

VARICELLA

Varicella, commonly known as chickenpox, is a very contagious illness caused by the varicella-zoster virus (VZV), a member of the herpesvirus group. Symptoms, including fever and an itchy, generalized rash, usually begin 14-16 days after exposure. The rash often begins a day or two after onset of fever and progresses from maculopapular to vesicular to crusted over within a few days. Lesions from all stages of development are often present at the same time, with total recovery usually within a week.

Transmission is person-to-person through direct contact with lesions or respiratory secretions, or through aerosolization of vesicular fluid. Persons are communicable from one to two days prior to symptom onset until all lesions are crusted over.

Recovery from primary varicella infection usually confers lifetime immunity, especially among otherwise healthy persons. However, the virus can persist in the body as a latent infection, which may be reactivated later as herpes zoster (shingles). Those at [high risk for more severe disease](#), including complications, are infants, pregnant women, and immunocompromised persons.

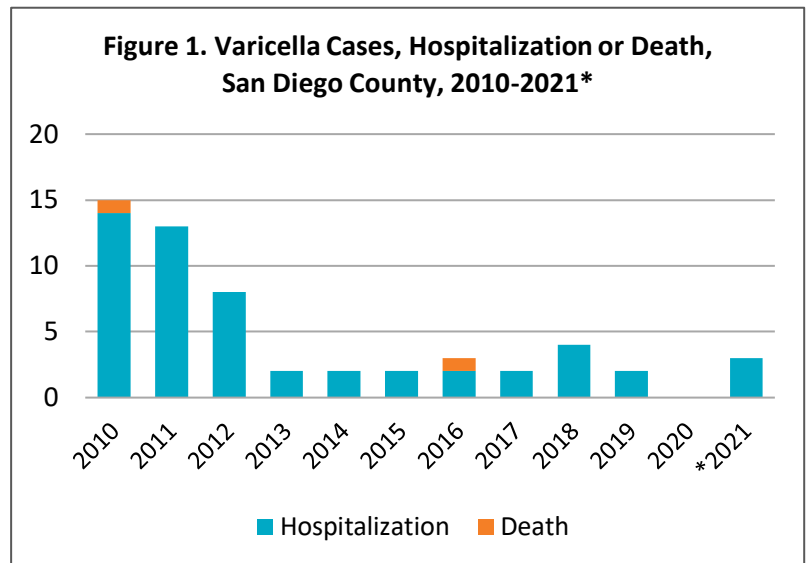
Prior to the introduction of a highly effective vaccine in 1995, varicella infection was a nearly universal childhood disease in the United States, with nearly 80% of all cases occurring in children aged 1-9. Varicella morbidity has declined by over 90% with routine childhood vaccination, according to the Centers for Disease Control and Prevention (CDC). [Breakthrough varicella](#) infection can occur among the vaccinated, but usually causes mild illness, which makes it increasingly difficult to diagnose on the basis of clinical symptoms alone.

Varicella infection is not reportable in all states, so national numbers are not complete. However, in 2019, 8,297 cases were reported to CDC. In California, only infections resulting in hospitalization or death are reportable. Outbreaks of varicella are also reportable in California. Between 2014-2018, there were 233 varicella hospitalizations and six varicella deaths in California. During the same period in San Diego County, there were 13 hospitalizations and one death.

Resources

- [Centers for Disease Control and Prevention \(CDC\) Chickenpox \(Varicella\) website](#)
- [Epidemiology and Prevention of Vaccine-Preventable Diseases \(the Pink Book\) – Varicella](#)
- [Varicella ACIP Vaccine Recommendations website](#)
- [California Department of Public Health \(CDPH\) Varicella \(Chickenpox\) website](#)
- [CDPH Varicella Quicksheet for investigation and post-exposure prophylaxis management](#)

Despite the successes, challenges remain. Although less common, infections, including those causing severe outcomes, still occur, particularly in unvaccinated populations. Because varicella is so contagious, it can quickly spread in settings where people are in close proximity, such as schools, jails, shelters, and healthcare settings. Between 2016-2021, six outbreaks were reported in San Diego County, all in schools or childcare settings. In 2018-2019, a varicella outbreak occurred among migrants presenting at the Mexico-California border.



