

North Carolina Weekly Enterovirus D68 Surveillance Summary

10/8/2014

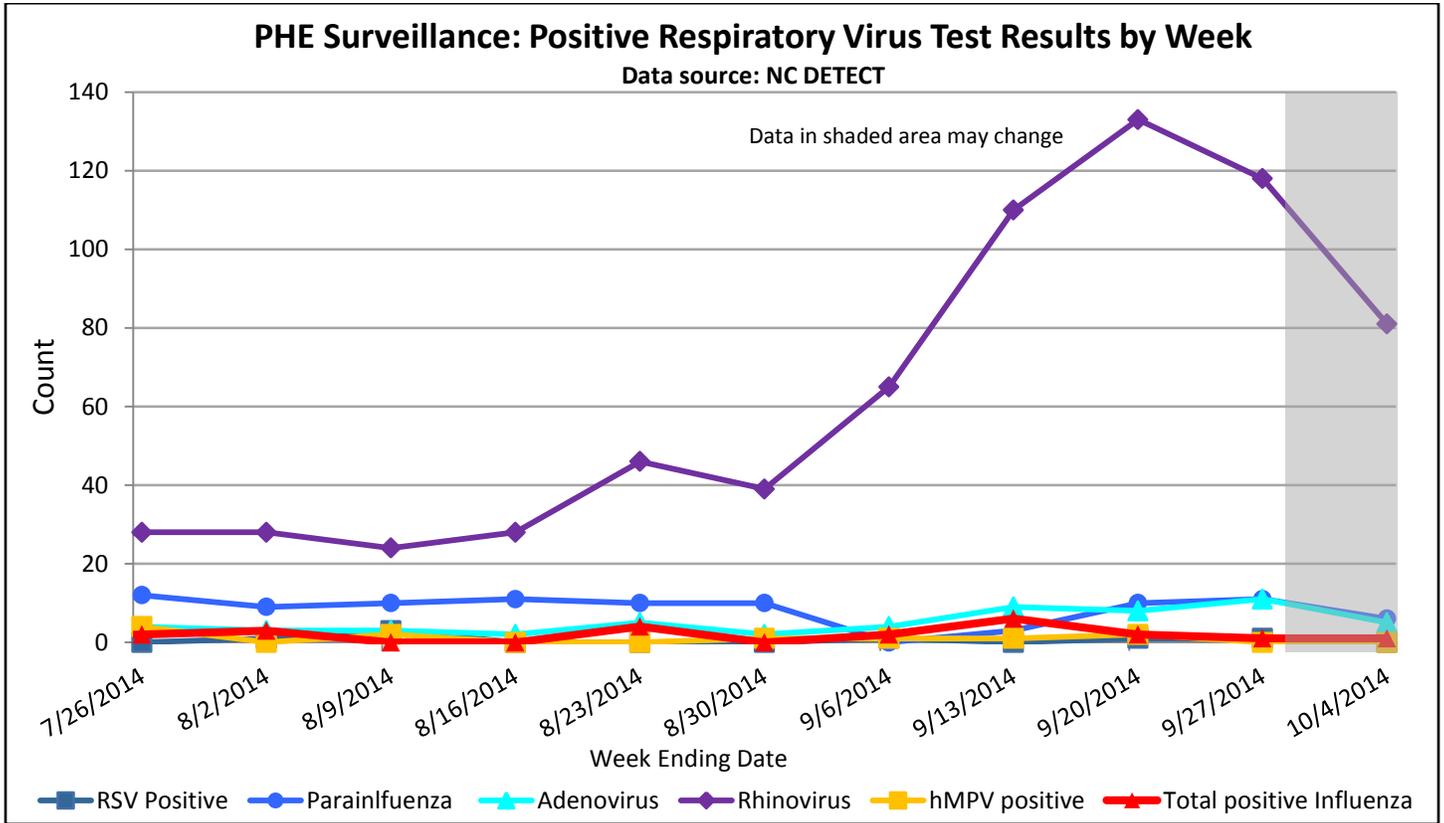
National Updates:

- From mid-August to October 7, 2014, a total of 628 people from 44 states and the District of Columbia were confirmed to have respiratory illness caused by EV-D68.
- Almost all CDC-confirmed cases have been among children. EV-D68 has been detected in specimens from four patients who died. The role that EV-D68 infection played in these deaths is unclear at this time; state and local health departments are continuing to investigate.
- CDC is working with state and local health departments to investigate reports of focal limb weakness occurring in children on or after August 1, 2014. Some of these cases have occurred in children who tested positive for EV-D68 (http://www.cdc.gov/mmwr/preview/mmwrhtml/mm63e1003a1.htm?s_cid=mm63e1003a1_w).
- Health professionals should consider EV-D68 as a cause of severe respiratory illness and also evaluate and report to the state or local public health any patients ≤21 years of age with sudden onset of limb weakness and an MRI showing spinal cord lesions largely restricted to gray matter.

