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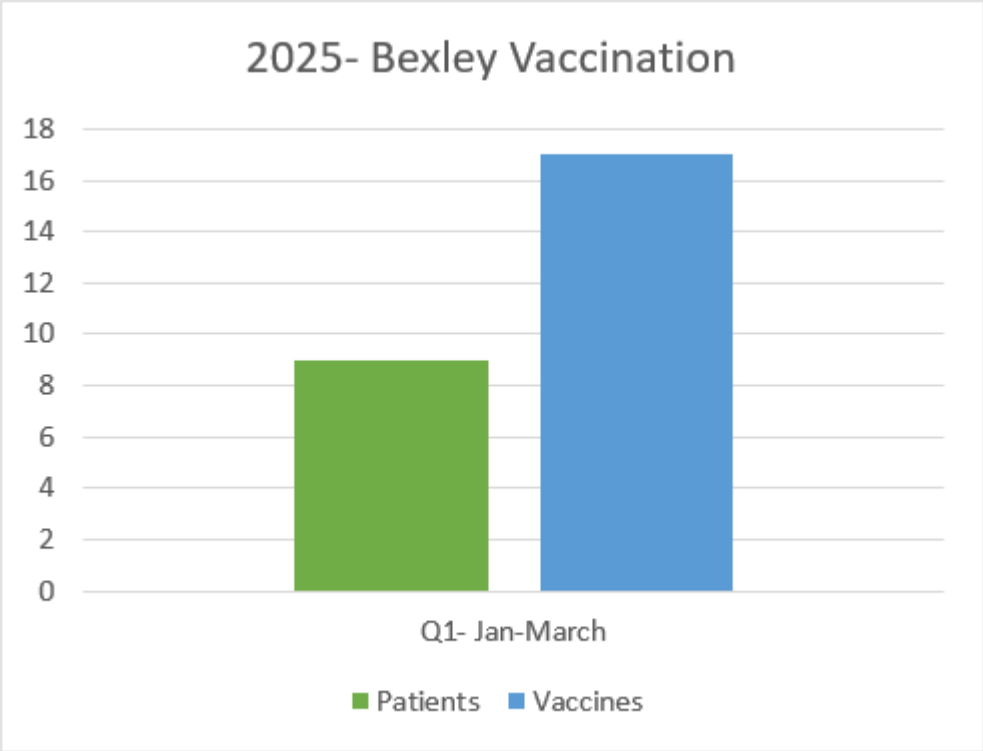
Division of Prevention & Wellness
Bexley Board of Health Report
April 2025

Bexley Immunization Data

From January 1, 2025, to March 31, 2025, a total of 9 patients from Bexley received 17 vaccinations through Franklin County Public Health. Among these, 1 was an updated COVID-19 vaccine.



Bexley Maternal and Child Health Data

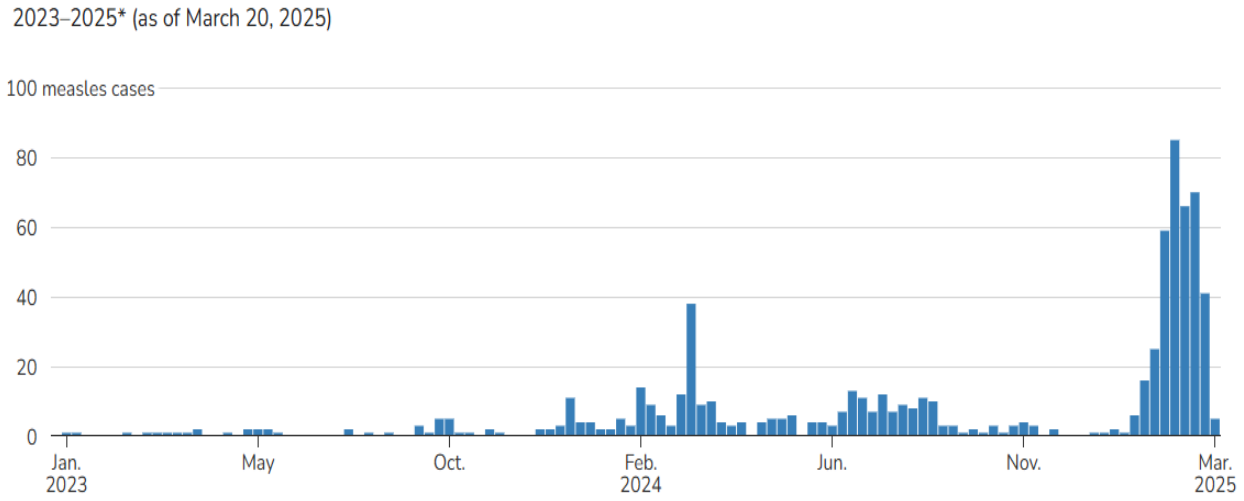
From January 1, 2025, to March 31, 2025, public health nurses provided comprehensive case management services to 31 families of children with complex medical conditions residing in Bexley.

2025 Measles Cases and Outbreaks

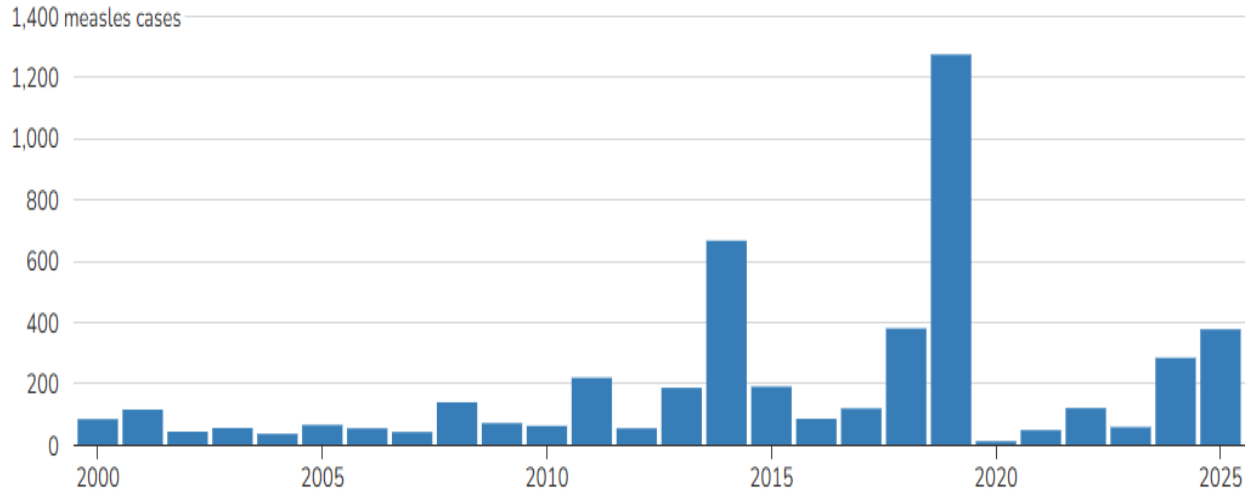
As of March 20, 2025, a total of 378 confirmed measles cases have been reported across 18 jurisdictions: Alaska, California, Florida, Georgia, Kansas, Kentucky, Maryland, Michigan, New Jersey, New Mexico, New York City, New York State, Ohio, Pennsylvania, Rhode Island, Texas, Vermont, and Washington. In 2025, three outbreaks—defined as three or more related cases—have been reported, with 90% of confirmed cases (341

