

Moore Epi - Notes

A quarterly newsletter for healthcare providers in Moore County



Tick- and mosquito-borne infections are common in North Carolina. More than 790 cases of domestically acquired and travel-associated tick- and mosquito-borne diseases were reported in 2015, including Rocky Mountain Spotted Fever, Lyme disease, LaCrosse encephalitis and West Nile virus.

The first travel-associated case of Zika virus in North Carolina was reported in February 2016. These diseases are diagnosed across the state and can be acquired at any time throughout the year, but the majority of infections occur from June to September.

"Tip and Toss" is the message officials are sharing during April's Tick and Mosquito Borne Disease Awareness Month, encouraging individuals to protect themselves by eliminating mosquito breeding areas and taking preventive measures to reduce the likelihood of mosquito and tick bites.

To learn more about the "Tip and Toss" campaign, visit ncdhhs.gov

Antibiotic-Resistant Gonorrhea

Gonorrhea has increasingly developed resistance to the antibiotics prescribed to treat it.

Antibiotics such as sulfonamides, penicillin, tetracycline, and fluoroquinolones, such as ciprofloxacin. We are currently down to one last effective class of antibiotics, cephalosporins, to treat this common infection.

The CDC's 2015 STD Treatment Guidelines recommend only one regimen of dual therapy for the treatment of gonorrhea—the injectable cephalosporin ceftriaxone, plus oral azithromycin. Dual therapy is recommended to address the potential emergence of gonococcal cephalosporin resistance.

Recently, the CDC has reported a cluster of gonococcal isolates with decreased susceptibilities to multiple antibiotics, including the recommended first-line therapy (Ceftriaxone and azithromycin).

Please notify the Health Department CD Nurse immediately if you have gonorrhea isolates with unusual antimicrobial susceptibility testing (AST) profiles or gonorrhea infections concerning for treatment failure.

Confirmed Reportable Cases

The following confirmed/probable cases of disease were reported by Moore during the 2nd quarter of 2016

Chlamydia: 34	Syphilis: 5
Gonorrhea: 10	NGU: 2
Hepatitis B, Chronic: 1	Legionellosis: 1
Hepatitis B, Acute: 1	Shigellosis: 1
TB, Latent: 6	Salmonella: 2
Campylobacter: 2	
E. Coli shiga-toxin producing: 1	
Brucellosis, probable: 1	
Rocky Mountain Spotted Fever, Probable: 5	

Moore County Health Department:
910-947-3300

Confidential fax:
910-947-2480

Communicable Disease Nurse fax:
910-947-2480

After Hours/Weekend Reporting:
910-947-2911 (Ask to have the Health Director or his designee paged.)

Please remember to report communicable diseases to the Health Department. Accurate reporting helps to stop the spread of disease and helps us to gain knowledge about the health of our community.

Moore County Health Department is committed to ensuring county healthcare providers access to countywide disease data summaries to inform patient care.