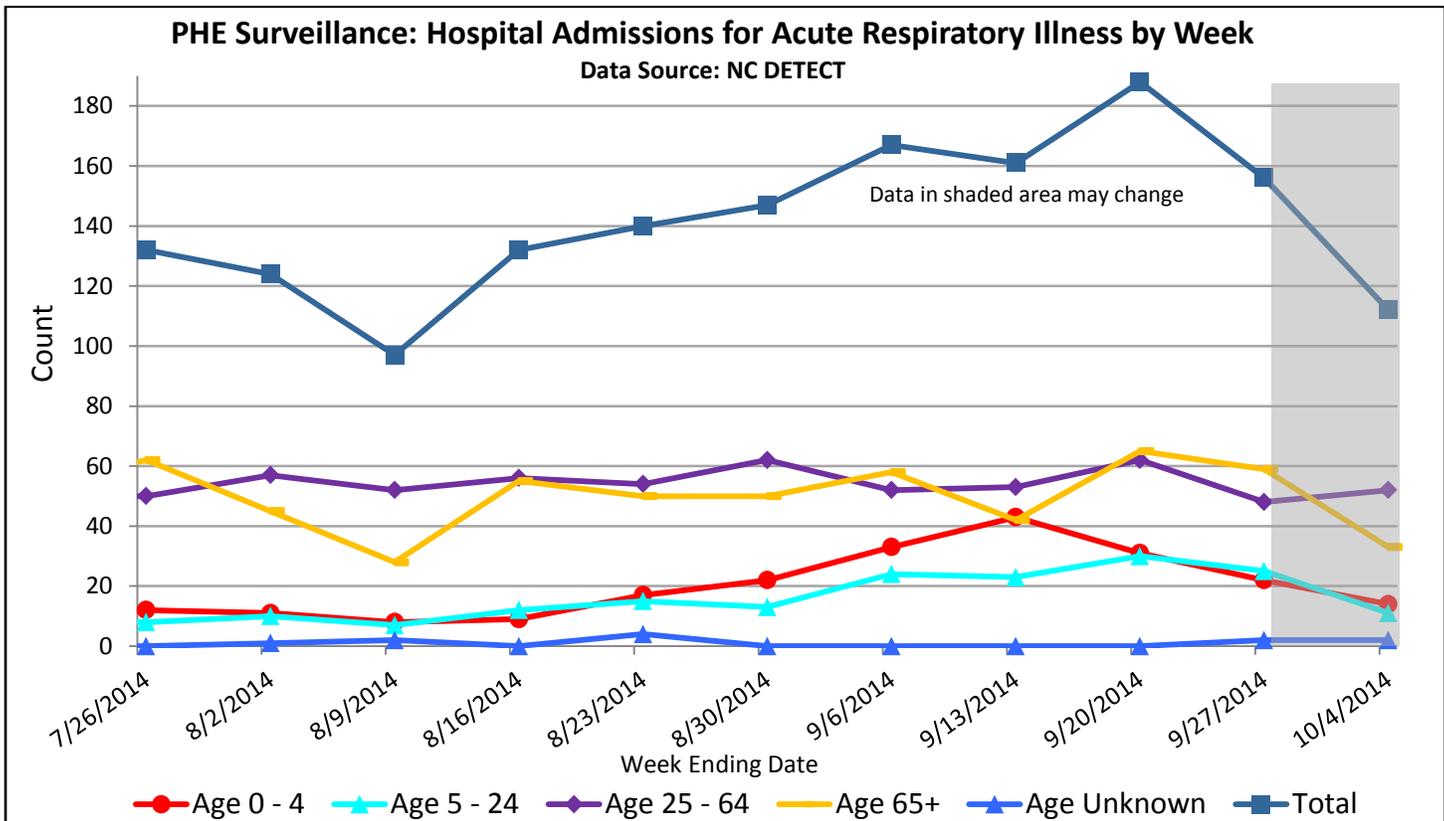
North Carolina Updates:

