Georgia EIP: A Collaboration Among

*Centers for Disease Control and Prevention (CDC)
*Georgia Department of Public Health (DPH)
*Emory University School of Medicine
*Atlanta VA Medical Center

CDC
CENTERS FOR DISEASE CONTROL AND PREVENTION

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MMWR

Recommendations and Reports

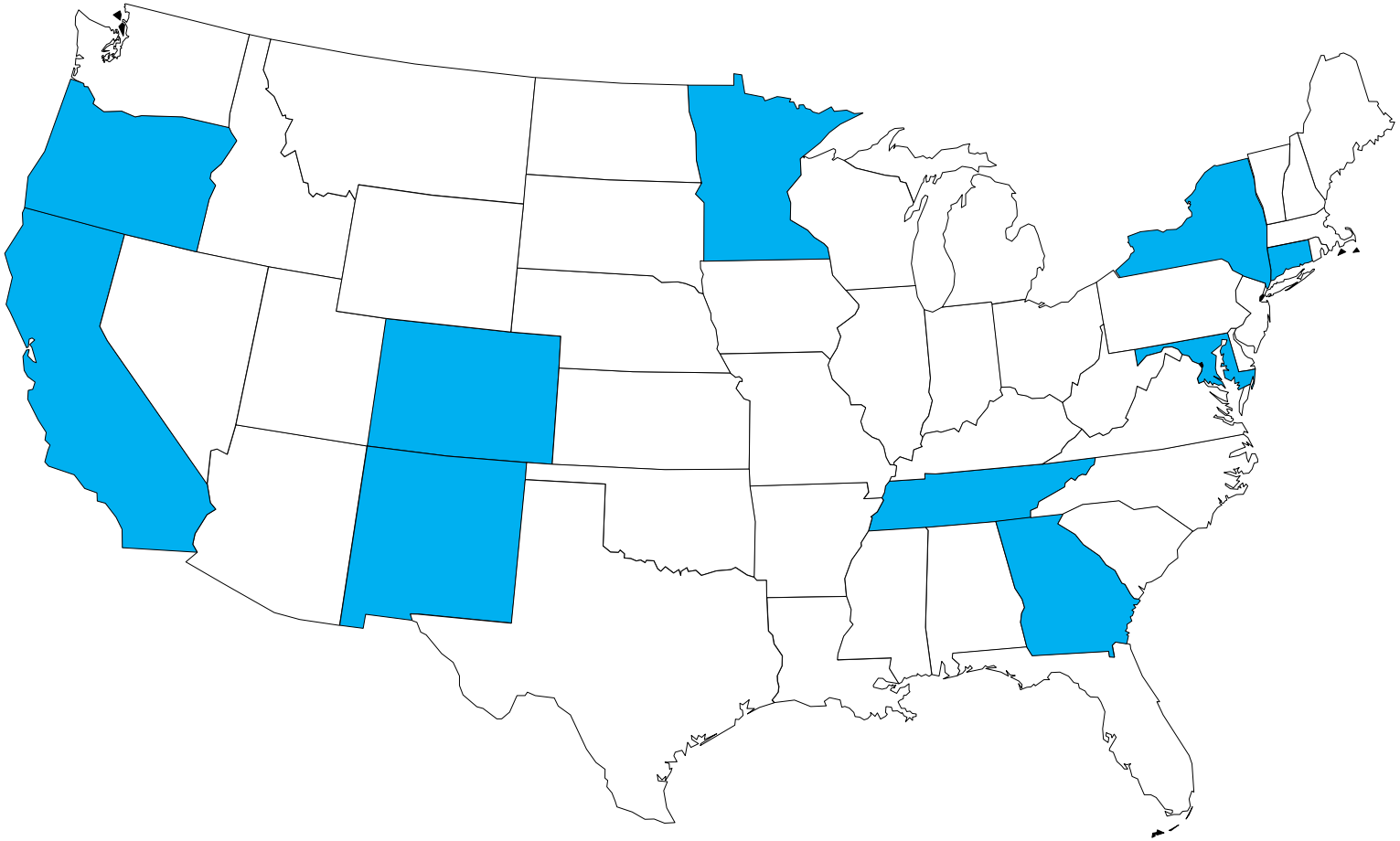
MORBIDITY AND MORTALITY WEEKLY REPORT

Addressing Emerging Infectious Disease Threats: A Prevention Strategy for the United States

