

Jon Doemel, County Executive
Doug Gieryn, Director/Health Officer

Office Hours: M-F 8:00am-4:30pm
Toll-Free: 800-250-3110
Fax: 920-232-3370

health@co.winnebago.wi.us
www.winnebagopublichealth.org



PublicHealth
Prevent. Promote. Protect.
Winnebago County
Health Department

112 Otter Avenue
Oshkosh, WI 54903-2808
Phone: 920-232-3000

211 N Commercial Street
Neenah, WI 54956
Phone: 920-727-2894

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@WinnebagoHealth

Reports of Communicable Disease to Winnebago County Health Department – 4th Quarter Update

Data obtained from the Wisconsin Public Health Analysis, Visualization and Reporting Portal. This report is based on episode date and is provided as PROVISIONAL information for health care professionals and may not represent final counts of cases. This report may also be found on our [website](#).

Disease Group	2022												12 Month
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Babesiosis	-	-	-	-	-	1	-	-	-	-	-	-	1
Blastomycosis	-	1	-	-	-	-	1	-	-	-	-	-	2
Campylobacteriosis	-	-	2	4	1	2	1	6	3	5	2	1	27
Chlamydia	34	52	48	57	58	60	38	53	48	48	57	32	585
Coccidioidomycosis	-	-	-	-	-	-	2	-	-	-	-	-	2
Cryptosporidiosis	1	-	3	1	2	-	2	1	1	2	-	-	13
Cyclosporiasis	-	-	-	-	-	1	1	-	-	-	-	-	2
Ehrlichiosis / Anaplasmosis	-	-	-	-	-	-	1	1	-	-	1	-	3
Giardiasis	1	-	-	1	2	-	-	3	3	1	1	-	12
Gonorrhea	6	12	16	18	21	11	14	14	12	10	7	6	147
Haemophilus Influenzae	1	1	-	-	-	-	1	-	-	1	2	-	6
Hepatitis B	1	1	1	-	1	-	-	-	-	1	-	1	6
Hepatitis C	2	3	4	2	5	1	4	2	-	2	-	2	27
Hepatitis D	-	-	-	-	1	-	-	-	-	-	-	-	1
Histoplasmosis	1	-	-	-	1	-	-	-	-	1	-	-	3
Influenza	4	3	5	7	-	1	-	-	-	1	7	48	76
Invasive Strep A	-	-	-	-	-	2	-	1	-	-	1	1	5
Invasive Strep B	-	4	3	2	3	3	4	-	2	1	-	-	22
Legionellosis	-	1	1	-	-	1	1	1	1	-	1	-	7
Lyme Disease	5	4	4	3	7	17	18	17	6	1	4	-	86
Mycobacterial Disease, Non-TB	3	2	4	2	1	2	2	1	2	8	2	-	29
Mpox	-	-	-	-	-	-	1	-	-	-	-	-	1
Parapertussis	-	-	-	1	-	-	-	-	-	-	-	-	1
Pathogenic E.coli	1	1	-	-	3	-	5	2	1	-	2	-	15
Rheumatic Fever	-	-	-	-	-	-	-	-	-	-	-	1	1
Salmonellosis	2	-	-	2	3	2	7	3	4	4	2	-	29
Shigellosis	-	-	-	-	-	-	-	-	-	1	-	-	1
Strep, Other Invasive	-	-	-	-	-	1	-	-	-	-	-	-	1
Strep Pneumoniae Invasive	1	2	2	1	1	-	-	-	1	-	-	3	11
Syphilis	3	2	1	1	3	3	4	1	1	1	-	1	21
Tuberculosis (TB)	-	1	-	-	-	-	-	-	-	-	-	-	1
Latent Tuberculosis (LTBI)†	1	-	3	1	-	2	-	2	-	-	-	2	11
Tularemia	-	-	-	-	-	-	-	1	-	-	-	-	1
Varicella (Chickenpox)	-	-	-	-	-	-	-	2	-	1	-	1	4
Vibriosis, Non Cholera	1	-	-	-	-	-	-	-	-	-	-	-	1
Yersiniosis	-	-	-	-	1	-	-	1	-	1	-	-	3
Total	68	90	97	103	114	110	107	112	85	90	89	99	1,164

Run Date 1/9/2023

This data does not include the [City of Menasha](#) or [City of Appleton](#).

- : A dash (-) represents 0 confirmed + probable cases for that disease.

†: The LTBI cases reported on this report represent only cases that were marked as confirmed and probable in WEDSS. Many LTBI cases from 2020 to present are currently marked as suspect in WEDSS as staff are working to follow up with all cases. In the past 12 months, there were 28 LTBI cases listed as suspect in WEDSS.