- Ten cases of EV-D68 infection have been confirmed in North Carolina. All were in children <10 years of age with respiratory illness. These cases were not limited to any particular region of the state.
- One case meeting the criteria established by CDC for their investigation of acute neurologic illness with focal limb weakness was reported from the eastern part of the state. The patient tested positive for rhinovirus/enterovirus by PCR, but EV-D68 infection has not been confirmed.
- DPH continues to monitor syndromic surveillance data, laboratory data, and hospital admission data. A summary is below:
 - Hospital-based Public Health Epidemiologist (PHE) Network (in 7 large NC hospital systems):
 - The number of specimens testing positive for rhinovirus/enterovirus has declined since late September.
 - The weekly number of admissions for acute respiratory illness decreased slightly during the week ending 10/4/2014.
 - State Medical Asset Resource Tracking Tool (SMARTT):
 - The proportion of pediatric ICU beds available in the eastern region of the state has remained low since mid-August compared to the same time period in 2013. However, availability has increased recently in all regions.
 - Hospital Emergency Department visits (from NC Disease Event Tracking and Epidemiologic Collection Tool [DETECT]):
 - ED visits for respiratory illness and asthma among children increased during the past week but remain lower than during early and mid-September.
 - Specimens submitted for EV-D68 testing:
 - Results have been received for 27 specimens submitted through the State Laboratory of Public Health for EV-D68 testing at CDC: 10 positive for EV-D68, 10 positive for rhinovirus, and 7 negative.
- Other activities:
 - DPH has developed and disseminated guidance and information for providers, schools/childcare centers and the public, available at <http://epi.publichealth.nc.gov/cd/diseases/enterovirus.html>.
 - DPH has disseminated information about neurologic illness with focal limb weakness to clinical and public health partners.