Executive Summary

GEORGIA EIP

2021 – CDC Funded EIP States



California – Colorado – Connecticut – Georgia – Maryland – Minnesota – New Mexico – New York – Oregon – Tennessee

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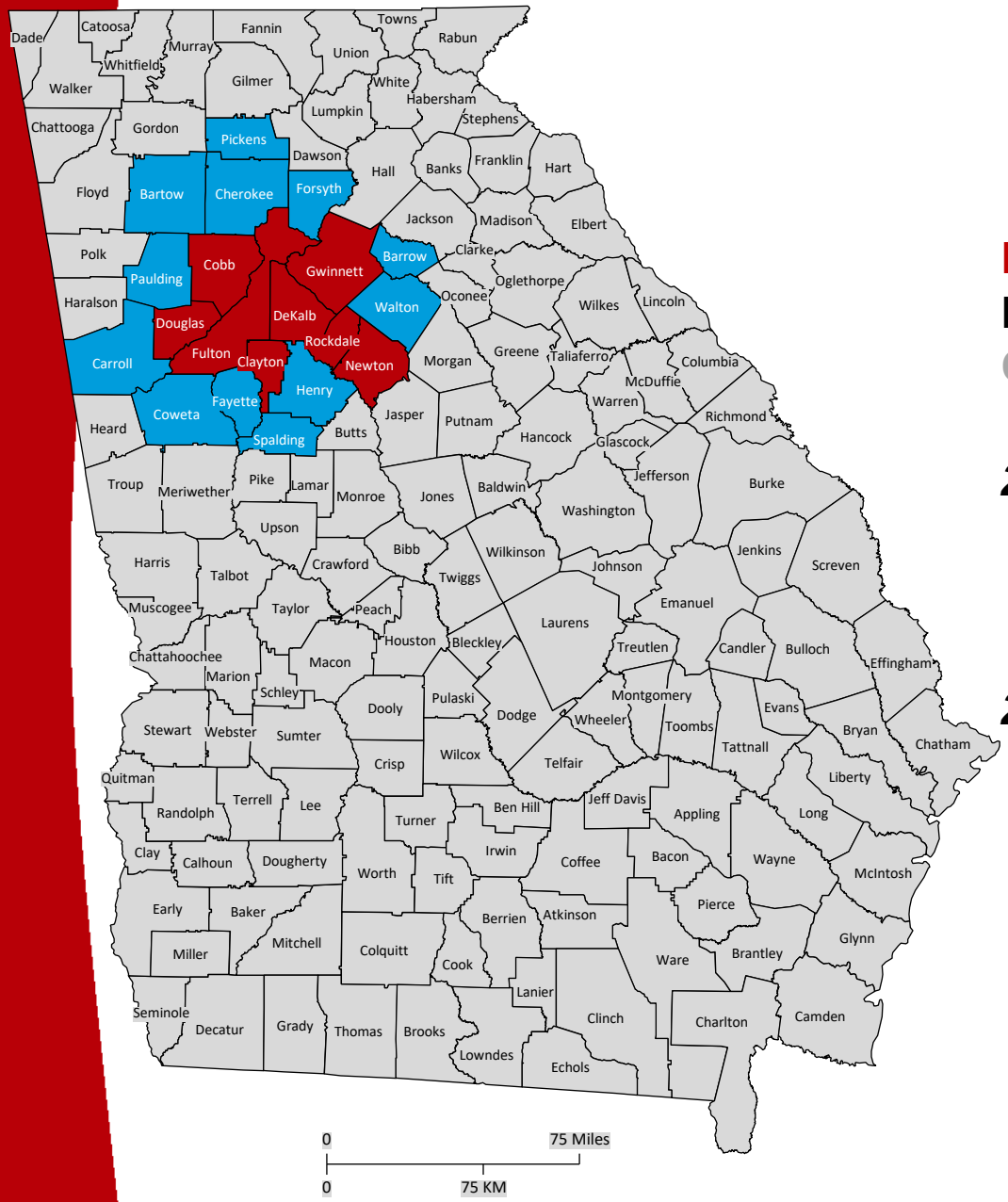

