

BACTERIAL CONJUNCTIVITIS (Pink Eye)

Conjunctivitis or pink eye is a common eye condition caused by infection of the eye with certain bacteria. It is observed more frequently December through April and is more common in kids than adults. Pink eye is highly contagious and is the leading cause of children being absent from daycare or school.

SYMPTOMS

- Pink or red color in the white of the eyes
- Swelling of the conjunctiva and/or eyelids
- Increased tear production
- Itching, irritation, and/or burning
- Discharge of pus
- Crusting of eyelids or lashes, especially in the morning

COMMUNICABILITY

Pink eye is highly contagious and is usually spread from an infected person to others through close contact, such as touching or shaking hands. It may also be spread by touching an object or surface with germs on it, then touching your eyes before washing your hands.

TREATMENT

Antibiotic ointment or eye drops are usually given for bacterial conjunctivitis. Antibiotics may help shorten the length of infection, reduce complications and reduce the spread to others. Mild bacterial conjunctivitis may get better without treatment and without causing any complications. It often improves in 2-5 days without treatment but can take up to 2 weeks to go away completely.

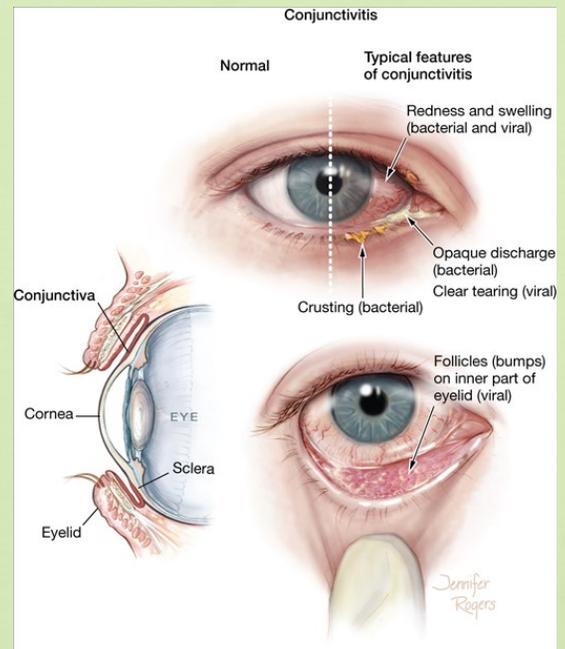
PREVENTION

To reduce the spread of conjunctivitis:

- Wash your hands often with soap and warm water or use a 60% alcohol based hand sanitizer.
- Avoid touching your eyes with unwashed hands
- Do not share items used by an infected person, such as washcloths, pillows or eye drops.

REFERENCE

www.cdc.gov



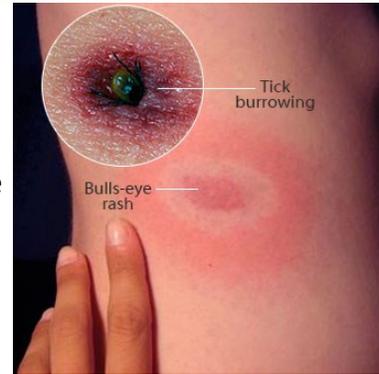
LYME DISEASE

DISEASE

Lyme disease is caused by *Borrelia burgdorferi* bacteria. This bacterium is carried by the blacklegged tick, formerly known as the deer tick. The blacklegged tick spreads the disease in northeastern, mid-Atlantic and north-central US. The western blacklegged tick spreads the disease on the Pacific coast.

SYMPTOMS

Early symptoms, 3-30 days after the tick bite, may include: fever, headache, muscle and joint aches, swollen lymph nodes, fatigue and the characteristic skin rash called erythema migrans (EM) or “bull’s-eye” rash where the bite occurred. EM rash is one of the hallmarks of Lyme disease. The rash appears in 70-80 percent of infected persons. Later symptoms, which can occur months after the bite may include: severe headaches, neck stiffness, additional EM rashes on other parts of the body, arthritis of joints, facial palsy, dizziness, heart palpitations, nerve pain and numbness in hands or feet.



COMMUNICABILITY

In order to contract Lyme disease a person must be bitten by an infected tick. The bacteria enters through the bite and into the bloodstream. Not all blacklegged ticks are infected with the bacteria. Usually an infected tick must be attached more than 36 hours to transmit the bacteria into the host. The Lyme disease bacterium is spread through the bite of an infected tick. Most people are infected by the tick when it is in the nymph stage (2mm in size). Nymphs feed during the spring and summer months. Finding and quickly removing the tick in a nymph stage is very difficult due to its size. Adult ticks are easy to see and easier to remove. Adult ticks are active in the fall of the year. There is no evidence that Lyme disease is transmitted from person to person or from dogs or cats to their owners. Persons with Lyme disease or those being treated for the disease are advised not to donate blood. If you have had Lyme disease and have been successfully treated, don't assume you are immune; you can get Lyme disease more than once.

TREATMENT

The blood test used to detect Lyme disease is the ELISA. If the ELISA is positive, along with a physician documented EM rash, the physician can confirm a diagnosis of Lyme. The Western blot blood test is usually done to confirm the diagnosis. Antibiotics are used to treat Lyme disease and the sooner treatment begins the better.