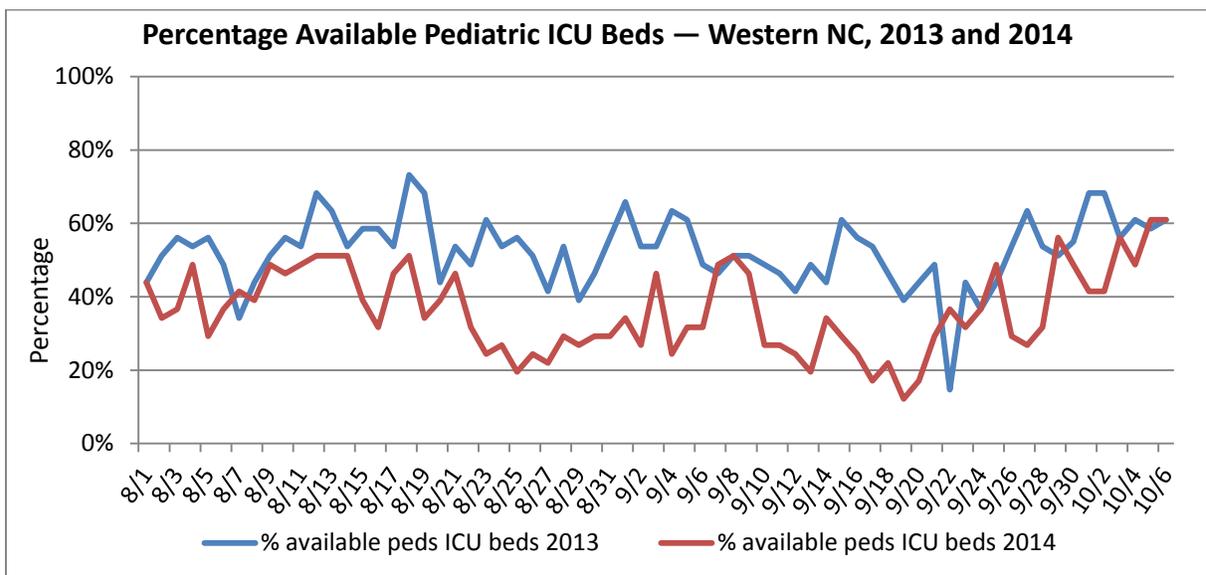
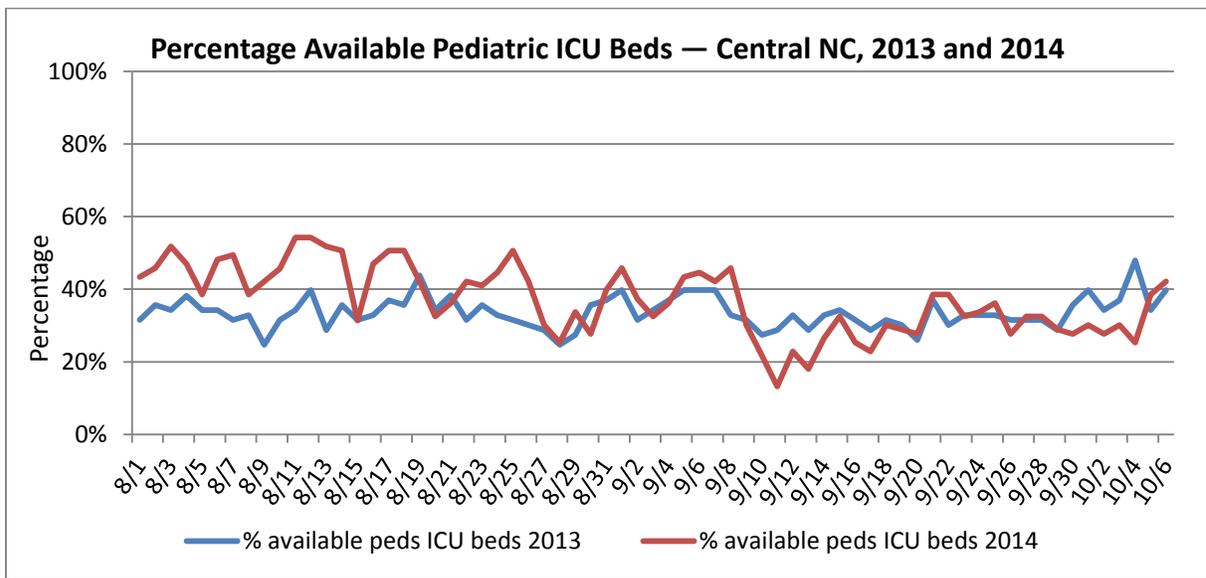
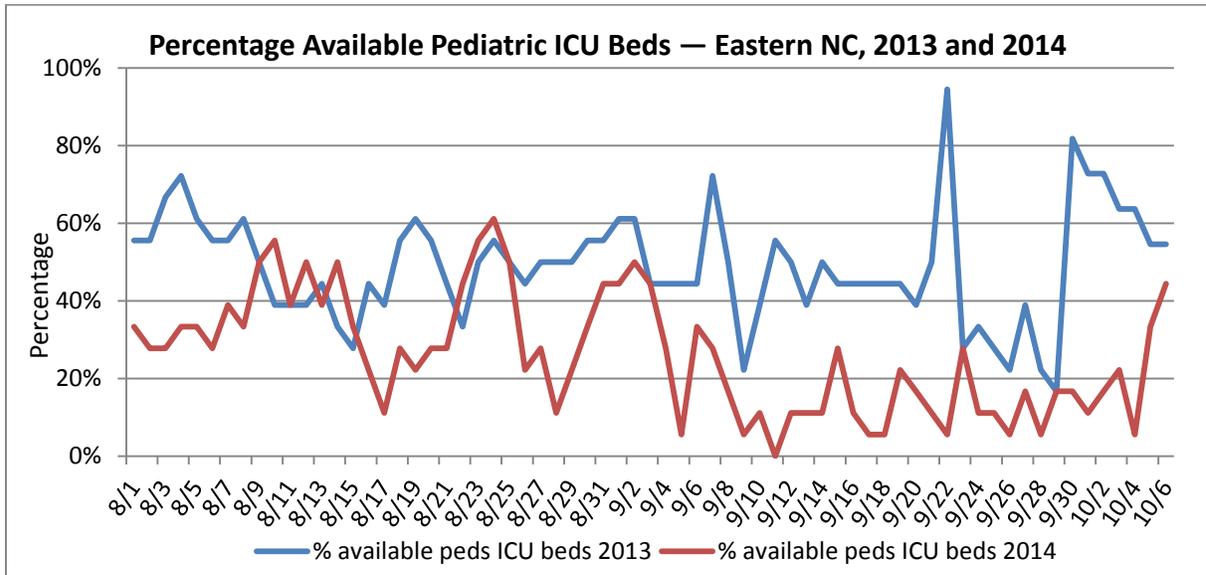
UPDATE FROM HOSPITAL-BASED PUBLIC HEALTH EPIDEMIOLOGIST (PHE) NETWORK



