# Central Oregon Public Health Quarterly

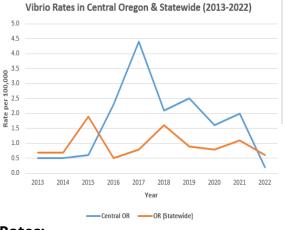
Communicable Disease Update for Crook, Deschutes, and Jefferson Counties 2022: Quarter 3

24/7 Communicable Disease reporting lines:

Crook County: 541-447-5165 Deschutes County: 541-322-7418

Jefferson County: 541-475-4456

# Vibrio in Central Oregon



#### <u>kates:</u>

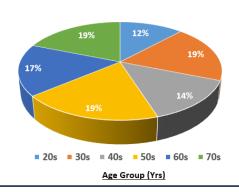
- From 2016-2021, rates of Vibrio have been higher in Central OR compared to statewide rates
- In 2021, the rate of Vibrio in Central OR was (2.0) vs. (1.1) (statewide rate)

#### **What is Vibrio?**

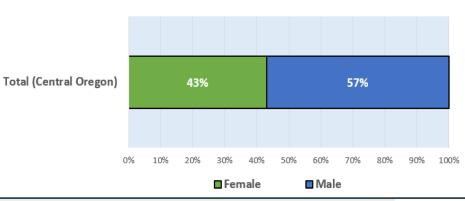
- A genus of Gram-negative aquatic bacterium that occurs naturally in estuarine waters & occurs in high numbers in molluscan shellfish
- Infections more common in warmer months
- Can occur following **seafood consumption** or **open wound** exposure to salt or brackish water

#### **Ages Impacted:**

 While all age groups are susceptible to Vibrio infections, a higher proportion of adults (age 30+) in Central OR are impacted by Vibrio (see figure to right) Central Oregon Percent of Vibrio Cases by Age Grouping, 2012-2022



#### Central Oregon Percent of Vibrio Cases by Sex (n=46), 2012-2022



#### **Sex Differences:**

While both sexes can be affected by Vibrio, a slightly **higher percent of males (57%)** are affected by Vibrio compared to females (43%) in Central Oregon (see figure to left)

 Males may be at higher risk for contracting Vibrio infections due to their participation in behaviors that increase their risk (e.g. recreational water activities & consumption of raw/undercooked seafood\*)

\*https://sfamjournals.onlinelibrary.wiley.com/doi/10.1111/146 2-2920.13955

#### Vibrio Awareness

- 95% of seafood related deaths in the US are from Vibrio\*
- Coastal warming is leading to growing cases of Vibrio across the world
- In Central OR, the highest # of cases occur during the summer months (see fig. to right)

\*https://sfamjournals.onlinelibrary. wiley.com/doi/10.1111/1462-2920.13955

#### Central Oregon Number of Vibrio Cases by Month, 2012-2022

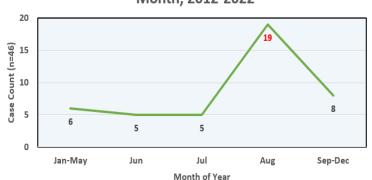
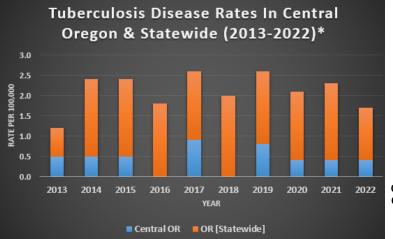


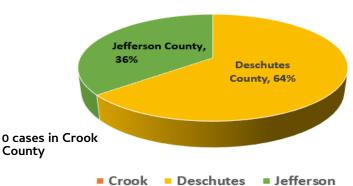
Figure above (raw oysters) from: https://www.cdc.gov/vibrio/faq.html

# **Tuberculosis Disease Rates in Central Oregon**

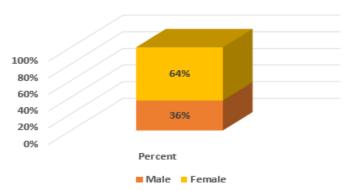
Over the past ten years, there were 11 new active Tuberculosis (TB) cases diagnosed among Central Oregon residents with rates (per 100,000 population) ranging from 0.0 to 0.9.







#### Percent of Active TB Cases in Central Oregon by Sex (2012-2022)\*



\*Cases for 2022 assessed as of 9/1/2022 & subject to change

#### What is Tuberculosis (TB)?^

- An infectious disease usually caused by *Mycobacterium tuberculosis* bacteria
- Generally affects **lungs**, but other body parts can be impacted (e.g. CNS, lymphatic sites, GI system)
- Most infections show no symptoms (i.e. **latent tuberculosis**, not contagious) (~90-95%)
- Typical symptoms include: chronic cough with blood containing mucus; fever; night sweats; weight loss; fatigue; nail clubbing
- Historically referred to as 'consumption' due to the weight loss associated with disease

^https://www.who.int/news-room/fact-sheets/detail/tuberculosis

## What to know about TB

While rates of TB **remain low** in Central Oregon, it is important to understand current risk factors for TB along with current protocol for screening & diagnosis of active cases

#### Who is at risk?

#### HIV Positive

- Most important risk factor {globally} for developing active TB is concurrent HIV infection (**13%** of those with TB are also *infected with HIV)*
- For individuals co-infected with HIV, ~30% develop active TB (vs. ~**5-10%** who develop active disease without HIV)

#### Those on Certain Medications

 Use of certain corticosteroids & *infliximab* increases risk

### <u>Lifestyle Factors</u>

- Alcoholism
- **Diabetes Mellitus**
- Silicosis
- Tobacco Smoking
- Recreational Drug Use

#### How do you screen for TB?

- Two Primary Tests Used: i. TB skin test
  - ii. TB blood test [preferred] {i.e. interferon-gamma release assays or IGRAs]
- Two FDA approved blood tests
  - QuantiFERON®-TB Gold Plus (QFT-Plus)
  - T-SPOT®.TB test (T-Spot)

#### ★ Who to screen\*

- Those exposed to someone with
- People from high-risk countries
- People who live in high-risk settings
- Health-care workers



\*https://www.cdc.gov/tb/topic/testing /tbtesttypes.htm

#### Diagnosis of TB

- [CAUTION]: Diagnosing active TB based only on signs & symptoms is difficult
- **Key considerations:**

Those with **signs of lung disease** or

- constitutional symptoms lasting
- A chest X-ray & multiple sputum cultures for acid-fast bacilli

#### Making a definitive diagnosis:

- Identify *M. tuberculosis* in a clinical sample (e.g. sputum; pus; tissue biopsy)
- NOTE: TB is a slow growing bacteria [culture process can take 2-6 weeks (for blood or sputum cultures)}, thus, treatment is often begun before cultures are confirmed\*
- \*https://www.nice.org.uk/guidance/CG117