Incidence of Communicable Disease in Winnebago County Health Department Jurisdiction and Wisconsin

Data obtained from the Wisconsin Public Health Analysis, Visualization and Reporting Portal. This report is based on episode date, is provided as PROVISIONAL information for health care professionals, and may not represent final counts of cases.

Inc++ refers to Incidence, which is the number of cases per 100,000 population. Incidence = # of cases/population * 100,000.

Winnebago County Health Department (WCHD) Jurisdiction population 2020 = 154,010; Wisconsin population 2020 = 5,806,975

Episode Year	2022 (Full Year)			2021 (Full Year)			2020 (Full Year)		
	WCHD # of Cases	WCHD Inc++	WI Inc++	WCHD # of Cases	WCHD Inc++	WI Inc++	WCHD # of Cases	WCHD Inc++	WI Inc++
AFB Smear	-	-	0.1	1	0.6	0.1	-	-	0.2
Babesiosis	1	0.6	1.6	1	0.6	1.7	1	0.6	1.0
Blastomycosis	2	1.3	2.3	2	1.3	1.8	2	1.3	1.9
Campylobacteriosis	27	17.5	20.6	33	21.4	23.1	15	9.7	20.4
Chlamydia	585	379.8	438.0	649	421.4	477.7	664	431.1	451.1
Coccidioidomycosis	2	1.3	0.7	-	-	0.5	1	0.6	0.5
Cryptosporidiosis	13	8.4	8.8	12	7.8	10.7	7	4.5	8.3
Cyclosporiasis	2	1.3	1.1	4	2.6	1.7	9	5.8	1.3
Ehrlichiosis / Anaplasmosis	3	1.9	9.6	10	6.5	14.4	5	3.2	6.2
Giardiasis	12	7.8	6.7	9	5.8	9.7	8	5.2	8.4
Gonorrhea	147	95.4	150.2	186	120.8	179.5	157	101.9	176.2
Haemophilus Influenzae	6	3.9	1.9	2	1.3	1.4	2	1.3	1.2
Hepatitis A	-	-	0.5	1	0.6	0.4	-	-	0.2
Hepatitis B	6	3.9	6.8	14	9.1	6.0	14	9.1	5.6
Hepatitis C	27	17.5	23.8	43	27.9	35.7	36	23.4	33.6
Hepatitis D	1	0.6	0.1	-	-	0.1	-	-	0.1
Histoplasmosis	3	1.9	1.3	-	-	0.4	1	0.6	0.3
Influenza	76	49.3	87.8	5	3.2	11.8	72	46.8	72.6
Invasive Strep A	5	3.2	3.8	5	3.2	1.9	7	4.5	3.4
Invasive Strep B	22	14.3	9.9	6	3.9	11.6	20	13.0	10.7
Kawasaki Disease	-	-	0.3	-	-	0.3	1	0.6	0.3
Legionellosis	7	4.5	4.0	2	1.3	3.9	3	1.9	4.2
Listeriosis	-	-	0.4	-	-	0.3	2	1.3	0.2
Lyme Disease	86	55.8	89.6	13	8.4	37.9	3	1.9	24.9
Malaria	-	-	0.4	1	0.6	0.3	-	-	0.1
Bacterial Meningitis	-	-	0.7	2	1.3	1.1	-	-	1.2
Mycobacterial (Non-TB)	29	18.8	17.1	38	24.7	21.9	40	26.0	17.1
Mpox	1	0.6	1.5	-	-	0.0	-	-	0.0
Parapertussis	1	0.6	0.8	-	-	0.4	1	0.6	0.4
Pathogenic E.coli	15	9.7	26.6	62	40.3	31.2	28	18.2	21.0
Pertussis	-	-	0.2	-	-	0.1	1	0.6	0.1
Q Fever	29	18.8	17.0	25	16.2	15.5	15	9.7	12.0
Rheumatic Fever	1	0.6	0.0	-	-	0.0	-	-	0.1
Salmonellosis	13	8.4	8.8	12	7.8	10.7	7	4.5	8.3
Shigellosis	1	0.6	1.8	-	-	0.9	-	-	0.8
Strep, Other Invasive	1	0.6	0.4	-	-	1.1	1	0.6	1.5
Strep Pneumoniae Invasive	11	7.1	6.9	6	3.9	5.1	10	6.5	5.0
Syphilis	21	13.6	36.9	14	9.1	31.8	11	7.1	16.1
Toxoplasmosis	-	-	1.3	-	-	0.1	3	1.9	0.9
Tuberculosis (TB)	1	0.6	1.0	1	0.6	1.3	-	-	0.8
Latent Tuberculosis (LTBI)†	11	7.1	14.6	18	11.7	17.9	4	2.6	14.2
Tularemia	1	0.6	0.1	-	-	0.1	-	-	0.0
Varicella	4	2.6	2.9	4	2.6	2.7	-	-	1.8
Vibriosis	1	0.6	0.8	-	-	0.6	1	0.6	0.3
Yersiniosis	3	1.9	2.2	2	1.3	1.6	-	-	0.9
Total	1,164	755.8	1,004.9	1,171	760.3	967.3	1,145	743.5	930.4