out of 378) being outbreak-associated. For comparison, in 2024, 16 outbreaks were reported, and 69% of cases (198 out of 285) were linked to outbreaks.

2023- 2025 Weekly Measles Cases by Rash Onset Date



2000-2025 Yearly Measles Cases



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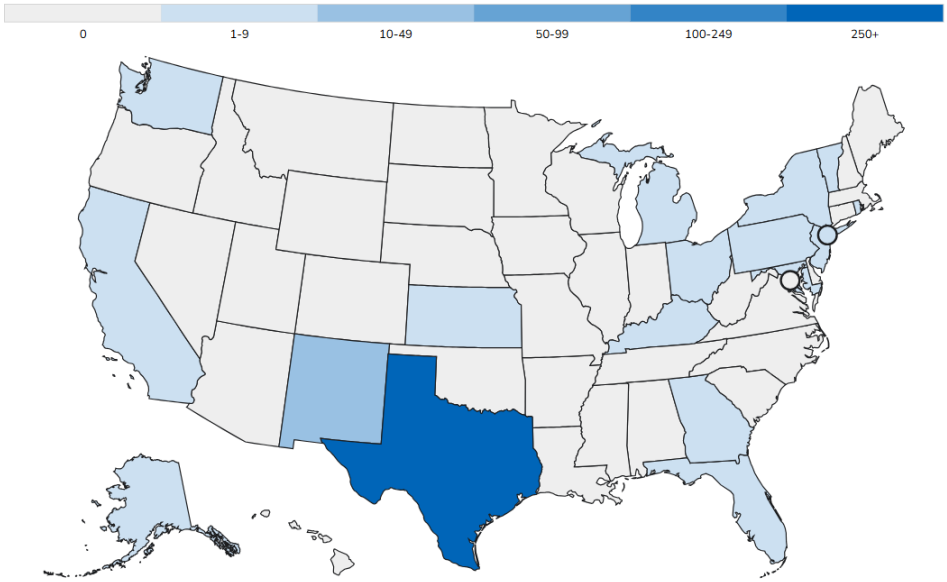
2025 Case Map as of March 21, 2025



U.S. Cases in 2025

Total cases

378

Age
Under 5 years: **124 (33%)**
5-19 years: **159 (42%)**
20+ years: **86 (23%)**
Age unknown: **9 (2%)**

Vaccination Status
Unvaccinated or Unknown: **95%**
One MMR dose: **3%**
Two MMR doses: **2%**

U.S. Hospitalizations in 2025

17%

17% of cases hospitalized (64 of 378).

Percent of Age Group Hospitalized
Under 5 years: **27% (34 of 124)**
5-19 years: **11% (18 of 159)**
20+ years: **13% (11 of 86)**
Age unknown: **11% (1 of 9)**

U.S. Deaths in 2025

2

There has been 1 confirmed death from measles, and 1 death under investigation.

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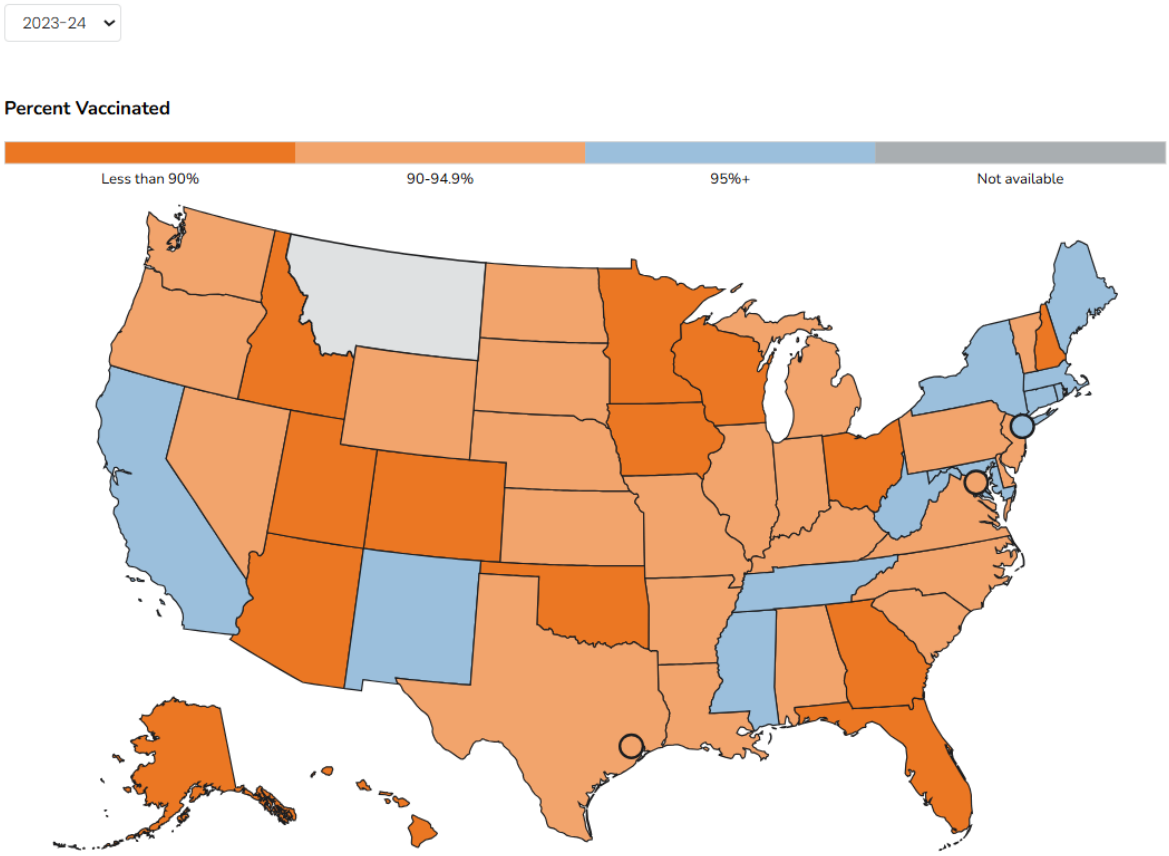
MMR vaccine coverage for kindergarteners by school year (2009–2024)

