# EPIDEMIOLOGY NEWSLETTER

### Guam communicable disease update

#### **INSIDE**

#### **National headlines**

Top headlines on health security, COVID-19, and other infectious diseases

#### **Respiratory update**

COVID-19, Influenza, and RSV

#### **Notable conditions**

Salmonellosis, E. coli

#### **Syndromic surveillance**

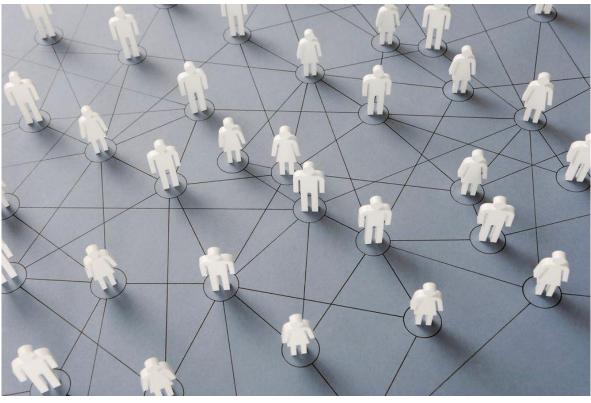
AURI, gastroenteritis, diarrhea, fever & rash

#### **Appendix**

Class I and II Reportable
Diseases

155 Hessler Place Hagatna, GU 96910

Data compiled for this report have been generated by the following Surveillance members: A Argao, A Sablan, A Arizala, J Taitano. Laboratory data were provided by A Mallari and AM Santos. Analysis and interpretation were provided by PP Sotto.



### National headlines

### CDC confirms second human H5 bird flu case in Michigan.

A second human case of highly pathogenic avian influenza (HPAI) A(H5) virus infection has been identified in Michigan. This is the third human case associated with an ongoing multistate outbreak of A(H5N1) in U.S. dairy cows.

# <u>Public health officials are investigating multistate outbreaks of Salmonella linked to contact with backyard poultry.</u>

Approximately 29 states have reported active investigation into Salmonella infections associated with contact with backyard poultry. This resulted in 109 illnesses and 33 hospitalizations.



### RESPIRATORY ILLNESS || COVID-19

COVID-19 case reports continued to increase throughout the month of May. A total of 276 COVID-19 cases were reported in May, compared to 60 total COVID-19 cases reported in April. Although there is a considerable difference in total cases reported, this increasing rate was similarly observed in 2023 (**Figure 1**). Public Health will continue to monitor this trend; however, the community is reminded to be cognizant of COVID-19 (and other viral respiratory diseases) as Guam enters its graduation and summer season.

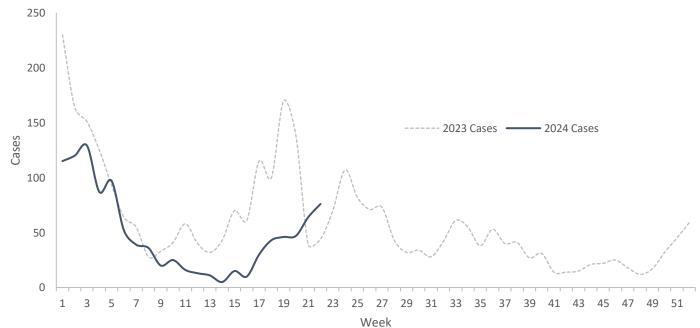


Figure 1. Weekly count of COVID-19 cases in Guam, 2023-24

Effective May 01, 2024, hospitals are no longer required to report COVID-19 Hospital data to the Department of Health and Human Services through the National Healthcare Safety Network. Guam COVID-19 hospital admission data reporting will be temporarily suspended.



### RESPIRATORY ILLNESS | Influenza & ILI

DPHSS is closely monitoring influenza transmission given the sudden increase in mid-March. Influenza reports continue to remain elevated, however, it remains uncertain whether cases are climbing. There was a total of 87 cases reported for the month of May, compared to 61 total cases reported in April. Guam saw an average of 17 cases per week in May, compared to 16 cases per week in April. **Figure 5** continues to emphasize the shift in influenza type. While the majority of influenza cases for 2024 were influenza A, the proportion of influenza B has been rising in recent weeks.

