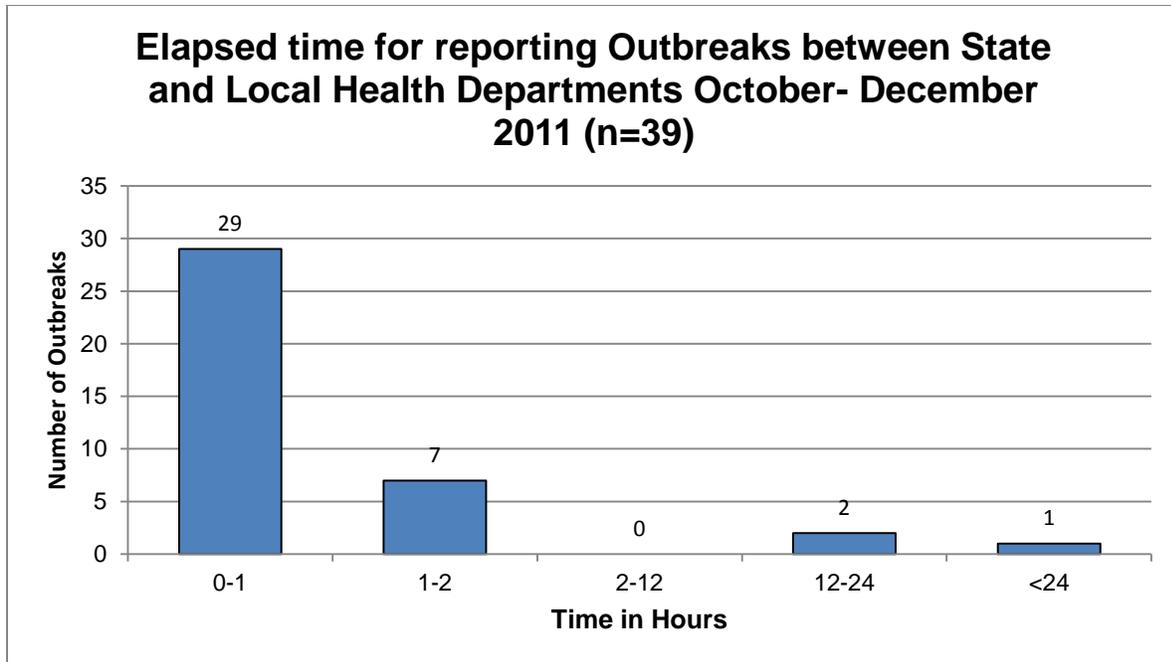
Healthcare-Associated Outbreaks, West Virginia, October- December, 2011

Type of Outbreak	Number of outbreaks	Percent
Enteric	15	63%
Respiratory	4	17%
MDROs	2	8%
Other	3	12%
Total	24	100%

Reporting Time

In West Virginia, outbreaks should be reported immediately to the local health departments (LHDs). According to infectious disease rules and regulations, LHDs should report outbreaks within 60 minutes to the Bureau for Public Health (BPH). There has been marked improvement in outbreak recognition and reporting during this reporting period. Of 39 confirmed outbreaks, 29 (74%) were reported to BPH within one hour. Data on reporting time was complete in 100% of outbreaks in this quarter.

The following graph illustrates the time elapsed for reporting outbreaks between the state and local health departments:



Outbreak toolkits to assist in investigating the most commonly encountered outbreaks can be found at: <http://www.dhhr.wv.gov/oeps/disease/ob/Pages/OutbreakToolkits.aspx>