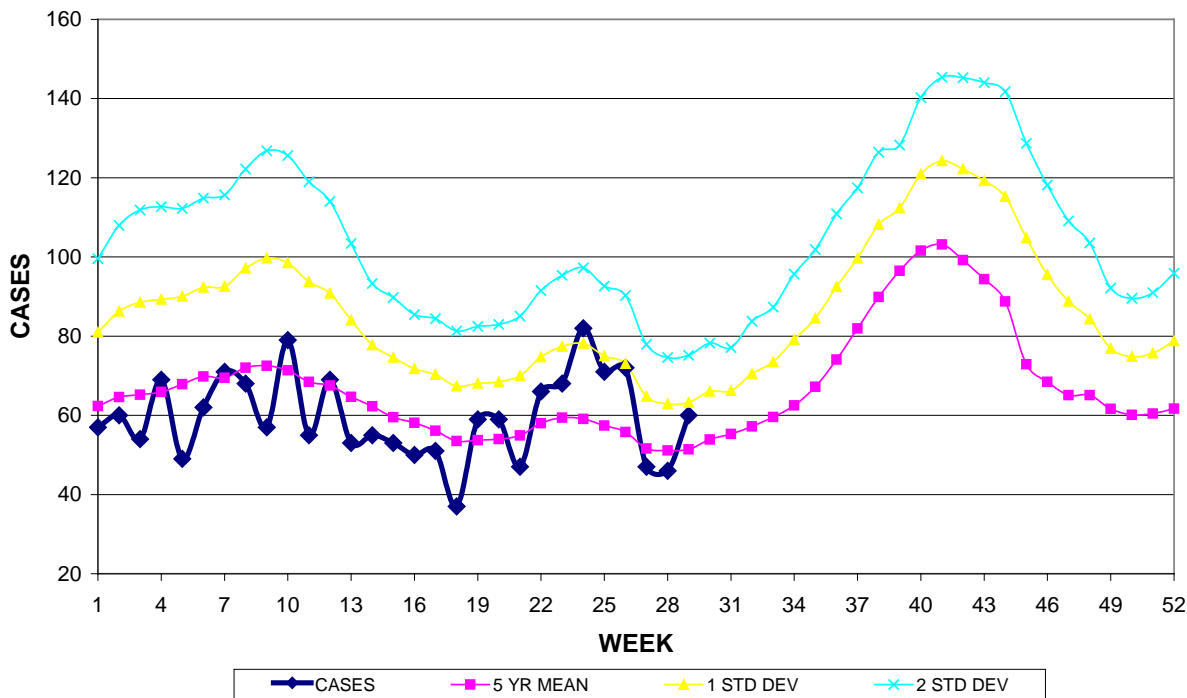


GUAM EPIDEMIOLOGY NEWSLETTER

REPORT FOR WEEK ENDING: 7/21/2012 (Reporting week 2012-29)

