

Hamilton County Public Health - Epidemiology and Assessment Chlamydia and Gonorrhea Quarterly Report

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Chlamydia Infections by Month (2013-2014)

Table 1. Chlamydia Cases by Month for HamiltonCounty Residents

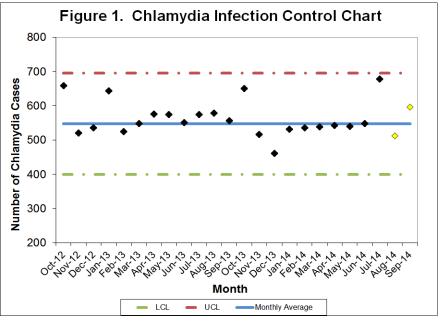
Month	Cases of Chlamydia 2013	Cases of Chlamydia 2014	
January	644	531	
February	524	536	
March	548	538	
April	576	542	
May	575	540	
June	551	548	
July	574	678	
August	579	512	
September	556	595	
October	651		
November	516		
December	461		
Total	6,755	5,020	

This report was created as a surveillance effort to help prevent new cases of chlamydia and gonorrhea within Hamilton County. Table 1 displays the breakdown of chlamydia cases for Hamilton County residents from 2013 and 2014 on a monthly basis. Only chlamydia cases that have been reported to the CDC were counted for analysis purposes in this report. In 2013, the highest number of chlamydia cases was seen in October (651 cases). In 2014, the highest number of chlamydia cases occurred in July (678 cases). The average number of chlamydia cases per month were 562.9 and 557.8 for January - December 2013 and January - September 2014, respectively. 107 fewer cases of chlamydia were reported in Q3 of 2014 compared to Q3 of 2013. Subsequent reports will allow for a more thorough comparison of 2013 and 2014 cases.

Chlamydia cases are derived from data in the Ohio Disease Reporting System and represent only those cases reported to the CDC. These data are provisional and subject to change when additional data are reported. Cases are selected based on address at diagnosis. Source: Ohio Department of Health (ODH), STD Surveillance. Data reported as of 1/11/2015.

Surveillance of Chlamydia Cases in Hamilton County

One way to monitor chlamydia infections within Hamilton County is through the use of surveillance control charts. Factors that these control charts show are the number of chlamydia cases for each month (black diamonds), control limits (red or green dashed lines), and the average number of cases (solid blue line). Control charts are used to detect unexpected events, such as a single point outside of the control limit, consecutive points above or below the average line, or two or three consecutive points near a control limit. When anomalies such as these occur it may be beneficial to examine events surrounding the anomalies in order to devise a strategy to reduce the number of cases in subsequent months or see which strategies already in place are working. Figure 1 shows the control chart for chlamydia infections from October 2012 to September 2014. All of the months in this time frame fell below the upper control limit for number of infections. The average number of cases was calculated from July 2013 to June 2014 (547.7).

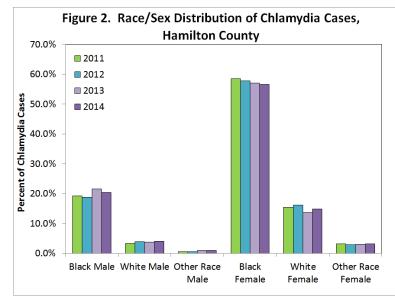


Chlamydia cases are derived from data in the Ohio Disease Reporting System and represent only those cases reported to the CDC. These data are provisional and subject to change when additional information is reported. Cases are selected based on address at diagnosis. Source: Ohio Department of Health, STD Surveillance. Data reported as of 1/11/2015.



Demographics with High Risk for Chlamydia Infection

Individuals with certain demographics are more likely to be infected with chlamydia. Table 2 shows the percentage of chlamydia cases from 2013 and 2014 based on race, age and sex. Over 75 percent of the chlamydia cases from 2013 and 2014 occurred among black Hamilton County residents. Nearly 7 of 10 chlamydia cases were between the ages of 15-24. The majority of diagnosed cases in 2013 and 2014 were among female Hamilton County residents. Identifying these aforementioned at-risk groups allows public health and health care the opportunity to create specific intervention methods for preventing the spread of chlamydia. Figure 2 further classifies the differences among race/sex groups from 2011 to 2014. The demographics from 2011 to 2014 are very similar with only slight changes in each group.



Gonorrhea Infections by Month (2013-2014)

Table 3. Gonorrhea Cases by Month for HamiltonCounty Residents

Month	Cases of Gonorrhea 2013	Cases of Gonorrhea 2014	
January	252	203	
February	201	154	
March	189	148	
April	206	169	
Мау	195	151	
June	194	176	
July	221	242	
August	195	223	
September	221	247	
October	196		
November	176		
December	162		
Total	2,408	1,713	

Table 2. Demographics of Chlamydia Cases						
	2013		2014			
	#	%	#	%		
Race						
Black	3343	78.5	2448	77.0		
White	744	17.5	601	18.9		
Other	172	4.0	114	4.2		
Age						
<1	27	0.4	3	0.1		
1-14	188	2.8	106	2.1		
15-24	4730	70.0	3501	69.7		
25-34	1428	21.1	1122	22.4		
35-44	267	4.0	211	4.2		
45-54	85	1.3	52	1.0		
55-64	27	0.4	21	0.4		
>65	3	<0.1	4	0.1		
Sex						
Male	1886	27.9	1360	27.1		
Female	4869	72.1	3660	72.9		

These data are provisional and subject to change when additional data are reported. Chlamydia cases between January 2013 and September 2014 were used for analysis. Cases were selected based on address at diagnosis. Source: Ohio Department of Health, STD Surveillance. Data reported as of 1/11/2015. Percentages may not total to 100 percent due to rounding. Percentages for demographics are based only on cases that had valid information within the required fields.