Figure 4. Weekly count of influenza and ILI cases in Guam, 2023-24

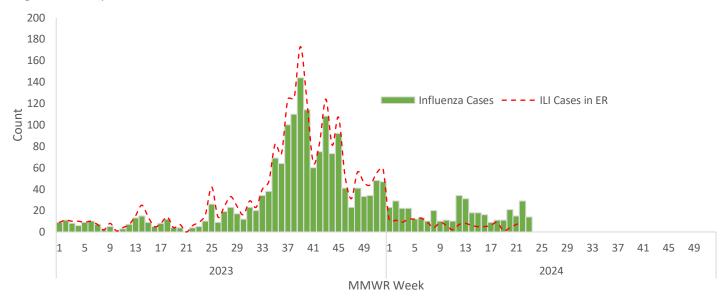
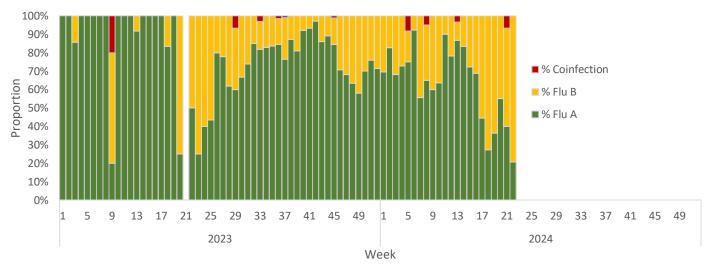


Figure 5. Proportion of influenza type reported by week, 2023-24





### RESPIRATORY ILLNESS | Influenza & ILI

Influenza has had a larger impact on the infant and elderly population. There were 22 more cases who were less than 5yrs of age, reported in May, compared to 4 cases reported in April. Those aged 65yrs or older also had a notable increase, with 22 cases reported in May compared to 5 cases reported in April. This shifting incidence towards the younger and older population (non-school/working age) suggests increased time spent at home or increased congregating potentially correlated with end-of-school year events.

Figure 6. Change in influenza cases by age group, Apr-May 2024

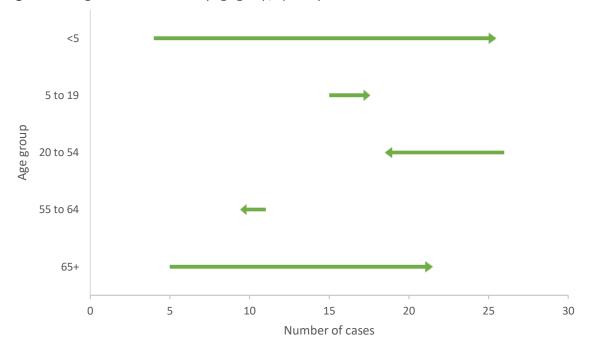
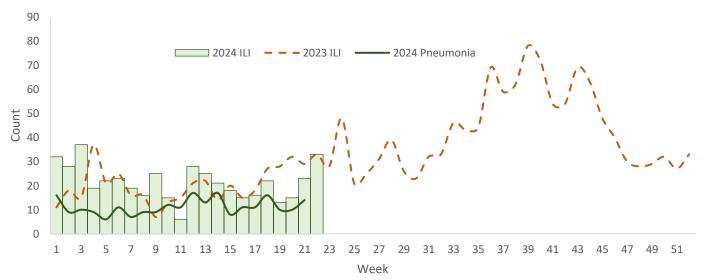




Figure 7. Weekly report of ILI and pneumonia in Guam, 2023-24





### NOTABLE CONDITIONS | Salmonella

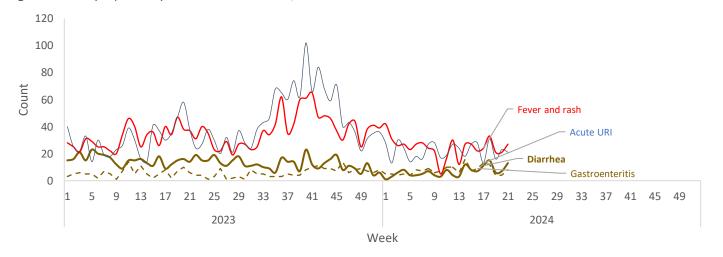
DPHSS continues to monitor the rise in Salmonella infections. CDC has reported multiple multistate Salmonellosis outbreaks associated with numerous exposures. However, no Salmonellosis infection has been associated with the contaminated food products mentioned in earlier reports, nor do these recent Salmonellosis cases have any identified epi-links. Majority of the cases were male (57%). The median age for all 14 cases reported in 2024 is 32.5years. **Table 1** highlights the current issue, with 10 total cases being identified in the first quarter of 2024, compared to the low reports observed in the first quarter of previous years.