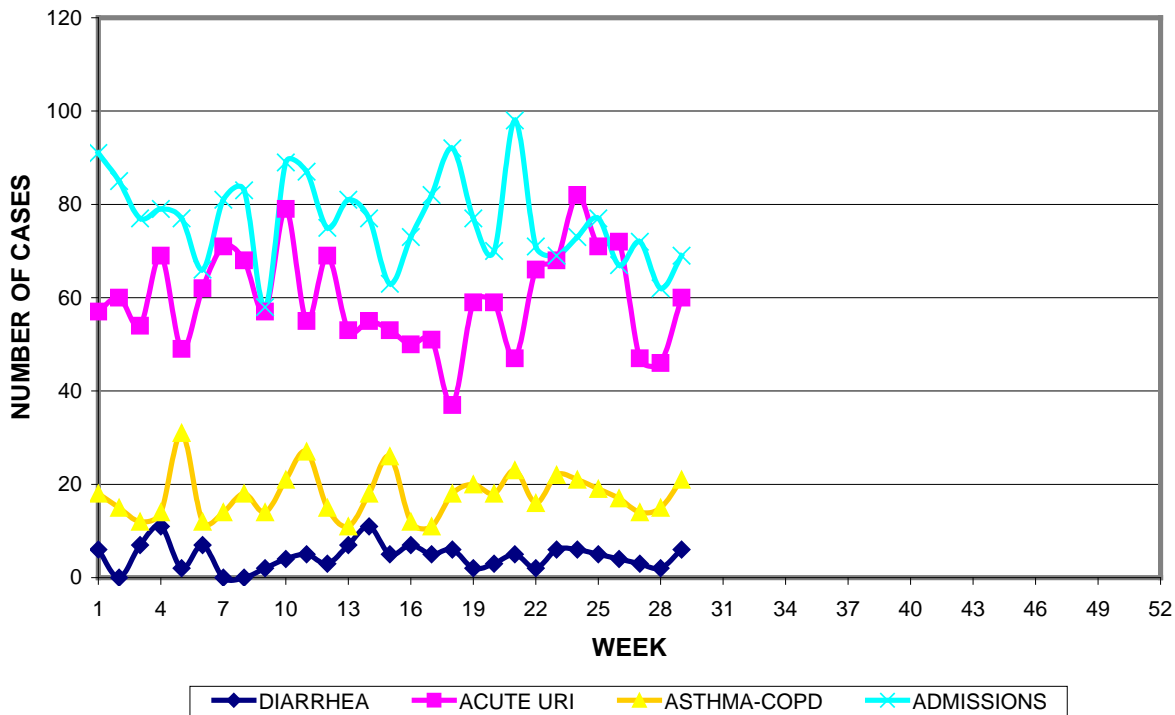
GUAM REPORTS

**GUAM ACUTE RESPIRATORY INFECTION SURVEILLANCE 2012;  
 GMHA-EMERGENCY DEPARTMENT PATIENTS BY WEEK SEEN**

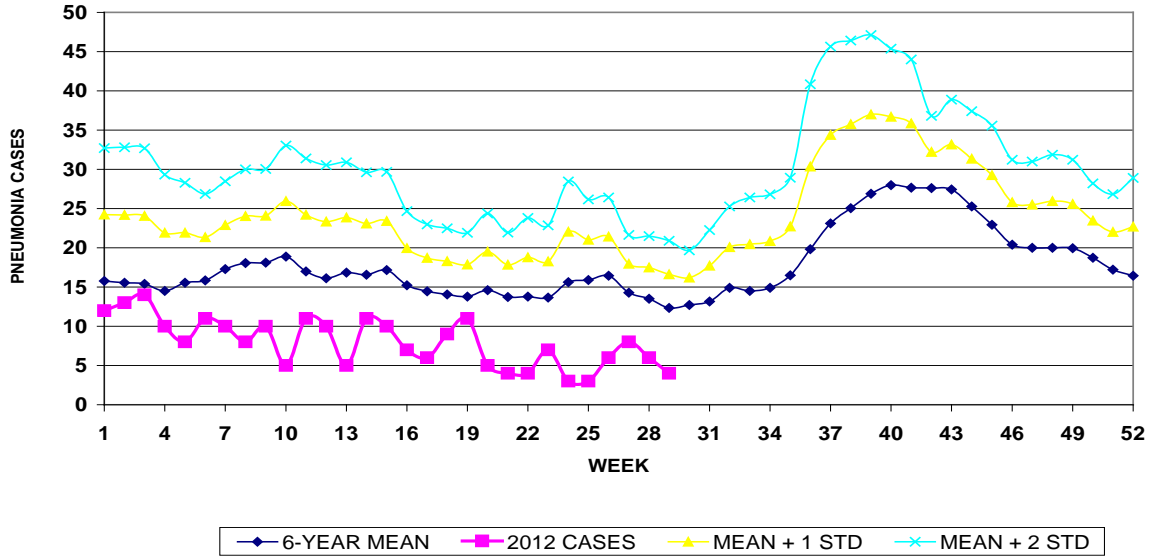


GUAM SYNDROMIC DISEASE SURVEILLANCE

**GMHA-ED PATIENT DIAGNOSES BY WEEK, 2012**



MEDICAL RECORDS AND INFECTION CONTROL DEPARTMENTS  
 GUAM MEMORIAL HOSPITAL AUTHORITY  
**HOSPITAL INPATIENT DISCHARGES WITH A DIAGNOSIS OF  
 PNEUMONIA BY WEEK DISCHARGED, 2012**