GEORGIA EIP emerging infections program

HD3- 8-county Metro Area

MSA- HD3 + 12 additional counties

GOA- 139 additional counties

2019 8-County Health District 3

Population 4.1 million
(39% of state pop.)

2019 20-County Metro Area (MSA)

Population 5.8 million
(55% of state pop.)

2019 State Population 10.6 million

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EIP Surveillance Methods

Active, Population-based, Laboratory Surveillance

- Active surveillance
  - Calls/visits twice a week at catchment area laboratories, and isolate pick up as needed
  - Audits/line lists- Reports of all positives for pathogens under surveillance for 100% case ascertainment
- Population-based
  - Cases restricted to residents of a defined geographical catchment area
- Laboratory case finding
  - Rely on laboratory line lists to ensure complete case ascertainment

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EIP Surveillance Methods

EIP strengths:

- Able to calculate rates of disease based on the population of the catchment area
- Epidemiologic data is captured via medical record review by EIP staff
- Lab-based surveillance encompasses all healthcare facility types
- Isolate/specimen collection allows combination of epidemiologic and laboratory characterization data

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EIP Active Surveillance Pathogens

ABCs (Sterile Sites)

Group A Streptococcus (MSA)
Group B Streptococcus
[all ages **(MSA)**, <1yr olds **(statewide)**]
Haemophilus influenzae **(statewide)**
Neisseria meningitidis **(statewide)**
Neisseria gonorrhoeae **(statewide)**
Streptococcus pneumoniae **(MSA)**
Neonatal Sepsis (HD3)
Legionella **(HD3)**
Pertussis (HD3)

FoodNet (All Body Sites)

(All statewide)
Campylobacter
E.coli **O157 or Shiga+**
Listeria
Salmonella
Shigella
Yersinia
Vibrio
Cyclospora
Cryptosporidium

Viral

Laboratory confirmed,
-hospitalized influenza (HD3)
-hospitalized RSV (HD3)
-hospitalized COVID-19 (HD3)

HAIC

Staphylococcus aureus **(HD3)**
Candidemia (HD3)
C. difficile **(HD3)**
Mold (select HD3)
MuGSI (HD3)
-Carbapenem resistant organisms
-ESBL

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EIP Special Studies

- Risk Factor Studies
- Vaccine Effectiveness Studies
- Carriage Studies
- Prevalence Studies

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Collaboration with GDPH

- Reporting of all reportable diseases in SendSS
- Access to Electronic Lab Reporting into SendSS
- Submission of isolates/specimens to GPHL
- Collaboration on all EIP projects
- EIP conference

Georgia Department of Public Health

Georgia Department of Public Health (GA)