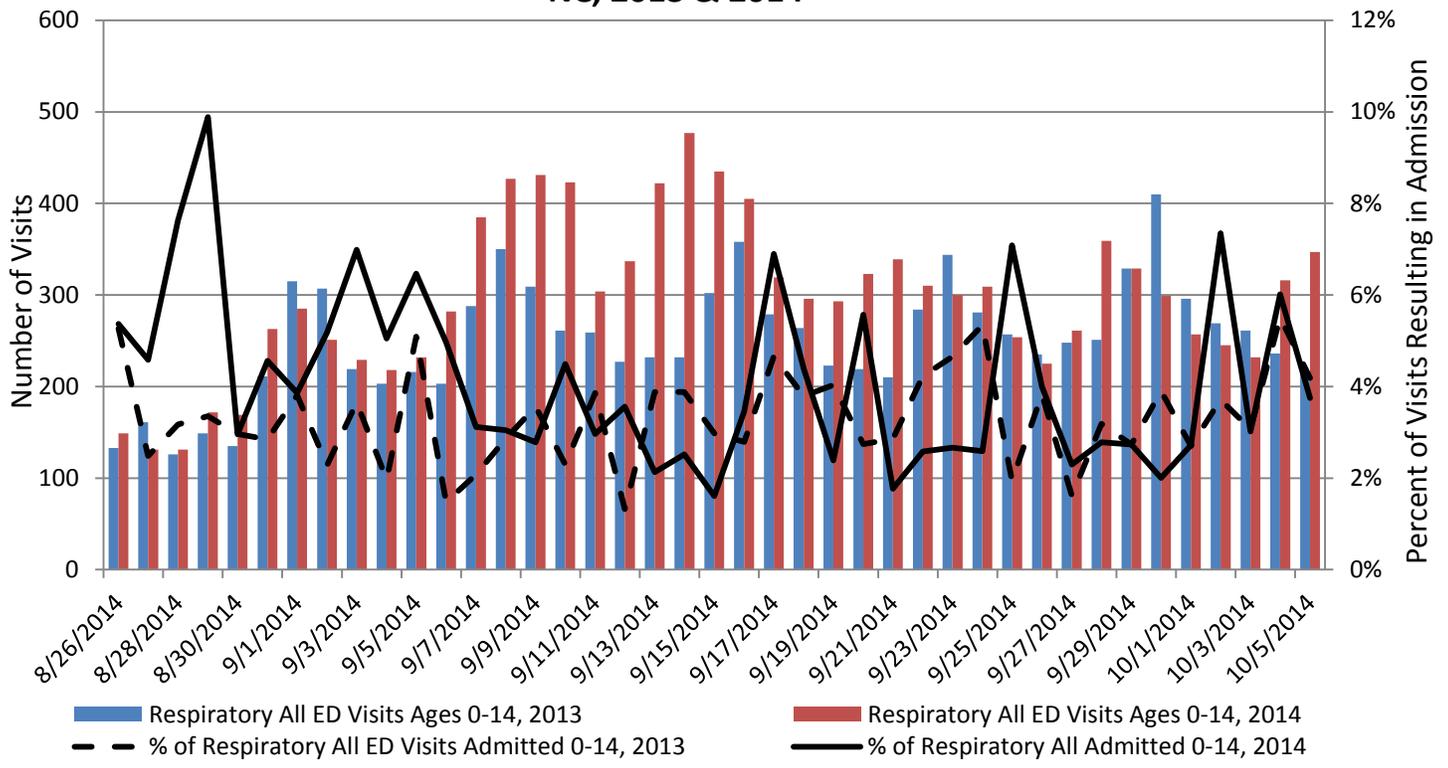
Note: Most facilities use tests that do not distinguish rhinoviruses from enteroviruses



UPDATE FROM STATE MEDICAL ASSET RESOURCE TRACKING TOOL (SMARTT)



Respiratory ED Visits by Children 0–14 years — NC, 2013 & 2014



Asthma ED Visits by Children 0–14 years — NC, 2013 & 2014