The measles, mumps, and rubella (MMR) vaccine is both safe and effective. When vaccination coverage exceeds 95% in a community, most individuals are protected through community immunity, also known as herd immunity. However, vaccination rates among U.S. kindergartners have declined, from 95.2% during the 2019–2020 school year to 92.7% in the 2023–2024 school year. This decrease means approximately 280,000 kindergartners are at risk during the 2023–2024 school year. For detailed vaccine coverage data for MMR, visit VaxView.

At the local level, vaccine coverage rates can vary significantly, and pockets of unvaccinated individuals may exist even in states with high overall vaccination rates. When measles enters communities with low vaccination coverage, outbreaks can occur.



Source: CDC - Measles Data & Research

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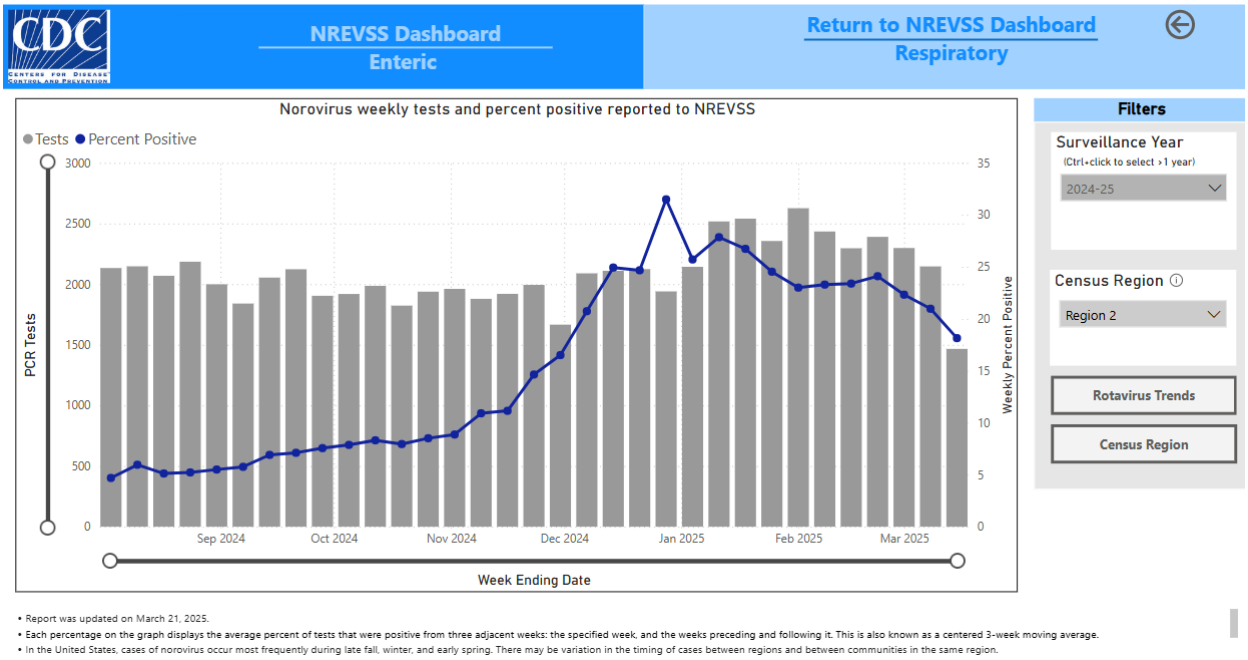
Norovirus Activity within US



Source: CDC - NREVSS PHP Dashboard

Surveillance data from the Centers for Disease Control and Prevention (CDC) show a downward trend in the percentage of positive tests for norovirus in the United States. Norovirus is a highly contagious virus that causes sudden gastrointestinal symptoms. It is the leading cause of vomiting and diarrhea in the U.S., with an estimated 19 million to 21 million illnesses and 2,500 outbreaks reported annually. Norovirus is also the leading cause of foodborne illness. While outbreaks can happen year-round, they are most common from November to April.

Outbreaks typically occur when infected individuals spread the virus through direct contact or shared exposure to contaminated water, food, or surfaces. Common settings for outbreaks include hospitals, restaurants, schools, childcare centers, and cruise ships.

For more information on norovirus, visit CDC - Norovirus.

Ohio's first known human case of H5N1 avian influenza was confirmed as the D1.3 genotype by the CDC on March 19, 2025

The CDC sequenced the virus from the most recent human case, which involved a poultry worker in Ohio. In the early months of 2025, Ohio's commercial poultry sector became one of the worst affected by H5N1 outbreaks. The worker had prolonged contact with sick birds and was hospitalized with both respiratory and non-respiratory

symptoms. Initially, upper-respiratory samples tested negative, but lower respiratory tract samples came back positive for the virus.

Sequencing by the CDC revealed that the virus is a clade 2.3.4.4b of the D1.3 genotype, which, like the D1.1 genotype, descended from the A3 genotype introduced to North America in 2022. This strain has since reassorted with North American wild bird avian flu viruses. The D1.1 genotype has been circulating in wild birds and poultry and has recently jumped to dairy cattle in Nevada and Arizona. It has also been linked to several human infections, including two severe cases and one fatality.

Genetic analysis of the D1.3 virus showed no markers that would affect the effectiveness of antivirals or candidate vaccine viruses. The CDC also noted that no changes were found that would make the virus more likely to adapt to or spread among mammals. Efforts to isolate the live virus are still ongoing.

Source: CDC - H5N1 Response & CIDRAP - H5N1 Case in Ohio

Ohio reported its first probable human case of influenza A(H5), also known as Highly Pathogenic Avian Influenza (HPAI) or bird flu, on February 12, 2024.