PREVENTION

The best way to prevent Lyme disease is to avoid areas where ticks live. People spending time in wooded or grassy areas need to cover exposed skin by wearing long sleeves, long pants tucked into socks, shoes, hat and gloves. Spraying clothing with an insect repellent containing a 20 percent or higher level of DEET is advised. Check yourself, children and pets when coming indoors for ticks. Shower as soon as possible as ticks hide in skin folds, arm pits, and groin areas. If you find a tick remove it immediately with tweezers. Gently grasp the tick near its head or mouth. Do not squeeze or crush the tick, but pull carefully and steadily. Once you have removed the entire tick, dispose of it and apply antiseptic to the bite. The longer the tick is attached the greater the possibility of bacteria entering the bloodstream.

REFERENCE

www.cdc.gov www.mayoclinic.org

GENITAL HERPES (HSV)

Genital herpes is a common sexually transmitted disease (STD) that any sexually active person can get. Most people with the virus don't have symptoms. Even without signs of the disease, herpes can still be spread to sex partners. Genital herpes is caused by two types of viruses. The viruses are called herpes simplex virus type 1 (HSV-1) and herpes simplex virus type 2 (HSV-2).

SYMPTOMS

No symptoms or very mild symptoms.

May be mistaken for another skin condition, such as a pimple or ingrown hair.

Herpes sores usually appear as one or more blisters on or around the genitals, rectum or mouth. The blisters break and leave painful sores that may take a week or more to heal. These symptoms are sometimes called "having an outbreak." The first time someone has an outbreak they may also have flu-like symptoms such as fever, body aches or swollen glands.

COMMUNICABILITY

A person can get genital herpes by having vaginal, anal or oral sex with someone who has the disease. If a person does not have herpes, they can get infected if they come into contact with the herpes virus in: A herpes sore; saliva (if a partner has an oral herpes infection) or genital secretions (if a partner has a genital herpes infection), skin in the oral area if a partner has an oral herpes infection, or skin in the genital area if a partner has a genital herpes infection. A person **will not** get herpes from toilet seats, bedding, swimming pools or from touching objects around such as silverware, soap or towels.

TREATMENT

There is no cure for herpes, however, there are medicines that can prevent or shorten outbreaks. If one of these anti-herpes medicines is taken daily, it will lessen the possibility of that person passing the infection on to their sex partner(s).

PREVENTION

If a person is sexually active, they can do the following things to lower their chances of getting genital herpes:

- Be in a long-term mutually monogamous relationship with a partner who is not infected with an STD (e.g., a partner who has been tested and has negative STD test results)
- Use latex condoms the right way(<https://www.cdc.gov/condomeffectiveness/male-condom-use.html>) everytime there is a sexual encounter.
- Be aware that not all herpes sores occur in areas that are covered by a latex condom
- A partner takes an anti-herpes medication every day. This is something the partner should discuss with his or her doctor
- Avoid having vaginal, anal or oral sex when a partner has herpes symptoms (i.e., when a partner is having an outbreak).

REFERENCE

www.cdc.gov



**COMMUNICABLE DISEASE
REPORTED FOR SAGINAW COUNTY
FOR THE QUARTER
07/01/2017-09/30/2017**

Disease	No. Reported
AIDS, AGGREGATE	0
ANIMAL BITE	66
CAMPYLOBACTER	10
CHIKUNGUNYA	0
CHLAMYDIA (Genital)	388
CRYPTOSPORIDIOSIS	5
FLU LIKE DISEASE	446
GASTROINTESTINAL ILLNESS	203
GIARDIASIS	11
GONORRHEA	103
HEAD LICE	15
HEPATITIS B ACUTE	0
HEPATITIS B CHRONIC	4
HEPATITIS C ACUTE	0
HEPATITIS C CHRONIC	29
INFLUENZA	0
LEGIONELLOSIS	4
MENINGITIS-ASEPTIC	7
MENINGITIS-BACTERIAL OTHER	0
MUMPS	0
PERTUSSIS	2
RABIES-ANIMAL	0
SALMONELLOSIS	7
SHIGELLOSIS	0
SHINGLES	1
STREP THROAT	75
STREPTOCOCCUS PNEUMONIA, INVASIVE	0
SYPHILLIS-LATE LATENT	0
TUBERCULOSIS	0
VZ INFECTION, UNSPECIFIED	0
YERSINIA ENTERITIS	1
ZIKA	0

**COMMUNICABLE DISEASE YTD
REPORTED FOR SAGINAW COUNTY**

01/01/2017-09/30/2017

Disease	No. Reported
AIDS, AGGREGATE	0
ANIMAL BITE	159
CAMPYLOBACTER	17
CHIKUNGUNYA	0
CHLAMYDIA (Genital)	998
CRYPTOSPORIDIOSIS	11
FLU LIKE DISEASE	6064
GASTROINTESTINAL ILLNESS	4737
GIARDIASIS	19
GONORRHEA	285
HEAD LICE	93
HEPATITIS B ACUTE	0
HEPATITIS B CHRONIC	9
HEPATITIS C ACUTE	0
HEPATITIS C CHRONIC	85
INFLUENZA	1182
LEGIONELLOSIS	5
MENINGITIS-ASEPTIC	8
MENINGITIS-BACTERIAL OTHER	2
MUMPS	0
PERTUSSIS	3
RABIES-ANIMAL	0
SALMONELLOSIS	14
SHIGELLOSIS	0
SHINGLES	5
STREP THROAT	318
STREPTOCOCCUS PNEUMONIA, INVASIVE	0
SYPHILLIS-LATE LATENT	1
TUBERCULOSIS	0
VZ INFECTION, UNSPECIFIED	2
YERSINIA ENTERITIS	3
ZIKA	0



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Please visit our website at www.saginawpublichealth.org

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