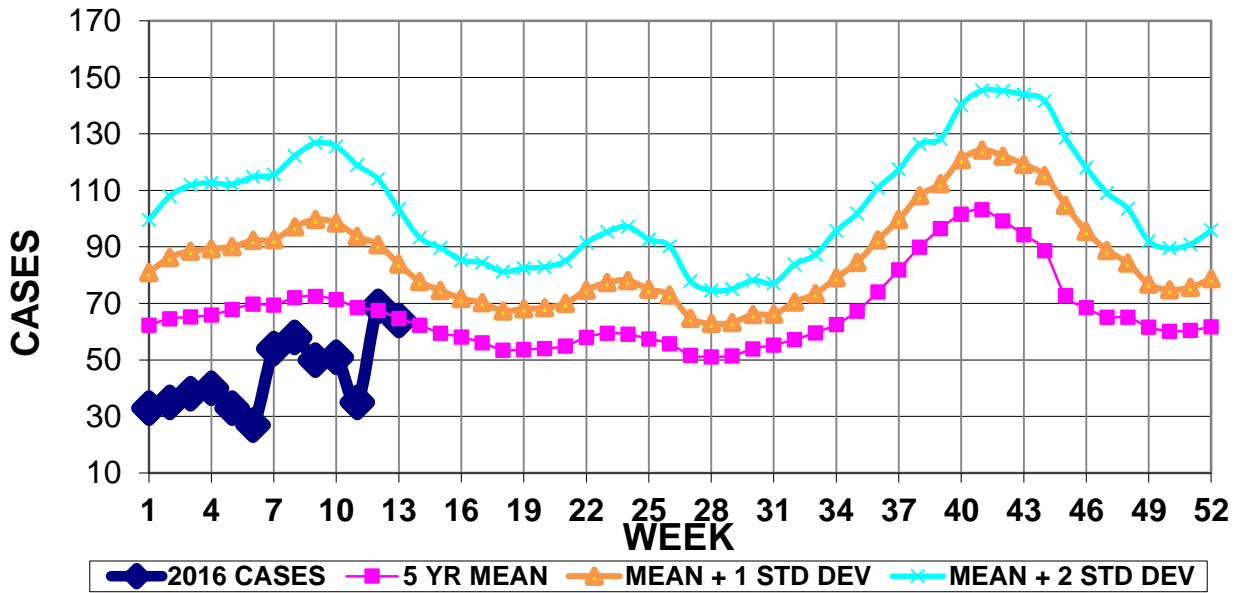


INFECTION CONTROL DEPARTMENT
 GUAM MEMORIAL HOSPITAL AUTHORITY
GUAM EPIDEMIOLOGY NEWSLETTER

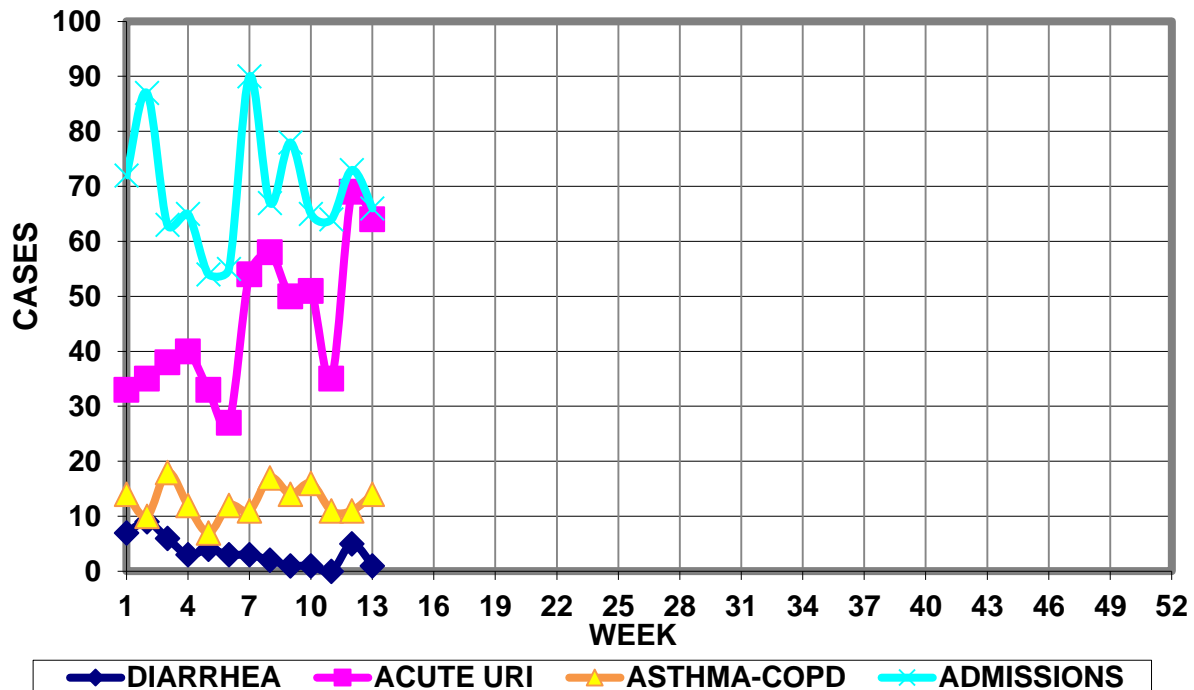