Table 1. Count of Salmonellosis reports by week, 2020-2024

Week	2020	2021	2022	2023	2024
1-17	3	9	2	8	14
18	1	0	1	0	0
19	0	0	1	0	1
20	0	1	3	0	1
21	0	0	1	0	0
22	0	0	0	0	0
Total	4	10	8	8	16

### SYNDROMIC SURVEILLANCE

Figure 8. Weekly report of syndromic cases in Guam, 2023-24





## **APPENDIX** | Case definitions

Syndromic surveillance case definitions

Variable	Definition
Influenza-like Illness	Fever (temperature of 100.4 F/38 C or greater) and cough and/or sore throat
(ILI)	
Diarrhea (DIA)	Three (3) or more episodes of loose stools or an occurrence of loose stools that is above normal
	for the person
Gastroenteritis (AGE)	Inflammation of the stomach or intestines, or both, including diarrhea or vomiting
Fever and Rash (FaR)	Fever, or measured temperature of 100.4 F/38 C or greater, and detection of abnormal areas on
	the skin that may appear as discolored bumps or flat spots, or blisters or bumps containing fluid
	or pus that are intact or crusted over
Acute upper	Self-limited irritation and swelling of the upper airways with associated cough and no signs of
respiratory infection	pneumonia, in a patient with no other condition that would account for their symptoms, or with
(AURI)	no history of chronic obstructive pulmonary disease, emphysema, or chronic bronchitis.
Pneumonia	An infection of the lungs, caused by virus, bacteria, or fungi

#### **MMWR** Weeks

An epidemiologic week, more aptly referred to as the MMWR week, is a standardized method of counting weeks to allow for comparison of data year after year. Each MMWR week begins on a Sunday and ends on a Saturday.

Week	Date Range						
1	12/31/23 - 01/06/24	6	02/04 – 02/10	11	03/10 - 03/16	16	04/14 - 04/20
2	01/07 – 01/13	7	02/11 – 02/17	12	03/17 - 03/23	17	04/21 – 04/27
3	01/14 - 01/20	8	02/18 - 02/24	13	03/24 - 03/30	18	04/28 – 05/04
4	01/21 – 01/27	9	02/25 - 03/02	14	03/31 – 04/06	19	05/05 – 05/11
5	01/28 – 02/03	10	03/03 - 03/09	15	04/07 – 04/13	20	05/12 – 05/18



# **APPENDIX** || Class I Conditions

	Week					]
Disease	18	19	20	21	22	YTD
Acute Flaccid Paralysis or Myelitis	0	0	0	0	0	0
Anthrax*	0	0	0	0	0	0
Botulism*	0	0	0	0	0	0
Chikungunya	0	0	0	0	0	0
Cholera	0	0	0	0	0	0
Dengue	0	0	0	0	0	0
Diptheria	0	0	0	0	0	0
Encephalitis (viral)	0	0	0	0	0	0
Hemorrhagic Fevers (All Forms)*	0	0	0	0	0	0
Measles	0	0	0	0	0	0
Meningoccal Disease	0	0	0	0	0	0
MERS-Co Virus	0	0	0	0	0	0
Novel Influenza Virus	0	0	0	0	0	0
Other Arboviral Diseases	0	0	0	0	0	0
Pertussis	0	0	0	0	0	0
Plague*	0	0	0	0	0	0
Poliomyelitis (acute)	0	0	0	0	0	0
Rabies	0	0	0	0	0	0
Rubella (including congenital)	0	0	0	0	0	0
SARS-CoV-2/COVID-19	43	46	47	64	77	1097
Severe Acute Respiratory Syndrome (SARS)	0	0	0	0	0	0
Small Pox*	0	0	0	0	0	0
Toxic-shock Syndrome	0	0	0	0	0	0
Trichinosis	0	0	0	0	0	0
Tularemia*	0	0	0	0	0	0
Typhoid Fever	0	0	0	0	0	0
Typhus	0	0	0	0	0	0
Yellow Fever	0	0	0	0	0	0
Zika	0	0	0	0	0	0