*2021 data are year-to-date; current as of 10/15/2021. Data are provisional and subject to change as additional information becomes available. Grouped by CDC disease years. Varicella cases are only reportable in California when there is a hospitalization or death. Outbreaks are also reportable.

The Monthly Communicable Disease Surveillance Report is a publication of the County of San Diego Public Health Services Epidemiology and Immunization Services Branch (EISB). EISB works to identify, investigate, register, and evaluate communicable, reportable, and emerging diseases and conditions to protect the health of the community. The purpose of this report is to present trends in communicable disease in San Diego County. To subscribe to this report, visit the [Statistics and Reports](#) page on the Epidemiology Program website (www.sdepi.org) and click on the subscribe link.

MONTHLY COMMUNICABLE DISEASE REPORT

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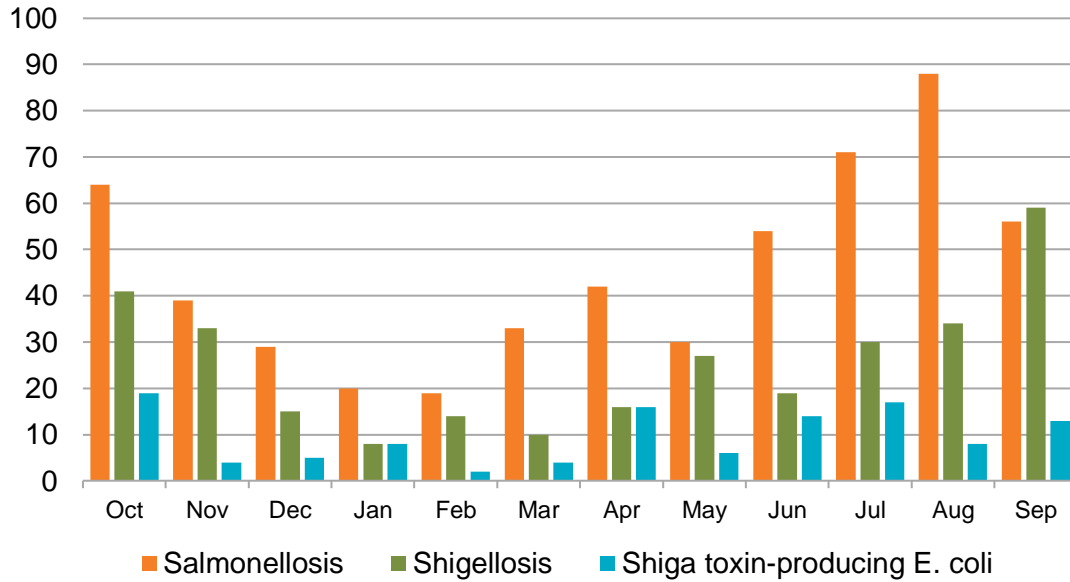