Run Date 1/9/2023

- : A dash (-) represents 0 confirmed + probable cases for that disease.

†: The LTBI cases reported on this report represent only LTBI cases that were marked as confirmed and probable in WEDSS. Winnebago County Health Department had 28 LTBI cases listed as suspect in WEDSS for 2020, 35 cases for 2021, and 28 cases for 2022.

4th Quarter 2022 Communicable Disease Notes and Updates

Non-Mumps Parotitis associated with Influenza

- An increase in non-mumps parotitis has been identified statewide. It is specifically associated with the H3N2 Influenza A virus. Please test any suspect cases for both mumps and influenza and notify the health department.
- For mumps testing, a buccal swab should be collected for PCR analysis. Swab should be collected as soon as possible (preferably within 3 days of parotitis onset and not more than 9 days after parotitis onset) for the best opportunity to detect mumps virus.

Invasive Group A Streptococcus

The Centers for Disease Control and Prevention (CDC) issued a Health Alert Network (HAN) Health Advisory notifying clinicians and public health authorities of a recent increase in pediatric invasive group A streptococcal (iGAS) infections. In November 2022, CDC was notified of a possible increase in iGAS infections among children at a hospital in Colorado. Potential increases in pediatric iGAS cases in other states were subsequently noted by contributors to the Infectious Diseases Society of America's provider-based [Emerging Infections Network](#) and by certain jurisdictions participating in CDC's [Active Bacterial Core Surveillance System \(ABCs\)](#). A review of preliminary ABCs data from 2022 demonstrated a monthly increase in the number of confirmed iGAS cases in children between September to November, above what was seen in the same period in 2020 and 2021. However, it is too early to determine whether this rise is beyond what would be expected for pre-COVID-19 GAS seasonal patterns.

- In Wisconsin three iGAS pediatric deaths occurred in the month of December. All cases had a viral co-infection and all were healthy with no risk factors for disease complications.
- Winnebago County had 3 pediatric cases of iGAS in December with one resulting in Rheumatic Fever.

iGAS Recommendations for Healthcare Providers

- Consider iGAS as a possible cause of severe illness, including in children and adults with concomitant viral respiratory infections.
- Obtain culture for suspected iGAS infections, including blood, wound, and pleural fluid cultures, as clinically indicated.
- Follow clinical practice guidelines for diagnosis and treatment of GAS pharyngitis.
- Be mindful of potential alternative agents for treating confirmed GAS pharyngitis in children due to the [shortage of amoxicillin suspension](#).
- Additional information can be found [here](#).

Ebolavirus Outbreak in Uganda Declared Under Control

- Per WI Department of Health Services (DHS), official notification has been received that the Sudan ebolavirus outbreak in Uganda is under control. As of January 11, 2023, the CDC has recommended an end to U.S. travel-related measures, including public health monitoring of travelers who have been to Uganda in the prior 21 days. DHS will no longer receive alerts for individuals who have travelled in Uganda.
- The Winnebago County Health Department followed nine people that had recent travel to Uganda. None of those individuals displayed any symptoms and have been released from public health monitoring.

Polio

- Sustained poliovirus transmission has been eliminated from the United States for approximately 40 years; vaccines are highly effective in preventing paralysis after exposure.
- In June 2022, poliovirus was confirmed in an unvaccinated immunocompetent adult resident of New York hospitalized with flaccid lower limb weakness. Vaccine-derived poliovirus type 2 was isolated from the patient and identified from wastewater samples in two neighboring New York counties.
- Unvaccinated persons in the United States remain at risk for paralytic poliomyelitis if they are exposed to either wild or vaccine-derived poliovirus (VDPV); all persons in the United States should stay up to date on recommended poliovirus vaccination.
- VDPV is a strain related to the weakened live poliovirus contained in oral polio vaccine (OPV). The United States no longer administers the OPV and only uses the inactivated poliovirus vaccine.
- Additional information on Polio can be [found here](#). Wisconsin polio vaccination data can be [found here](#).