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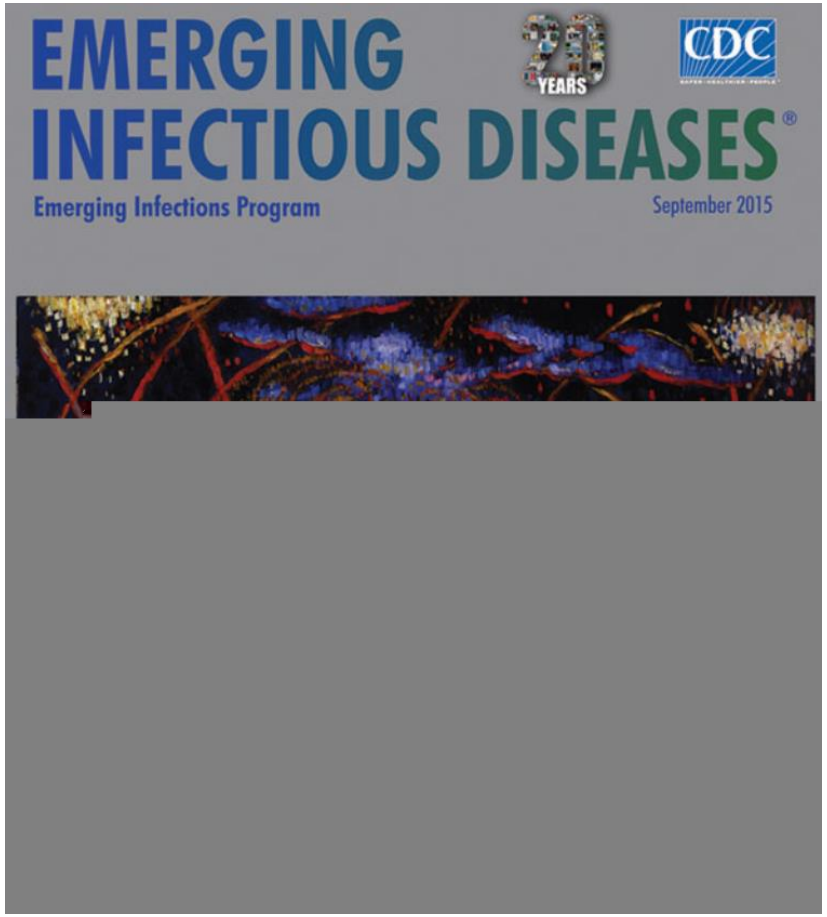
CDC– data to policy

- EIP surveillance data from all sites is used by the CDC to provide national disease burden estimates

- CDC publishes EIP data in:
  - Morbidity and Mortality Weekly Report (MMWR)
  - Peer-reviewed journal articles
  - Conference presentations
  - Data visualization on CDC websites



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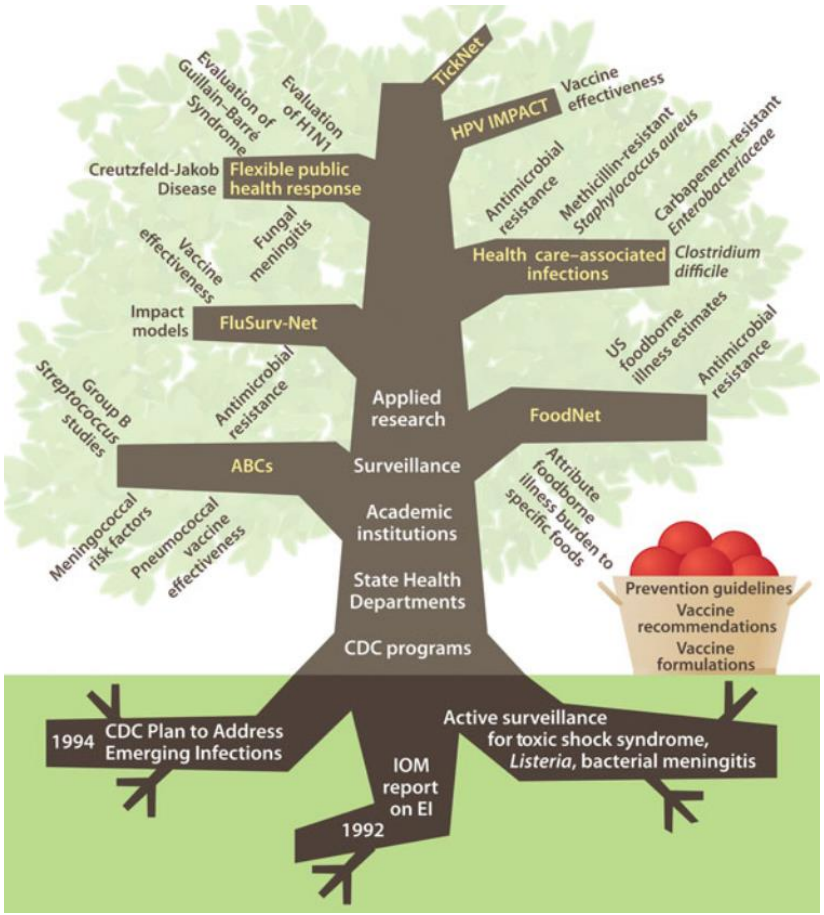
CDC- policy in action