Table 2. Select Reportable Diseases		2021			Prior Years		
		Current Month	Prior Month	Year-to-Date (YTD)	2020 YTD	Avg YTD, Prior 3 Years	2020 Total
Disease and Case Inclusion Criteria (C,P,S)							
Botulism (Foodborne, Infant, Wound, Other)	C,P	0	0	1	0	3.3	2
Brucellosis	C,P	0	0	2	0	1.0	0
Campylobacteriosis	C,P	68	97	679	517	661.3	646
Chickenpox, Hospitalization or Death	C,P	0	0	3	0	0.7	0
Chikungunya	C,P	0	0	0	1	3.0	1
Coccidioidomycosis	C	0	0	224	392	303.7	540
Cryptosporidiosis	C,P	8	6	38	28	57.7	29
Dengue Virus Infection	C,P	0	0	1	5	9.3	5
Encephalitis, All	C	0	0	21	26	33.3	35
Giardiasis	C,P	14	16	110	113	161.0	146
Hepatitis A, Acute	C	1	1	9	13	18.3	15
Hepatitis B, Acute	C	1	0	12	6	6.0	8
Hepatitis B, Chronic	C,P	92	83	647	498	615.7	656
Hepatitis C, Acute	C,P	0	7	45	24	29.3	25
Hepatitis C, Chronic	C,P	160	256	2,441	2,907	3,156.7	3,826
Legionellosis	C	4	2	38	29	38.7	49
Listeriosis	C	1	1	5	13	12.0	21
Lyme Disease	C,P	0	0	3	5	7.0	6
Malaria	C	0	0	5	6	6.0	7
Measles (Rubeola)	C	0	0	0	0	0.7	0
Meningitis, Aseptic/Viral	C,P,S	1	2	30	55	103.3	73
Meningitis, Bacterial	C,P,S	2	0	14	19	25.7	20
Meningitis, Other/Unknown	C	0	1	9	26	22.0	28
Meningococcal Disease	C,P	0	0	1	4	6.7	4
Mumps	C,P	0	0	1	16	21.7	16
Pertussis	C,P,S	4	6	38	214	425.3	220
Rabies, Animal	C	0	1	4	6	6.0	8
Rocky Mountain Spotted Fever	C,P	0	0	2	3	1.7	3
Salmonellosis (Non-Typhoid/Non-Paratyphoid)	C,P	56	88	413	357	498.7	489
Shiga toxin-Producing <i>E. coli</i> (including O157)	C,P	13	8	88	80	136.0	108
Shigellosis	C,P	59	34	217	151	237.3	240
Typhoid Fever	C,P	0	1	9	4	4.0	4
Vibriosis	C,P	6	13	45	28	41.3	39
West Nile Virus Infection	C,P	1	1	2	1	1.7	1
Yersiniosis	C,P	1	2	17	23	27.3	29
Zika Virus	C,P	0	0	0	0	4.3	0

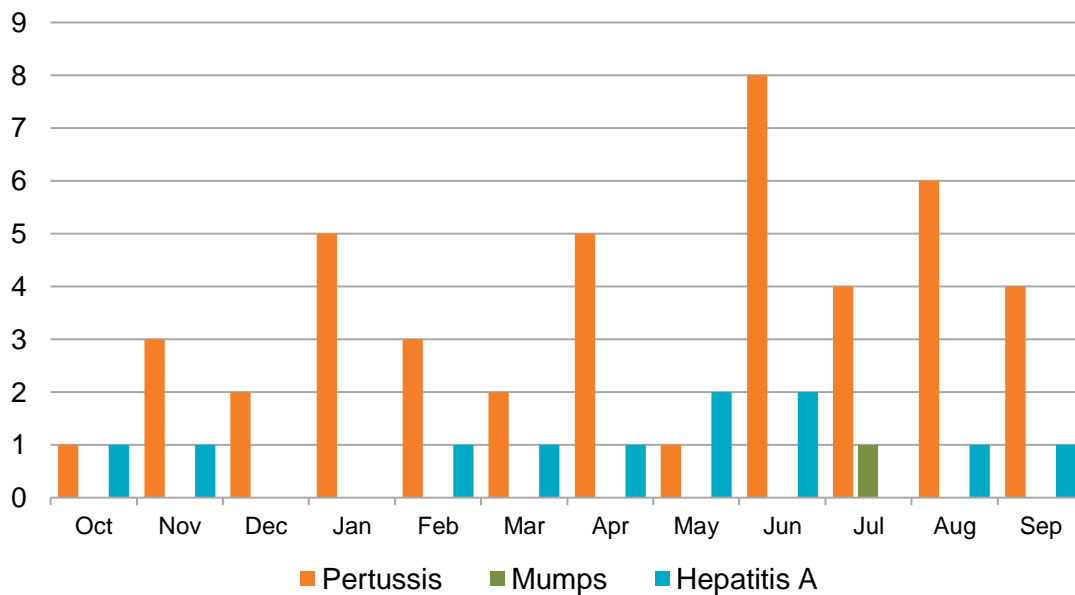
Case counts are provisional and subject to change as additional information becomes available. Cases are grouped into calendar months and calendar years on the basis of the earliest of the following dates: onset, lab specimen collection, diagnosis, death, and report received. Counts may differ from previously or subsequently reported counts due to differences in inclusion or grouping criteria, late reporting, or updated case information. Inclusion criteria (C,P,S = Confirmed, Probable, Suspect) based on Council of State and Territorial Epidemiologists/Centers for Disease Control and Prevention (CSTE/CDC) surveillance case criteria.