## **APPENDIX** | Class II Conditions

"	Week					]
Disease	18	19	20	21	22	YTD
AIDS	0	0	0	0	0	0
Amebiasis	0	0	0	0	0	0
Brucellosis	0	0	0	0	0	0
Campylobacteriosis	0	0	1	0	0	6
Chancroid	0	0	0	0	0	0
Chickenpox (varicella)	0	0	0	0	0	2
Chlamydia trachomatis	6	10	9	10	11	235
Coccidioidomycosis	0	0	0	0	0	0
Conjunctivitis, viral or bacterial	0	1	1	2	1	14
Cryptosporidiosis	0	0	0	0	0	0
Cyclosporiasis	0	0	0	0	0	0
E. coli other (MDR, ESBL+)	2	3	3	2	5	100
Enterococcus sp. VRE, vancomycin resistant	2	0	2	0	1	25
Eosinophilic meningoencephalitis	0	0	0	0	0	0
Fish poisoning (ciguatera)	0	0	0	0	0	0
Fish poisoning (Scrombroid)	0	0	0	0	0	0
Food poisoning	0	0	0	0	0	0
Giardiasis	0	0	0	0	0	0
Gonorrhea	2	2	7	3	1	84
Granuloma inguinale	0	0	0	0	0	0
Haemophilus influenzae, invasive disease	0	0	0	0	0	0
Hansen's disease (leprosy)	0	0	0	0	0	0
Hemolytic-uremic syndrome	0	0	0	0	0	0
Hepatitis A, acute (IgM Positive)	0	0	1	0	0	1
Hepatitis B virus infection, chronic	1	2	6	2	2	24
Hepatitis B, acute	0	0	0	0	0	1
Hepatitis B, perinatal infection	0	0	0	0	0	2
Hepatitis C virus Infection, chronic or	1	0	1	1	2	12
resolved	_				_	
Hepatitis C, acute	0	0	0	0	0	3
Hepatitis, unspecified	0	0	0	0	0	0
Herpes Simplex Type 2	0	0	0	0	0	0
HIV	0	0	0	0	0	1
Human papillomavirus (HPV)	0	0	0	0	0	6
Influenza	11	11	21	15	29	395
Kawasaki syndrome	0	0	0	0	0	0
Legionellosis	0	0	0	0	0	0
Leptospirosis	0	0	0	0	0	0
Lyme disease	0	0	0	0	0	0



# **APPENDIX** || Class II Conditions

			Week			
Disease	18	19	20	21	22	YTD
Lymphogranuloma Venereum	0	0	0	0	0	0
Malaria	0	0	0	0	0	0
Meningitis, aseptic	0	0	0	0	0	0
Meningitis, bacterial	0	0	0	0	0	0
Mumps	0	0	0	0	0	0
Myocarditis	0	0	0	0	0	0
Paratyphoid fever	0	0	0	0	0	0
Parvovirus B19 (Fifth disease)	0	0	0	0	0	0
Rheumatic fever (active)	0	0	0	0	0	0
Rickettsial disease	0	0	0	0	0	0
Salmonellosis (non-typhoidal)	0	1	1	0	0	16
Scabies	0	2	1	0	0	3
Scarlet fever	0	0	0	0	0	0
Shiga toxin-producing E coli (0157:H7)	0	0	0	0	0	0
Shigellosis	0	0	0	0	0	0
Staphylococcus aureus (MRSA or VRSA)	3	4	8	8	11	185
Strep. other	8	2	9	3	4	150
Streptococcal disease (Group A)	0	0	0	0	0	0
Streptococcal sore throat	28	5	14	23	21	399
Streptococcus pneumoniae, penicillin resistant	0	0	0	0	0	0
Syphilis, congenital	0	0	0	0	0	0
Syphilis, early non-primary, non-secondary	0	0	0	0	0	0
Syphilis, primary	0	0	0	0	0	0
Syphilis, secondary	0	0	0	0	0	3
Syphilis, unknown duration or late	0	0	0	0	0	2
Tetanus	0	0	0	0	0	0
Tuberculosis	0	0	0	0	0	13
Vibriosis	0	0	0	0	0	0