**GUAM SENTINEL PHYSICIAN INFLUENZA SURVEILLANCE**  
 REPORTS OF INFLUENZA OR INFLUENZA-LIKE ILLNESSES  
 RECEIVED FOR THE WEEK ENDING 7/21/2012

No activity – No cases reported by sentinel physicians  
 (ACTIVITY LEVELS: No activity, Sporadic, Local, Regional, Widespread)

Foreign Quarantine & Enteric Diseases Section  
 Bureau of Communicable Disease Control

**Guam Department of Public Health & Social Services**

**H1N1 INFLUENZA SURVEILLANCE, WEEK 29, 2012**

**NO CASES OF H1N1 REPORTED FOR WEEK 29**

**Cumulative 2012: 0 civilian & 0 military cases**

INFECTION CONTROL DEPARTMENT  
 GUAM MEMORIAL HOSPITAL AUTHORITY

**HOSPITALIZATIONS FOR INFLUENZA A or B BY AGE  
 AND MORBIDITY REPORTING WEEK, 2012**

	WEEK										
AGE	20	21	22	23	24	25	26	27	28	29	TOTAL
0-4											3
5-18		1									1
19-24											
25-49											1
50-64											
65+											2
<b>TOTAL</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>7</b>

GUAM MEMORIAL HOSPITAL AUTHORITY  
**GMHA-EMERGENCY DEPARTMENT CLINICAL DIAGNOSES OF INFLUENZA OR  
 FLU-SYNDROME BY WEEK AND PATIENT'S VILLAGE OF RESIDENCE, 2012**  
 (Villages listed geographically from northern-most to southern-most)

VILLAGE	WEEK										TOTAL	2012 RATE
	20	21	22	23	24	25	26	27	28	29		
Yigo	0	2	2	1	0	0	2	2	1	0	18	78.16
Dededo	1	4	0	6	2	1	1	1	3	2	38	74.76
Tamuning	0	0	0	0	2	1	1	1	1	2	19	89.19
Barrigada	0	1	0	1	2	0	0	3	0	0	7	68.41
Mangilao	0	0	0	2	1	1	0	0	0	2	11	69.86
M-T-M	0	0	0	0	1	2	1	0	0	0	12	173.59
Hagatna	0	0	0	0	0	0	0	1	0	0	2	153.73
Agaña Hts	1	0	0	0	1	0	0	0	0	0	2	42.92
Sinajana	0	0	0	0	0	0	0	1	0	1	2	59.28
Chalan Pago-Ordot	0	0	1	2	0	1	0	2	0	0	12	171.31
Asan-Maina	0	0	0	0	0	0	0	0	0	0	2	80.91
Piti	0	0	0	0	0	0	0	0	0	0	0	0.00
Santa Rita	0	0	0	0	0	0	0	0	0	0	3	33.82
Agat	0	1	0	0	1	1	0	0	0	2	6	89.70
Yona	0	1	1	1	1	1	0	0	1	0	7	91.29
Talofof	1	0	0	0	0	0	0	0	0	0	2	52.60
Inarajan	0	0	0	0	0	0	0	0	0	0	5	138.54
Merizo	0	0	0	0	0	1	0	0	0	0	2	78.19
Umatac	0	0	1	0	0	0	0	0	0	0	3	285.99
Tourist	0	0	0	0	0	1	0	0	0	0	1	
Unknown	0	0	0	0	0	0	0	0	0	0	2	
<b>TOTAL</b>	<b>3</b>	<b>9</b>	<b>5</b>	<b>13</b>	<b>10</b>	<b>10</b>	<b>5</b>	<b>11</b>	<b>8</b>	<b>9</b>	<b>157</b>	<b>85.75</b>

NOTE: Rate = cases per 100,000 population for the specified period.