- CDC informing policy:
  - Post licensure evaluation of PCV-7 and PCV-13
  - Evaluating strategies for preventing Group B *Streptococcus* disease in neonates
  - Evaluating foods associated with foodborne outbreaks
  - Antibiotic Resistance (AR) Threats Report
  - Tracking progress on national health goals (Healthy People 2020)

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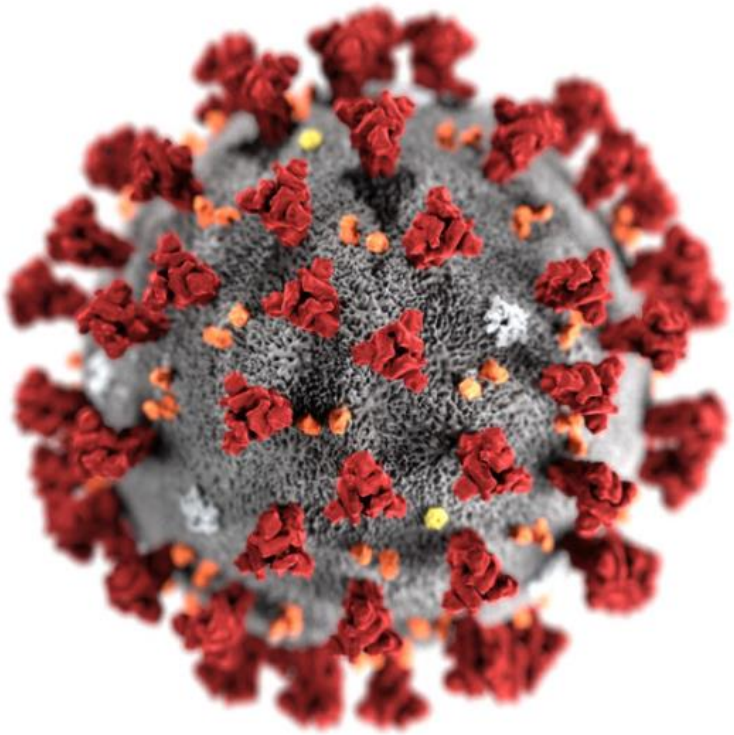
EIP and COVID-19

- Population-based surveillance for COVID-19-associated hospitalizations
  - Defining hospitalization rates overall and among subgroups
  - Collecting risk factor, treatment, and outcome data
- Risk factor interviews for COVID+ healthcare personnel
  - Evaluating occupational hazards to inform COVID care best practices
- Post-licensure evaluation of COVID vaccines
  - Evaluating impact on subgroups such as healthcare workers and adults 65yo+ and monitoring "breakthrough infections"