REPORT FOR WEEK ENDING: 4/2/2016 (Reporting week 2016-13)

GUAM REPORTS

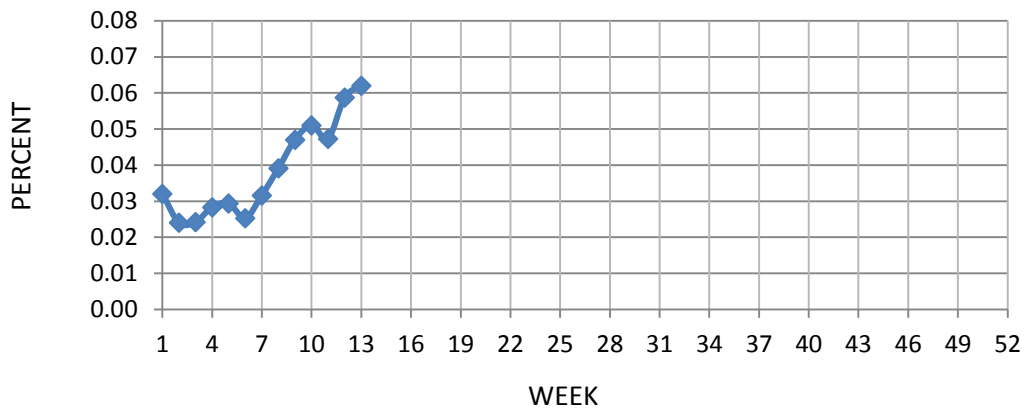
**GUAM ACUTE RESPIRATORY INFECTION SURVEILLANCE 2016;
 GMHA-EMERGENCY DEPARTMENT PATIENTS BY WEEK SEEN**