The case involved an adult male farm worker from Mercer County who had close contact with deceased commercial poultry and became infected with the virus.

The Centers for Disease Control and Prevention (CDC) currently assesses the risk of bird flu to the general public as low. However, individuals with prolonged and unprotected contact with infected birds are at greater risk of exposure.

Guidance for the General Public:

- The risk of acquiring bird flu for the general U.S. population remains low. To prevent infection, individuals should avoid direct contact with wild birds, sick or dead poultry, or other animals.
- Commercial poultry owners should follow strict biosecurity measures and prevent any contact between their poultry and wild birds, especially migratory waterfowl.

Avoid handling sick birds or other animals, and immediately report any unusual signs of disease or unexpected deaths to the Ohio Poultry Association at (614) 882-6111 or the Ohio Department of Agriculture at (614) 728-6220, or after hours at (888) 456-3405.

The Ohio Department of Agriculture recommends the following best biosecurity practices for commercial poultry owners:

- **Prevent contact with wild birds and waterfowl**: Keep birds indoors when possible and implement wildlife management practices around your farm. More info here.
- **Minimize visitor contact**: Only allow those who care for your poultry to have direct contact with them, and ensure they follow biosecurity principles.
- **Hand hygiene**: Wash your hands before and after contact with live poultry using soap and water. If using hand sanitizer, first remove any manure, feathers, or other materials from your hands.
- **Provide disposable boot covers or disinfectant footbaths**: Ensure anyone having contact with your flock uses disposable boot covers (preferred) and/or disinfectant footbaths. If using a footbath, remove all droppings, mud, or debris from boots and shoes using a long-handled brush before stepping in and always keep it clean.
- **Rodent and pest control**: Establish a rodent and pest control program. Ensure feed, ingredients, bedding, and litter are delivered, stored, and maintained to limit exposure to and contamination from wild animals.
- **Source clean drinking water**: Use drinking water from a contained supply, such as a well or municipal system. Avoid using surface water for drinking or cleaning.
- **Clean and disinfect tools and equipment**: Clean and disinfect all tools and equipment before moving them to a new poultry facility. Trucks, tractors, tools, and equipment should be cleaned and disinfected before leaving the property, and anything that cannot be cleaned should not be moved or reused.
- **Monitor for signs of illness**: Pay attention to changes in egg production, death loss, discoloration or swelling of legs, wattles, and combs, labored breathing, and reduced feed or water consumption.

More information about best biosecurity practices can be found on both the Ohio Department of Health (ODH) and Ohio Department of Agriculture (ODA) websites.

Background on Bird Flu Cases in Humans

The Centers for Disease Control and Prevention (CDC) has been addressing the public health challenges posed by a multistate outbreak of avian influenza A(H5N1), or "H5N1 bird flu," in dairy cows, poultry, and other animals in the United States since the spring of 2024. The CDC is working in collaboration with the U.S. Department of Agriculture (USDA), the Food and Drug Administration (FDA), the Administration for Strategic Preparedness and Response (ASPR), state public health and animal health officials, and other partners, applying a One Health approach to tackle this issue.

Since April 2024, 70 human cases of avian influenza A(H5) virus infection have been reported in the U.S. Of these cases, 41 were linked to exposure to sick dairy cows, 26 were associated with exposure to avian influenza A(H5N1)-infected poultry, and the source of exposure for three cases remains undetermined. To date, human-to-human transmission of the influenza A(H5) virus has not been observed in the United States. The immediate risk to the public from H5 bird flu remains low.

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On the animal health side, USDA reports that since March 2024, 989 dairy herds in 17 U.S. states have confirmed cases of avian influenza A(H5N1) virus infections in dairy cows, with the number of affected herds continuing to rise. Since April 2024, avian influenza A(H5) virus detections have been reported in 336 commercial flocks and 207 backyard flocks, resulting in more than 90.9 million affected birds.

Source: CDC - H5N1 Response

National situation summary

Person-to-person spread

NONE — There is no known person-to-person spread at this time.

Current public health risk

LOW — The current public health risk is Low.

Cases in the U.S.

70 cases

Deaths in U.S.

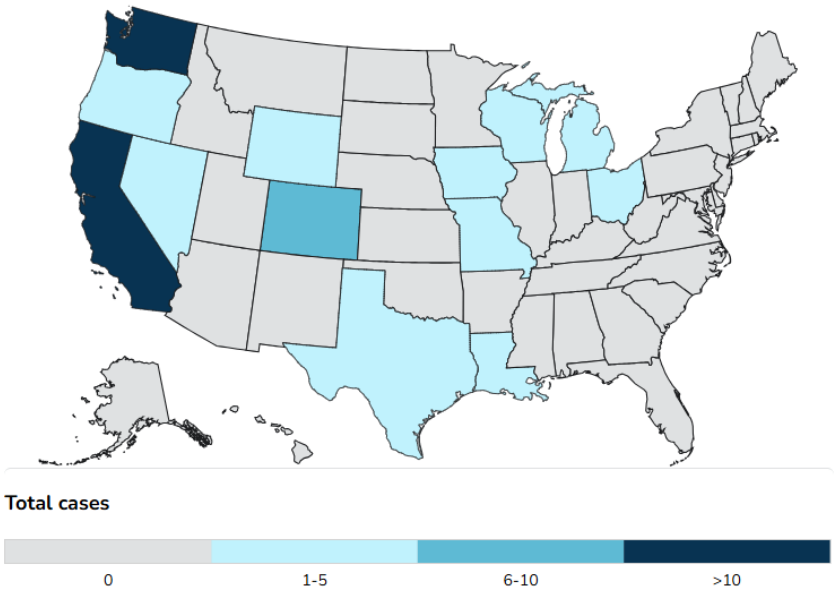
1 death

National Total Cases: 70

Cases	Exposure Source
41	Dairy Herds (Cattle)*
24	Poultry Farms and Culling Operations*
2	Other Animal Exposure†
3	Exposure Source Unknown‡

NOTE: One additional case was previously detected in a poultry worker in Colorado in 2022. Louisiana reported the first H5 bird flu death in the U.S.

*Exposure Associated with Commercial Agriculture and Related Operations
†Exposure was related to other animals such as backyard flocks, wild birds, or other mammals
‡Exposure source was not able to be identified



Source: CDC - Bird Flu Situation Summary

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What are we doing locally?

