

HEALTH MATTERS



Newsletter for the Division of Communicable Disease & Epidemiology - Winter 2023

Disease Matters

Invasive Group A Streptococcal Infection

On December 22, 2022, the Centers for Disease Control and Prevention (CDC) released an advisory regarding increases in pediatric invasive Group A Streptococcal infections (iGAS).

iGAS bacteria can cause a range of illnesses. Some are more common, such as pharyngitis (“strep throat”) and infections of the skin and soft tissue. Others are less common, but more severe, such as sepsis, streptococcal toxic shock syndrome, and necrotizing fasciitis. These severe and invasive infections are associated with high mortality rates and require immediate treatment.

Healthcare Provider Recommendations

The CDC recommends that healthcare providers do the following:

- Offer prompt vaccination against Influenza and varicella to all eligible persons who are not up to date.
- Consider iGAS as a possible cause of severe illness, including in children and adults with concomitant viral respiratory infections. Illness due to iGAS in persons with known viral infections may manifest as persistent or worsening symptoms following initial improvement.
- Educate patients, especially those at increased risk, on signs and symptoms of iGAS requiring urgent medical attention especially necrotizing fasciitis, cellulitis, and toxic shock syndrome.
- 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 iGAS pharyngitis.
- Be mindful of potential alternative agents for treating confirmed iGAS pharyngitis in children.
- Notify appropriate local or state public health departments as soon as possible about unusually aggressive or severe iGAS cases affecting children younger than 18 years of age or clusters of iGAS infections in persons of any age.
- Ask laboratories to hold iGAS isolates or send them to the state public health laboratory for temporary storage.

Amoxicillin Shortage

In addition, there is a national shortage of the liquid antibiotic (amoxicillin suspension) most often prescribed to children to treat iGAS infections. The shortage is anticipated to last several months.



Invasive Group A Streptococcal bacteria.
Source: WHO

Need to Report a Communicable Disease?



Call Davis County
Health Department at
801-525-5220



Or fax the [information](#)
to 801-525-5210

Seasonal Matters

Respiratory Illness Highlights

As with the rest of the nation, Davis County has been experiencing a concurrent rise in multiple respiratory illnesses, termed the “triple-demic.” Increases in Influenza, COVID-19, and Respiratory Syncytial Virus (RSV) have led to concerns of overwhelmed hospitals and emergency departments (EDs). This is characterized not only by sharp increases in these diseases, but also changes in expected seasonality. For example, RSV began peaking much earlier than usual, with increases beginning earlier in the summer.

By the first week of December 2022, these three diseases accounted for approximately 15% of all ED visits combined in Davis County. Since then, ED visits for COVID-19 and RSV have decreased, while visits for Influenza continued to rise. By the end of 2022, Influenza ED visits in Davis County began to plateau.

While these respiratory illnesses appear to be slowing down, it is uncertain how these trends will continue. We encourage all to get the necessary vaccines and treatments to prevent severe disease.

Number Matters

Selected Notifiable Diseases, 2022 & 2021

	2022* Year-to-Date	2021 Year-to-Date	% Increase or Decrease Year-to-Date
Campylobacteriosis	52	48	8.3% ↑
Chlamydia	974	940	3.6% ↑
Gonorrhea	238	260	8.5% ↓
Hepatitis A	1	1	0.0% ↔
Hepatitis B, acute & chronic	17	11	54.5% ↑
Hepatitis C, acute & chronic	138	127	8.7% ↑
Mumps	0	0	0.0% ↔
Measles	0	0	0.0% ↔
Meningococcal disease	0	0	0.0% ↔
Pertussis	9	7	28.6% ↑
Salmonellosis	41	31	32.3% ↑
Shiga-toxin producing E. coli	17	33	48.5% ↓
Shigellosis	2	6	66.7% ↓
Syphilis, all stages	44	36	22.2% ↑
Tuberculosis, active disease	3	1	200% ↑
Tuberculosis, latent infection	98	74	32.4% ↑

*2022 data is provisional and subject to change



Davis County Health Department · Division of Communicable Disease & Epidemiology
22 S. State Street · Clearfield, UT 84015
Phone: 801-525-5200 · Fax: 801-525-5210 · Website: www.daviscountyutah.gov/health

Staff Matters

We are very excited to welcome Lizz Merrill to our team. We'll let Lizz introduce herself:

“My name is Lizz and I’m the new Community Health Educator!”

In this position, I’ll be working with adolescents and young adults on various forms of health education.

I’ve constantly been doing some sort of public health work since I was a freshman in high school (the past eight years!) so I’m very excited to continue this journey with Davis County.

I’m originally from the Wisconsin North Woods area but I went to school in Illinois.

I recently received my bachelor’s degree in public health & biology, with a minor in anthropology.

A fun fact about me is that I’m from the mink capital of the world.”

Welcome aboard, Lizz!

Calendar Matters

Jan 16: Martin Luther King Jr. Day

Jan 17: Utah Legislative session begins

Feb 14: Davis County Board of Health meeting

Feb 20: Presidents’ Day

Mar 3: Utah Legislative session ends

Mar 12: Daylight Savings Time begins

Mar 17: St. Patrick’s Day

Mar 20: First day of Spring