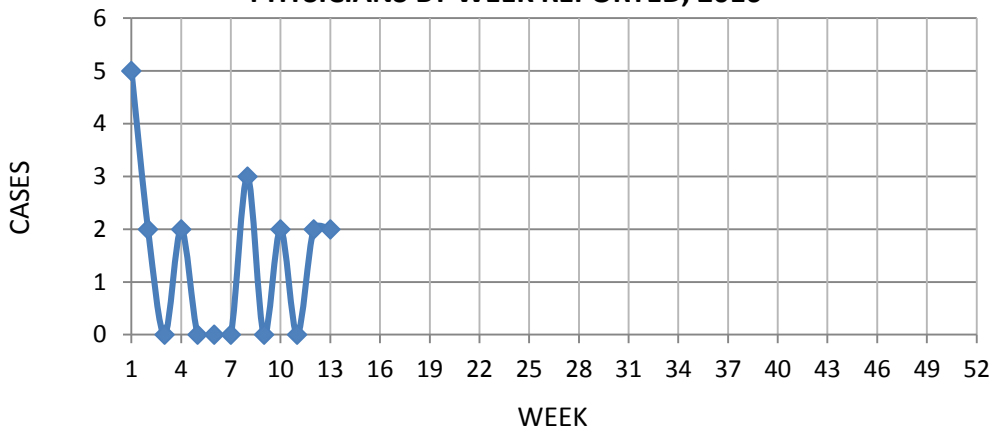
**GUAM SYNDROMIC DISEASE SURVEILLANCE
 GMHA-ED PATIENT DIAGNOSES BY WEEK, 2016**



PERCENT OF TOTAL PATIENTS SEEN IN THE GMHA-ER WITH A DIAGNOSIS OF FLU/ILI (3-WEEK SMOOTHED), 2016



NUMBER OF CASES OF INFLUENZA AND ILI REPORTED BY SENTINEL PHYSICIANS BY WEEK REPORTED, 2016



GUAM SENTINEL PHYSICIAN INFLUENZA SURVEILLANCE

REPORTS OF INFLUENZA OR INFLUENZA-LIKE ILLNESSES
RECEIVED FOR THE WEEK ENDING 4/2/16

Two cases reported by sentinel physicians

Bureau of Communicable Disease Control
Guam Department of Public Health & Social Services
H1N1 INFLUENZA SURVEILLANCE
0 CASES OF H1N1 REPORTED FOR 2016 WEEK 13
Cumulative 2016: 25 civilian & 2 military cases

INFECTION CONTROL DEPARTMENT
 GUAM MEMORIAL HOSPITAL AUTHORITY
**HOSPITALIZATIONS FOR INFLUENZA A BY AGE
 AND MORBIDITY REPORTING WEEK, 2016**

AGE	4	5	6	7	8	9	10	11	12	13	TOTAL
0-4											
5-18											
19-24											
25-49											
50-64											
65+											
TOTAL	0	0	0	0	0	0	0	0	0	0	0

Bureau of Communicable Disease Control
Guam Department of Public Health & Social Services
ISLAND-WIDE COMMUNICABLE DISEASE REPORT

REPORTS RECEIVED DURING THE WEEK ENDING 4/2/2016

<i>Chlamydia trachomatis</i>	19
Conjunctivitis	3
<i>E. coli</i> MDR, ESBL+	1
HPV	2
Influenza A	4
Influenza B	1
MRSA	13
Scabies	19
Streptococcal sore throat	26
Streptococcal disease, other than sore throat	7

INFECTION CONTROL DEPARTMENT
GUAM MEMORIAL HOSPITAL AUTHORITY

**GMHA-EMERGENCY DEPARTMENT CLINICAL DIAGNOSES OF INFLUENZA OR
FLU-SYNDROME BY WEEK AND PATIENT'S VILLAGE OF RESIDENCE, 2016**

(Villages listed geographically from northern-most to southern-most)