In response to sporadic human infections with avian Influenza A H5N1 Virus amid high levels of seasonal influenza activity, the Centers for Disease Control and Prevention (CDC) **has recommended a shortened timeline for subtyping all influenza A specimens from hospitalized patients. This includes enhanced efforts at clinical laboratories to identify non-seasonal influenza**.

Clinicians and laboratorians are being reminded to test for influenza in patients with suspected influenza and to expedite the **subtyping of influenza A-positive specimens from hospitalized patients, especially those in intensive care units (ICUs)**.

This approach aims to prevent delays in identifying human infections with avian Influenza A H5N1 Virus, while also ensuring optimal patient care and supporting timely infection control and case investigation.

COVID-19 Update

No new updates for this month. Data below is from previous month.
Next report will be published on April 30, 2025.

Source: Vax2Normal

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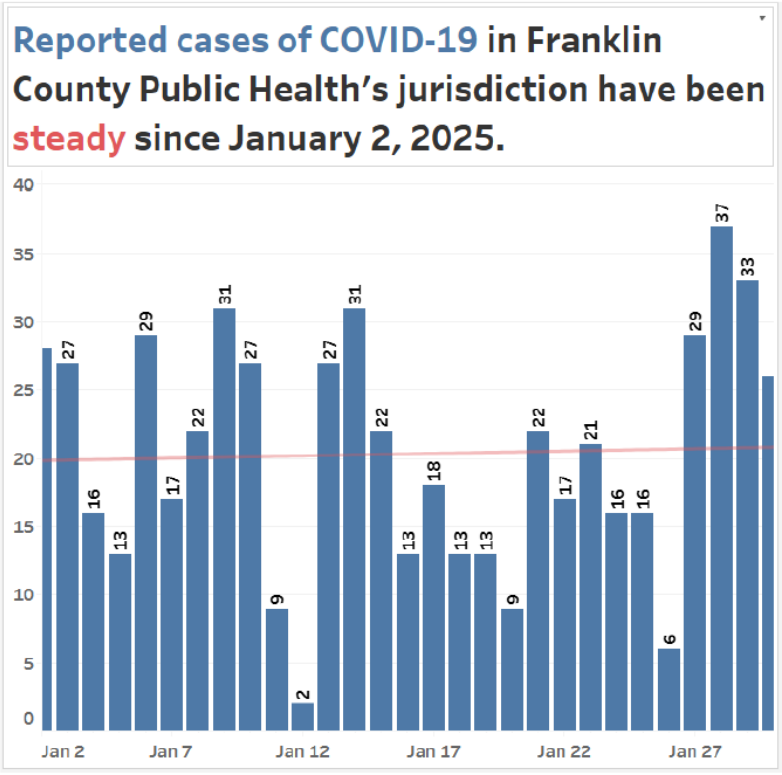
Epidemiology Update for COVID-19
Franklin County Public Health
January 31, 2025

Please note: Due to underreporting of COVID-19 testing and cases, please interpret data with caution on this report. The true number of cases are likely higher. Data are pulled from the Ohio Disease Reporting System and the Ohio Department of Health.

COVID-19 Cases Reported by Year and Sex, Franklin County Public Health Jurisdictions

	2020	2021	2022	2023	2024	2025	Grand Total
Female	15,232	22,795	28,578	6,443	4,444	355	77,847
Male	13,676	20,217	22,664	4,389	3,065	254	64,265
Blank	198	160	362	31	8	2	761
Unknown	52	148	237	20	10	1	468
Grand Total	29,158	43,320	51,841	10,883	6,629	612	143,341



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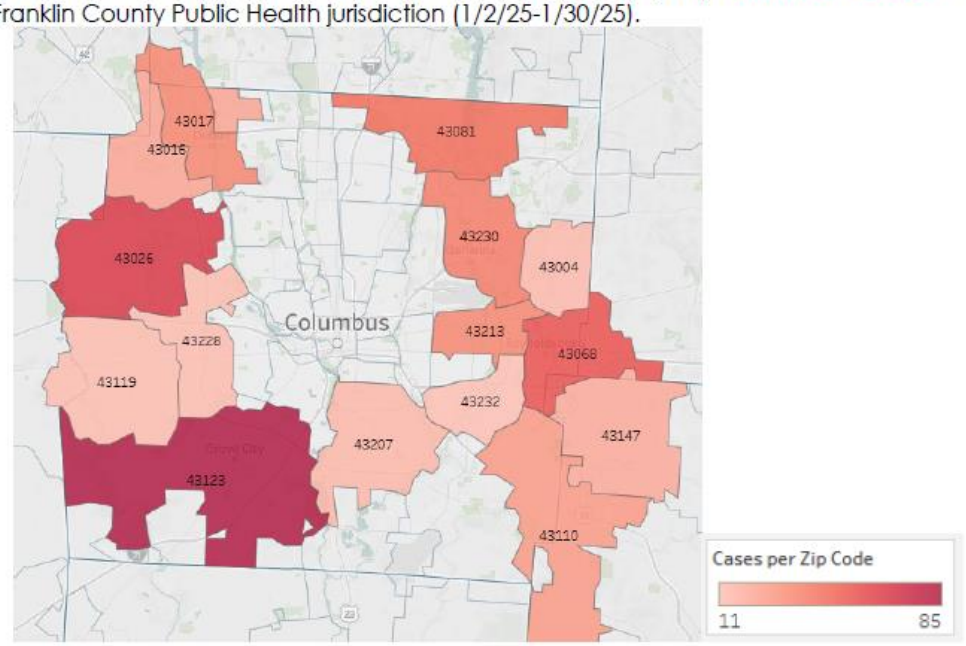
Over the past 4 weeks, 43123 and 43026 have seen the majority of **COVID-19 Cases** in Franklin County Public Health jurisdiction (1/2/25-1/30/25).