**GUAM ANIMAL DISEASE (ZONOSSES) REPORTS**  
 REPORTS RECEIVED FOR THE WEEK ENDING 7/21/2012

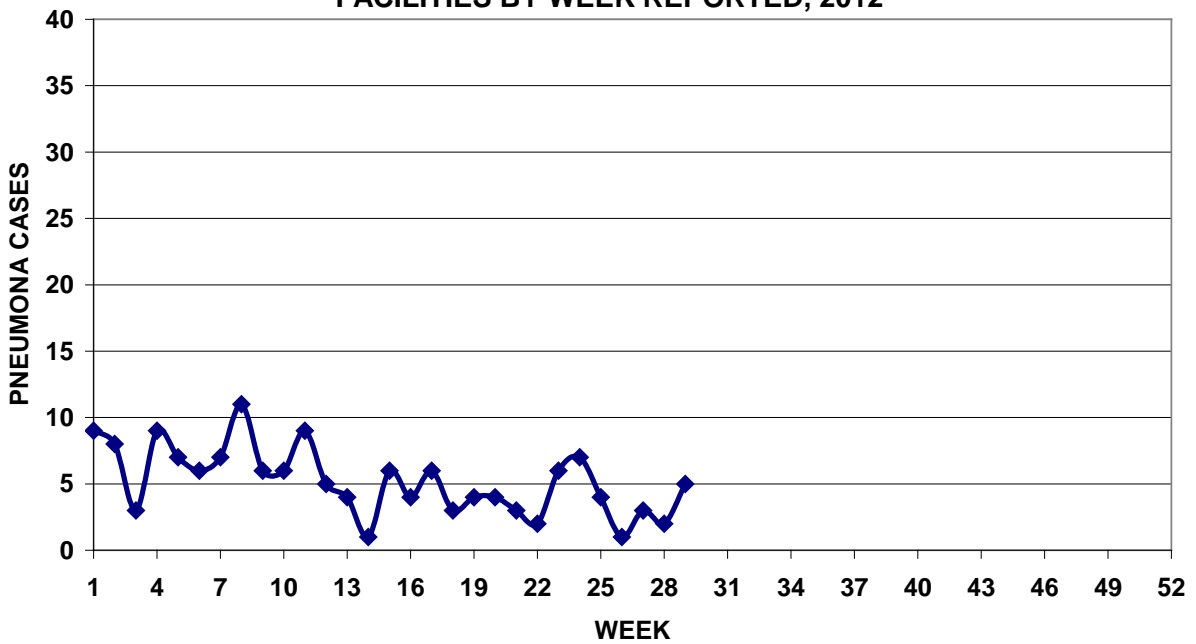
**No cases reported**

Bureau of Communicable Disease Control  
**Guam Department of Public Health & Social Services**  
**ISLAND-WIDE COMMUNICABLE DISEASE REPORT**  
 REPORTS RECEIVED FOR THE WEEK ENDING 7/21/2012

<i>Chlamydia trachomatis</i>	31
Food poisoning	1
Gonorrhea	1
Hepatitis B	2
Hepatitis C	3
HSV 1	1
HSV 2	1
Influenza B	1
MRSA	7
Mononucleosis	1
Streptococcal sore throat	16
Streptococcal disease, other	1
Syphilis, latent (unknown duration)	1
VRE	1

PREVENTIVE MEDICINE DEPARTMENT  
 U.S. NAVAL HOSPITAL GUAM

**PNEUMONIA CASES SEEN IN GUAM MILITARY TREATMENT  
 FACILITIES BY WEEK REPORTED, 2012**



## DISEASE ADVISORY

An 8 year-old boy has recently died of a brain infection caused by *Naegleria fowleri*, more commonly known as the “brain eating amoeba”, after swimming in South Carolina’s Lake Marion. This parasite is present world-wide in warm stagnant waters and infection is almost invariably fatal. Cases are most frequently associated with swimming in streams or ponds although cases have also been associated with kiddie pools which have not been chlorinated or had their water changed for extended periods. One case has been recorded on Guam and hikers are advised to take care to not get water up their nose, the parasite’s usual mode of entry, while cooling off in local streams.

*Source:* South Carolina Department of Health and Environmental Control