VILLAGE	WEEK										TOTAL	2016 RATE
	4	5	6	7	8	9	10	11	12	13		
Yigo	2	1	0	4	1	3	1	2	1	4	20	95.35
Dededo	3	1	1	3	4	3	5	1	8	4	41	89.33
Tamuning	1	1	0	1	2	2	3	1	0	7	18	89.54
Barrigada	0	0	1	2	1	3	1	1	0	0	11	121.37
Mangilao	1	1	0	3	3	1	6	2	1	4	24	154.70
Mongmong-T-M	1	1	0	3	2	0	2	3	2	1	17	243.90
Hagatña	0	0	0	0	0	0	0	0	1	0	1	93.20
Agaña Heights	1	0	0	1	0	1	0	1	1	0	5	128.57
Sinajana	0	0	0	0	0	0	0	0	0	2	3	113.34
Chalan Pago-Ordot	0	0	0	0	0	4	0	0	1	2	7	100.47
Asan-Maina	0	0	0	0	0	0	0	0	7	0	7	320.81
Piti	0	0	0	1	0	0	0	0	0	0	1	67.34
Santa Rita	0	1	0	0	0	1	1	0	1	0	5	80.48
Agat	0	1	1	2	0	0	3	0	0	0	9	179.25
Yona	1	0	2	0	0	0	0	1	2	0	9	135.99
Talofofo	0	0	0	0	1	0	0	0	2	0	3	96.31
Inarajan	0	0	0	1	3	1	0	0	2	2	10	430.85
Merizo	0	1	0	0	0	0	0	0	0	1	2	105.88
Umatac	0	0	0	0	0	0	0	0	0	0	0	0
Tourist	1	0	0	1	0	1	0	0	1	0	4	
Unknown	0	0	0	0	0	0	1	0	0	0	1	
TOTAL	11	8	5	22	17	20	23	12	30	27	200	122.89

NOTE: Rate = cases per 100,000 population for the year to date.

GMHA-ER INFLUENZA/ILI ACTIVITY LEVEL – REGIONAL (9 of 19 villages affected)

(ACTIVITY LEVELS: No activity, Sporadic, Local, Regional, Widespread)

GMHA-ER INFLUENZA/ILI ACTIVITY BY AGE – WEEK 13

GENDER	Total	< 1	1-4	5-9	10-14	15-19	20-24	25-29	30-39	40-49	50-64	65+	UNK
MALE	18	7	7	1	0	0	0	0	2	0	1	0	0
FEMALE	9	2	2	0	0	1	1	1	0	0	1	1	0
TOTAL	27	9	9	1	0	1	1	1	2	0	2	1	0

GUAM ANIMAL DISEASE (ZOOSES) REPORTS

Anaplasmosis – 1 canine, Babesiosis – 2 canine

HEPATITIS C EPIDEMIC IN THE U.S.A. (AND GUAM?)

The number of deaths from hepatitis C in the USA is on the rise, and the increase is hitting particularly hard among middle-age people, a new study from the CDC reports. The study found that the number of deaths in the USA from hepatitis C rose from 11,051 in 2003 to 19,368 in 2013. And baby boomers, or those ages 55 to 64, accounted for 51 percent of the deaths in 2013, according to the study, published online [17 Mar 2016] in the journal *Clinical Infectious Diseases*.

The hepatitis C virus infects the liver cells and can lead to serious liver problems, including cirrhosis (scarring of the liver) or liver cancer. This rise in deaths from hepatitis C is "alarming," said Amy Nunn an associate professor of behavioral and social sciences at the Brown University School of Public Health in Providence, Rhode Island. Nunn is currently working on a study about hepatitis C screening and treatment in Philadelphia [Pennsylvania]; she was not involved in the new report from the CDC. "This is an epidemic of enormous magnitude," she said.

In the analysis, CDC researchers looked at data collected from death certificates in the USA between 2003 and 2013. The researchers compared the number of Americans who died each year from hepatitis C to the number of deaths from 60 other "nationally notifiable" infectious conditions, meaning diseases that health officials in every state and territory are required to report to the CDC. These include HIV, pneumococcal disease, tuberculosis, measles, mumps, rabies, and Lyme disease.

During the study period, there was an average yearly increase in deaths from hepatitis C of more than 6 percent, the researchers found. During the same period, deaths from the 60 other infectious conditions included in the study decreased: they fell from 24,745 in 2003 to 17,915 in 2013, or an average yearly decrease of more than 3 percent, according to the findings. In 2012, the number of Americans who died from hepatitis C exceeded the total number of deaths from all 60 of those other notifiable infectious conditions, the researchers found.