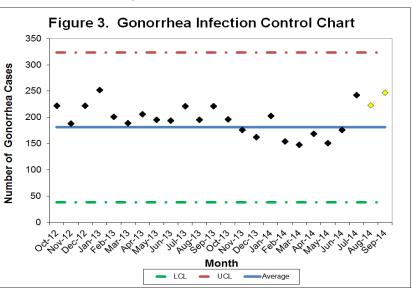
Table 3 displays the breakdown of gonorrhea cases for Hamilton County residents from 2013 and 2014 on a monthly basis. Only gonorrhea cases that have been reported to the CDC were counted for analysis purposes in this report. In 2013, the highest number of gonorrhea cases was seen in January (252 cases). In 2014, the highest number of gonorrhea cases occurred in September (247 cases). The average number of gonorrhea cases per month were 200.7 and 190.3 for January - December 2013 and January - September 2014, respectively. An additional 161 cases of gonorrhea were reported in Q3 of 2013 compared to Q3 of 2014. Subsequent reports will allow for a more thorough comparison of 2013 and 2014 cases as data are subject to change as more information is gained.

Gonorrhea cases are derived from data in the Ohio Disease Reporting System and represent only those cases reported to the CDC. These data are provisional and subject to change when additional data are reported. Cases are selected based on address at diagnosis. Source: Ohio Department of Health (ODH), STD Surveillance. Data reported as of 1/11/2015.



Surveillance of Gonorrhea Cases in Hamilton County

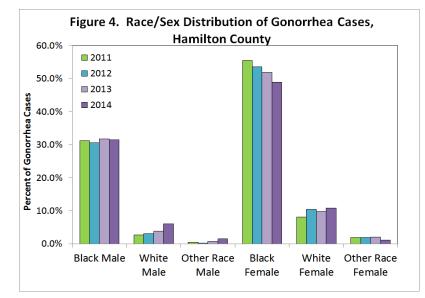
One way to monitor gonorrhea infections within Hamilton County is through the use of surveillance control charts. Factors that these control charts show are the number of gonorrhea cases for each month (black diamonds), control limits (red or green dashed lines), and the average number of cases (solid blue line). Control charts are used to detect unexpected events, such as a single point outside of the control limit, consecutive points above or below the average line, or two or three consecutive points near a control limit. When anomalies such as these occur it may be beneficial to examine events surrounding the anomalies in order to devise a strategy to reduce the number of cases in subsequent months or see which strategies already in place are working. Figure 3 illustrates the control chart for gonorrhea infections from October 2012 to September 2014. All of the months within this time frame fell below the upper control limit for number of gonorrhea infections. The average number of cases was calculated from July 2013 to June 2014 (181.0).



Gonorrhea cases are derived from data in the Ohio Disease Reporting System and represent only those cases reported to the CDC. These data are provisional and subject to change when additional information is reported. Cases are selected based on address at diagnosis. Source: Ohio Department of Health, STD Surveillance. Data reported as of 1/11/2015.

Demographics with High Risk for Gonorrhea Infection

Individuals with certain demographics are more likely to be infected with gonorrhea. Table 4 shows the percentage of gonorrhea cases from 2013 and 2014 based on race, age and sex. Over 80 percent of the gonorrhea cases from 2013 and 2014 occurred among black Hamilton County residents. Nearly 6 of 10 gonorrhea cases were between the ages of 15-24. Identifying these aforementioned at-risk groups allows public health and health care the opportunity to create specific intervention methods for preventing the spread of gonorrhea. Figure 4 further classifies the differences among race/sex groups from 2011 to 2014. The percent of cases attributed to black female residents has decreased while the percent attributed to white residents has increased since 2011.



	emographics of Go 2013		2014	
	#	%	#	%
Race				
Black	1395	83.6	971	80.5
White	228	13.7	203	16.8
Other	46	2.7	21	2.8
Age				
<1	18	0.7	2	0.1
1-14	38	1.6	31	1.8
15-24	1408	58.5	1042	60.8
25-34	651	27.0	403	23.5
35-44	176	7.3	141	8.2
45-54	76	3.2	61	3.6
55-64	37	1.5	29	1.7
>65	4	0.2	4	0.2
Sex				
Male	991	41.2	738	43.1
Female	1417	58.8	975	56.9

These data are provisional and subject to change when additional data are reported. Gonorrhea cases between January 2013 and September 2014 were used for analysis. Cases were selected based on address at diagnosis. Source: Ohio Department of Health, STD Surveillance. Data reported as of 1/11/2015. Percentages may not total to 100 percent due to rounding. Percentages for demographics are based only on cases that had valid information within the required fields