Source: Vax2Normal

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COVID-19 Current Wastewater Viral Activity Levels Map

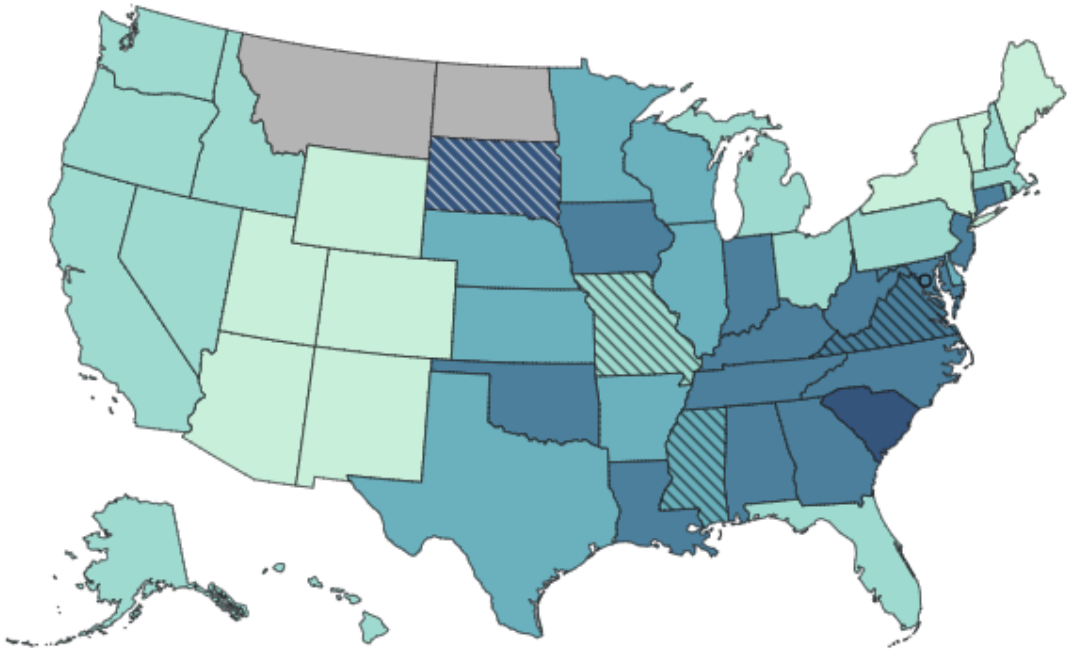
COVID-19 Wastewater Monitoring in the U.S.

Print

This interactive map shows the current wastewater viral activity level of SARS-CoV-2 (the virus that causes COVID-19) for each state or territory.

Wastewater data are updated every Friday with the previous week's data, which allows for data to be reviewed for accuracy. Data may change as more reports are received.

Time Period: March 09, 2025 - March 15, 2025



U.S. Territories

GU VI

SARS-CoV-2 Wastewater Viral Activity Levels

Select a level to add or remove from map.

Very High | High | Moderate | Low | Very Low | No Data | *Limited Coverage

* Based on a small segment (less than 5%) of the population and may not be representative of the state/territory.

Data last updated 2025-03-20

Source: CDC - COVID-19 Current Levels

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Wastewater COVID-19 State and Territory Trends

COVID-19 Wastewater Monitoring in the U.S.

Print

This page shows the current wastewater viral activity level of SARS-CoV-2 (the virus that causes COVID-19) for the overall state or territory. It also shows state/territory, regional, and national trends over time.

Wastewater data are updated every Friday with the previous week's data, which allows for data to be reviewed for accuracy.

State

Ohio

Current Site Levels

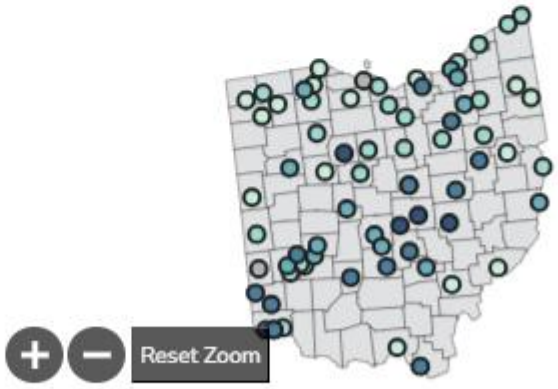
This map shows current wastewater viral activity levels of SARS-COV-2 at individual wastewater treatment plants or sampling locations reporting in the last week. A site may serve multiple counties, including those in another state.

Time Period: March 09, 2025 - March 15, 2025

In Ohio, the wastewater viral activity level for COVID-19 is currently **Low**.

Sites reporting in the last week: 70
Sites reporting in the last 30 days: 72

LOW



Current Site Levels

Select a level to add or remove from map.

Very High High Moderate Low Very Low

No Data

Source: CDC - COVID-19 State Trends

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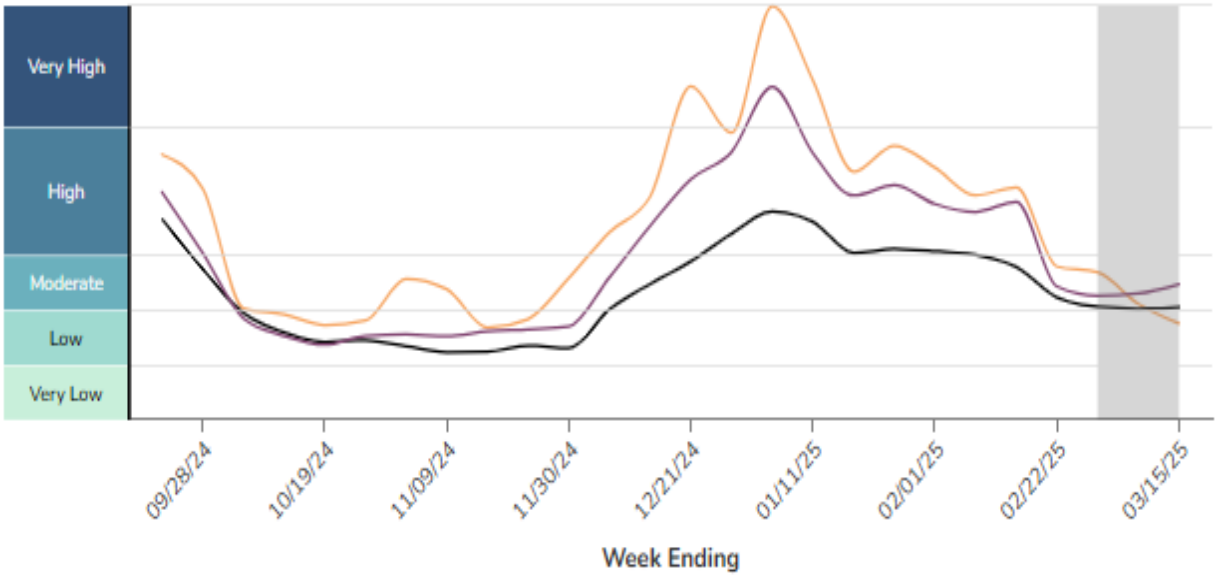
Trends over Time

This chart shows trends of SARS-COV-2 viral activity levels in wastewater. For comparison, you can also see trends for the national and regional trend.