The hepatitis C virus is one of 5 viruses that are known to cause hepatitis, or inflammation of the liver. Hepatitis C spreads primarily when people share needles, syringes, or other equipment used to inject drugs. But before 1992, when the US began screening the blood supply for the virus, hepatitis C was also commonly spread through blood transfusions and organ transplants. Less common ways of contracting the virus include accidental needle punctures among health care workers; sharing personal care items that may have come in contact with another person's blood, such as razors or toothbrushes; or sexual contact with a person infected with hepatitis C. Because people are not routinely screened for hepatitis C, about 85 percent of those infected with the virus don't know they have it, she said. There is a stigma and shame attached to hepatitis C because some of those infected are current or former injectable drug users, Nunn said.

The study findings also come as no surprise to Dr. Raymond Chung, director of hepatology and the Liver Center at Massachusetts General Hospital in Boston, he said. Hepatitis C may be different from other infections that affect the liver that may be shorter in duration or have more symptoms. Hepatitis C can be a silent illness, and people may have no symptoms for decades, allowing the disease to progress in the liver unnoticed, he explained. Dr. Chung told *Live Science* 3 million to 4 million Americans may be chronically infected with hepatitis C and most of those people are in their baby boomer years. "That's the group where the epidemic resides," he said. Baby boomers were likely infected in the 1970s and '80s, and have had the disease for about 3 decades. The illness may be diagnosed when these people seek treatment for their symptoms, but the individuals may already have more advanced liver disease and more complications from it, he said.

Dr. Chung said that some people die from hepatitis C after the virus leads to liver failure or liver cancer, which reflects the trend of people being diagnosed only later in the disease process. This increase in the number of deaths may continue for another 5 years or longer before it peaks. By then the baby boomers will get older and more likely to die from other causes. The challenge to health care providers is to identify people with hepatitis C earlier, through screening, and to get these individuals into care sooner, he said. There are now

treatments that can cure the infection, or stop the development of the disease, Dr. Chung said.

According to Dr. Chung some of the medications used in the past to treat the disease were poorly tolerated and had lots of side effects. "The cure had a reputation for being worse than the disease itself," he noted. The new drugs are better, but another problem is that they are very expensive, and some people are having a hard time getting access to them in early stages of the disease.

Source: Live Science [edited]

<<http://www.livescience.com/54215-hepatitis-c-deaths-rising-in-us.html>>

as reported in a ProMed-mail post <<http://www.promedmail.org>>

Equivalent death statistics for hepatitis C are not available on Guam. In an effort to compare the viral hepatitis situation on Guam with that of the US, the number of new cases of viral hepatitis reported in the U.S. for 2013, the most recent year available (Table 1), was compared to the viral hepatitis cases reported to the Guam hepatitis registry (Table 2). Since viral hepatitis cases on Guam are seldom diagnosed (or reported) during the acute phase (frequently only when the patient is elderly and already on dialysis), the average number of cases reported to the registry annually over the period 1980-2015 was used to calculate an average annual viral hepatitis report rate. Although this method is certainly not ideal, it may provide some estimate of the extent of the problem of viral hepatitis on Guam.

Table 1 – Viral hepatitis cases reported and incidence rate per 100,000 population, United States, 2013¹

DISEASE	2013 US cases	2013 US rates/100,000
Hepatitis A	1781	.56
Hepatitis B	3050	.96
Hepatitis C	2138	.68

Table 2 – Viral hepatitis cases reported to the Guam Hepatitis Registry, 1980-2015, average number of cases reported annually, average annual rate, and Guam/US rate ratio²

DISEASE	Guam Total 1980-2015	Guam Average Annual Number	Guam Average Annual Rate/100,000	Guam/US Rate Ratio
Hepatitis A	378	10.8	7.21	12.88
Hepatitis B	2,322	66.34	44.31	46.16
Hepatitis C	934	26.69	17.83	26.22

¹ www.cdc.gov/mmwr/preview/mmwrhtml/mm6253a1.htm

² Guam Hepatitis Registry (unpublished data)