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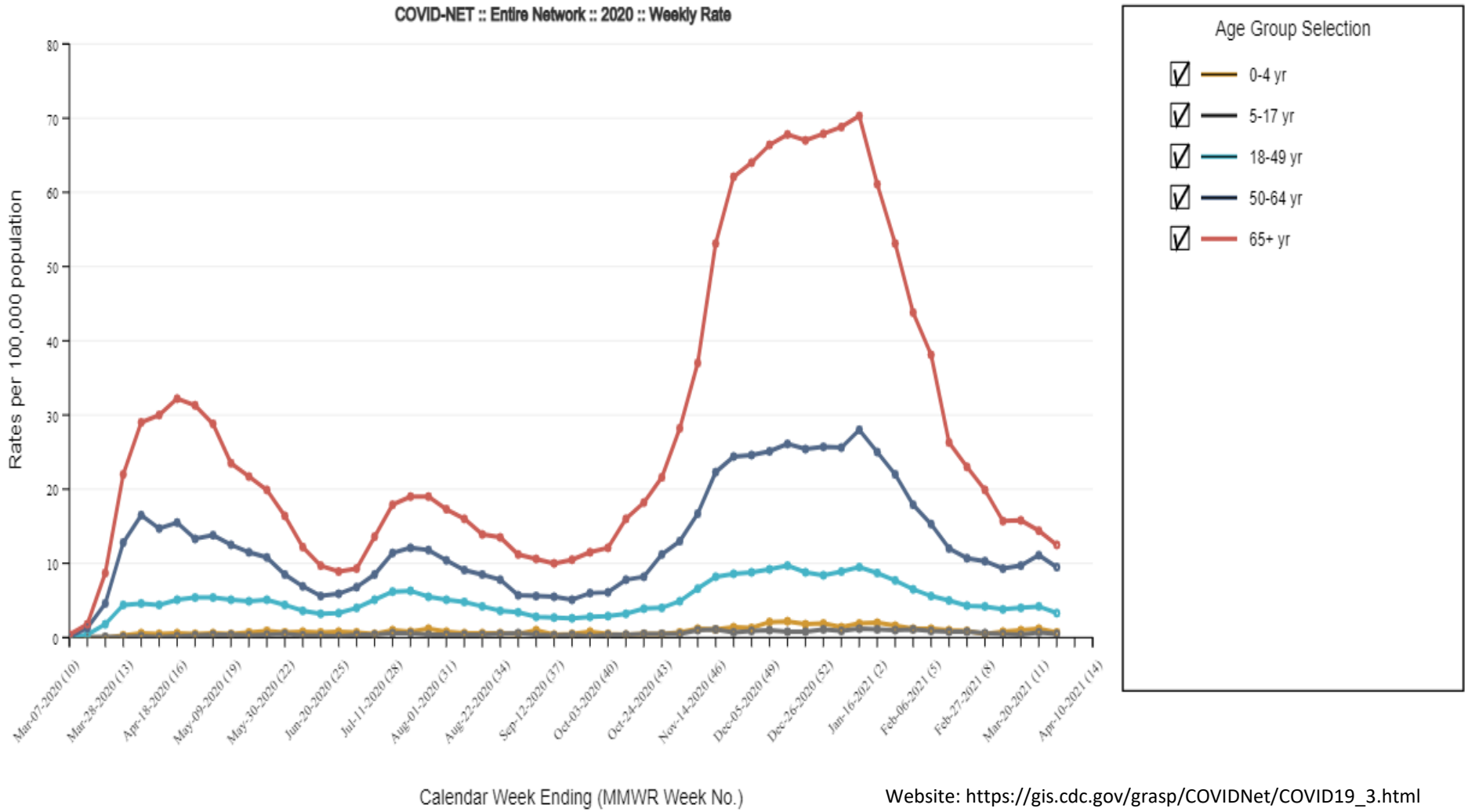
Laboratory-Confirmed COVID-19-Associated Hospitalizations

Preliminary weekly rates as of Mar 27, 2021



Website: https://gis.cdc.gov/grasp/COVIDNet/COVID19_3.html
Accessed: 4/8/2021

EIP team (pre-COVID)

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Infection Preventionists
many contributions to the Georgia EIP

- Provide information on healthcare systems
- Complete specific CDC surveys
- Assist with monthly line lists as needed
- Prevalence studies
- Continued GA EIP involvement in the future!

Thank you for all that you do!

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