Date Period

6 Months



○ <5% Population

Data from the most recent two weeks may be incomplete due to delays in data reporting. These data sets are subject to change and are indicated by the gray shading.

Source: [CDC - COVID-19 State Trends]

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COVID-19 Variants in Wastewater

COVID-19 Wastewater Monitoring in the U.S.

Print

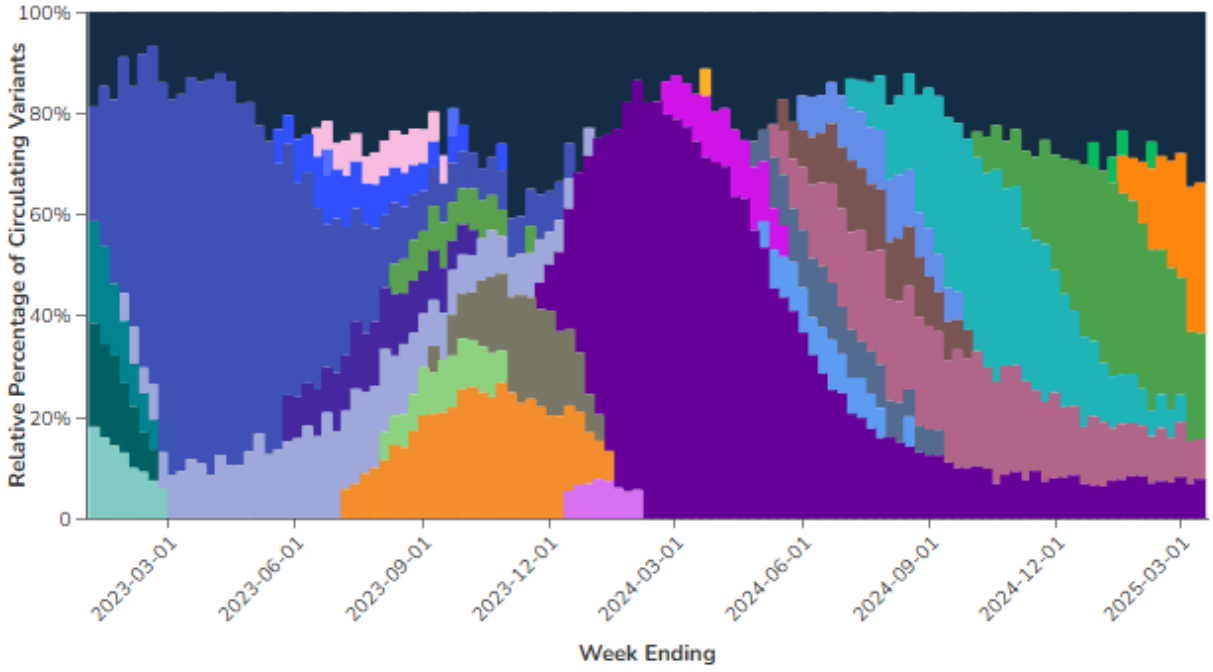
This chart shows the average relative proportions of SARS-COV-2 virus variants in wastewater at the national level. Variants constituting less than 5% abundance are categorized as "Other."

Wastewater data are updated every Friday with the previous week's data, which allows for data to be reviewed for accuracy. Data may change as more reports are received.

Predominant Variant

LP.8.1

All lineages not enumerated in this graphic are aggregated with their parent lineages, based on Pango statement of nomenclature rules.



Select a variant to add or remove it from the visualization.

BA.2 BA.2.86 BA.5 BQ.1 BQ.1.1 EG.5 FL.1.5.1 HK.3 HV.1 JN.1 XBB
XBB.1.16 XBB.1.16.1 XBB.1.16.6 XBB.1.5 XBB.1.5.1 XBB.1.5.59 XBB.1.9.1 XBB.1.9.2
XBB.2.3 JN.1.11.1 JN.1.7 JN.1.8.1 KP.2 KP.1.1 KP.3 LB.1 KP.2.3 KP.3.1.1
XEC MC.1 MC.19 LB.1.3.1 LP.8.1 XEC.4 MC.10.1 Other

Source: CDC - COVID-19 Variants

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Respiratory Illnesses Data Channel

This site is updated on Fridays.

WHAT TO KNOW

- As of March 21, 2025, the amount of acute respiratory illness causing people to seek healthcare has declined to a low level.
- Seasonal influenza activity remains elevated nationally but has decreased for five consecutive weeks.
- COVID-19 activity is declining nationally but elevated in some areas of the country.
- RSV activity is declining in most areas of the country.
- The community snapshot shows activity levels using the following colors: Very Low , Low , Moderate , High , Very High .

Overall respiratory illness activity in **the United States***

Low

What it is: A measure of how frequently a wide variety of respiratory symptoms and conditions are diagnosed by emergency department doctors, ranging from the common cold to COVID-19, flu, and RSV.

Why it matters: Summarizes the total impact of respiratory illnesses, regardless of which diseases are causing people to get sick.

Emergency department visits in **the United States**

COVID-19	Flu	RSV
Low Decreasing ↘	Moderate Decreasing ↘	Low Decreasing ↘

What it is: A measure of how many people are seeking medical care in emergency departments.

Why it matters: When levels are high, it may indicate that infections are making people sick enough to require treatment.