**Figure 2. Select Enteric Infections by Month
October 2020 – September 2021**

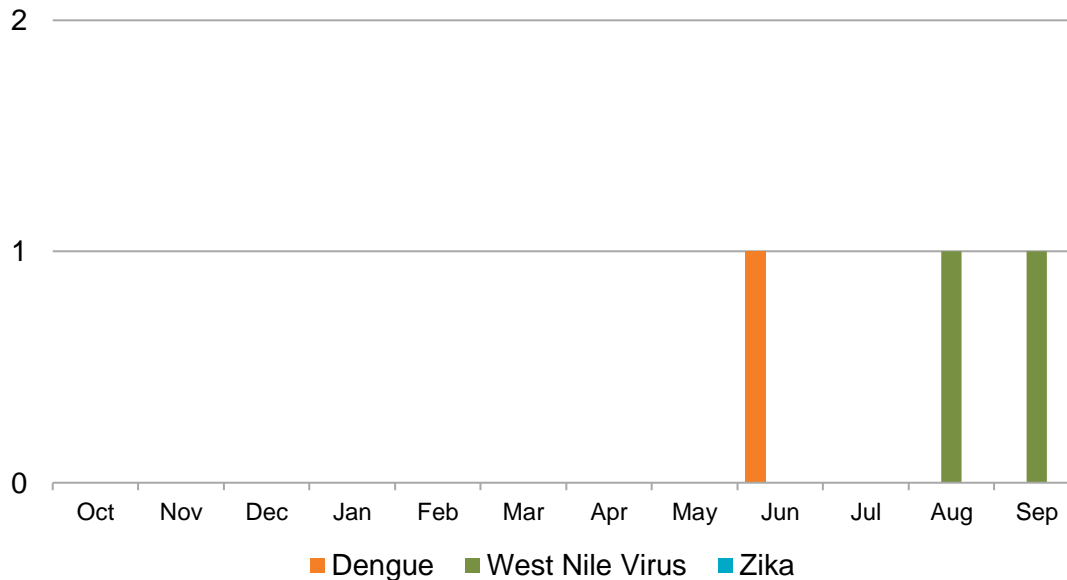


**Figure 3. Select Vaccine-Preventable Infections by Month
October 2020 – September 2021**



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**Figure 4. Select Vector-Borne Infections by Month
October 2020 – September 2021**



All of the dengue and Zika virus cases are travel-associated. For additional information on Zika cases, see the [HHS Zika Virus webpage](#). For more information on West Nile virus, see the [County West Nile virus webpage](#). **Case counts are provisional and subject to change as additional information becomes available.** Cases are grouped into calendar months and calendar years on the basis of the earliest of the following dates: onset, lab specimen collection, diagnosis, death, and report received. Counts may differ from previously or subsequently reported counts due to differences in inclusion or grouping criteria, late reporting, or updated case information. Inclusion criteria (C,P,S = Confirmed, Probable, Suspect) based on Council of State and Territorial Epidemiologists/Centers for Disease Control and Prevention (CSTE/CDC) surveillance case criteria.

Disease Reporting in San Diego County

San Diego County communicable disease surveillance is a collaborative effort among Public Health Services, hospitals, medical providers, laboratories, and the [San Diego Health Connect](#) Health Information Exchange (HIE). The data presented in this report are the result of this effort.

Reporting is crucial for disease surveillance and detection of disease outbreaks. Under the California Code of Regulations, Title 17 (Sections [2500](#), [2505](#), and [2508](#)), public health professionals, medical providers, laboratories, schools, and others are mandated to report more than 80 diseases or conditions to San Diego County Health and Human Services Agency.

To report a communicable disease, contact the Epidemiology Program by phone at (619) 692-8499 or download and print a Confidential Morbidity Report form and fax it to (858) 715-6458. For urgent matters on evenings, weekends or holidays, dial (858) 565-5255 and ask for the Epidemiology Program duty officer. For more information, including a complete list of reportable diseases and conditions in California, visit the Epidemiology Program website, www.sdepi.org.

Tuberculosis, sexually transmitted infections, and HIV disease are covered by other programs within Public Health Services. For information about reporting and data related to these conditions, search for the relevant program on the Public Health Services website, <http://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs.html>.