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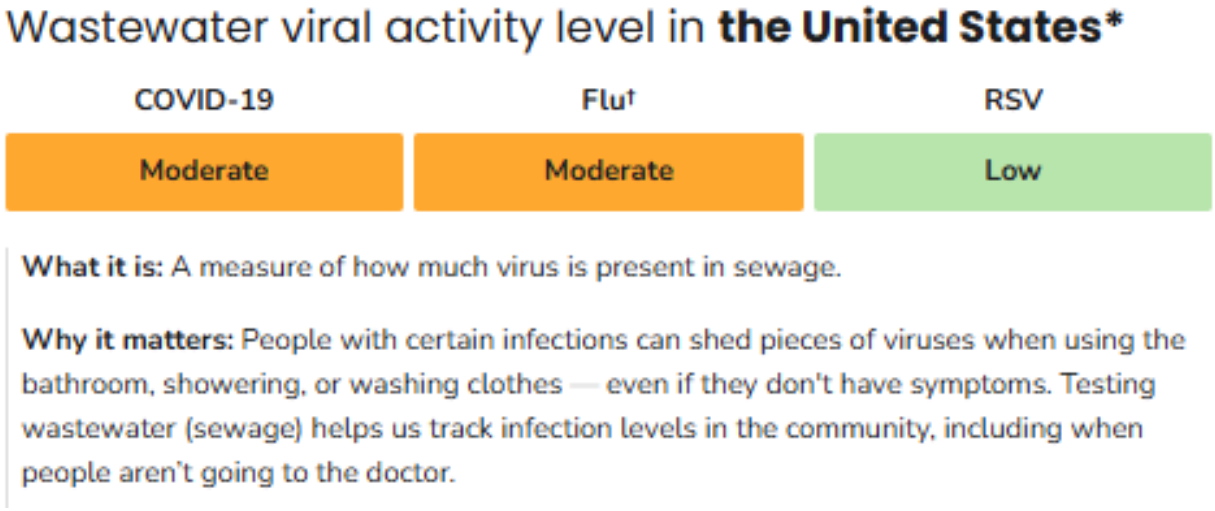

Source: CDC - Respiratory Viruses Data

Weekly national summary
Reported on Friday, March 21, 2025
Seasonal influenza activity remains elevated nationally but has decreased for five consecutive weeks. COVID-19 activity is declining nationally but elevated in some areas of the country. RSV activity is declining in most areas of the country.

COVID-19
COVID-19 activity is declining nationally but elevated in some areas of the country. Wastewater levels and emergency department visits are at low levels, and laboratory percent positivity is stable. Emergency department visits and hospitalizations are highest in older adults, and emergency department visits are also elevated in young children. There is still time to benefit from getting your recommended immunizations to reduce your risk of illness this season, especially severe illness and hospitalization.
CDC expects the 2024-2025 COVID-19 vaccine to work well for currently circulating variants. There are many effective tools to prevent spreading COVID-19 or becoming seriously ill.

Influenza
Seasonal influenza activity remains elevated nationally but has decreased for five consecutive weeks. Data to date suggest the season has peaked; however, flu-related medical visits, hospitalizations, and deaths remain elevated, and CDC expects several more weeks of flu activity.
Additional information about current influenza activity can be found at: Weekly U.S. Influenza Surveillance Report | CDC

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RSV
RSV activity is declining in most areas of the country. Emergency department visits and hospitalizations are highest in children, and hospitalizations are elevated among older adults in some areas.

Vaccination
Vaccination coverage with influenza and COVID-19 vaccines is low among U.S. adults and children. Vaccination coverage with RSV vaccines remains low among U.S. adults. Many children and adults lack protection from respiratory virus infections provided by vaccines.

Other Respiratory IllnessesPertussis
Reported cases of whooping cough (pertussis) continue to be elevated nationwide. Whooping cough is very contagious and can spread easily from person to person. Babies younger than 1 year old are at highest risk of severe disease and complications. The best way to prevent complications from whooping cough is to get vaccinated.
Learn more: About Whooping Cough | Whooping Cough | CDC.

Mycoplasma pneumoniae
Respiratory infections caused by the bacteria *Mycoplasma pneumoniae* continue to decline from their peak in late 2024. In the coming weeks, our regular updates on *Mycoplasma pneumoniae* will conclude as new infection trends are no longer a national concern.
Learn more: About Mycoplasma pneumoniae Infection | M. pneumoniae | CDC.

Group A Strep
Respiratory infections caused by group A Streptococcus bacteria are at typical levels for this time of the year. In the coming weeks, our regular updates on group A Streptococcus will conclude as new infection trends are no longer a national concern.
Learn more: About Strep Throat | Group A Strep | CDC.

Source: CDC - Respiratory Viruses Data

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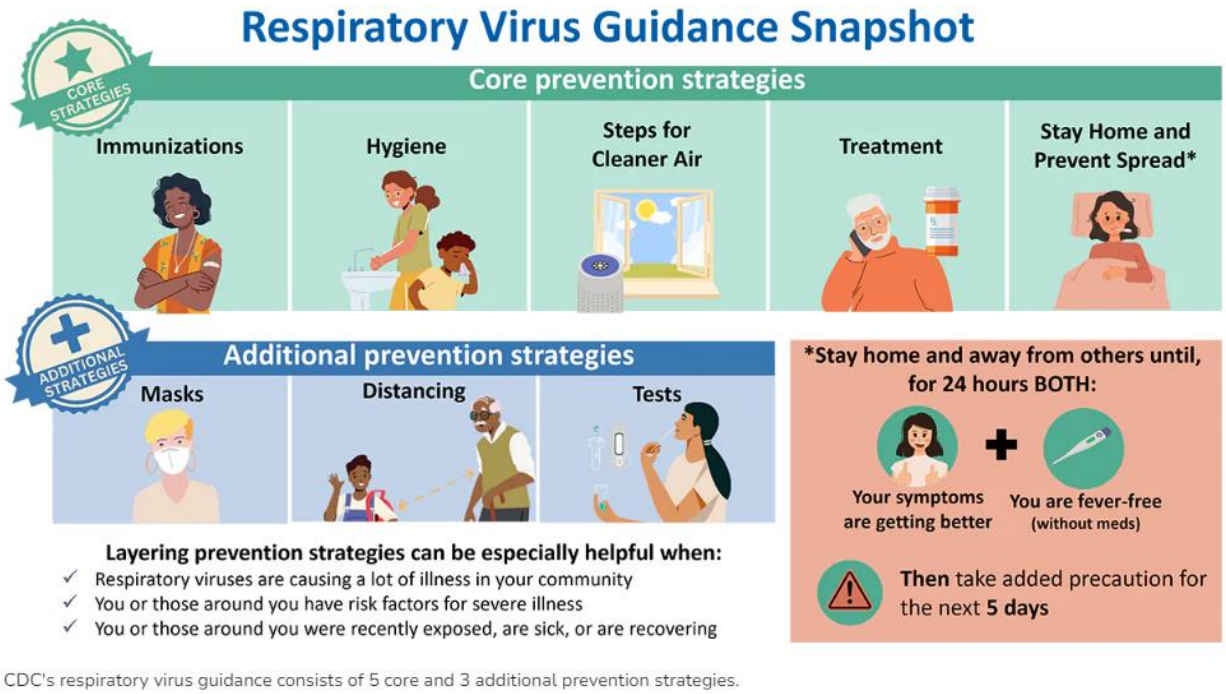
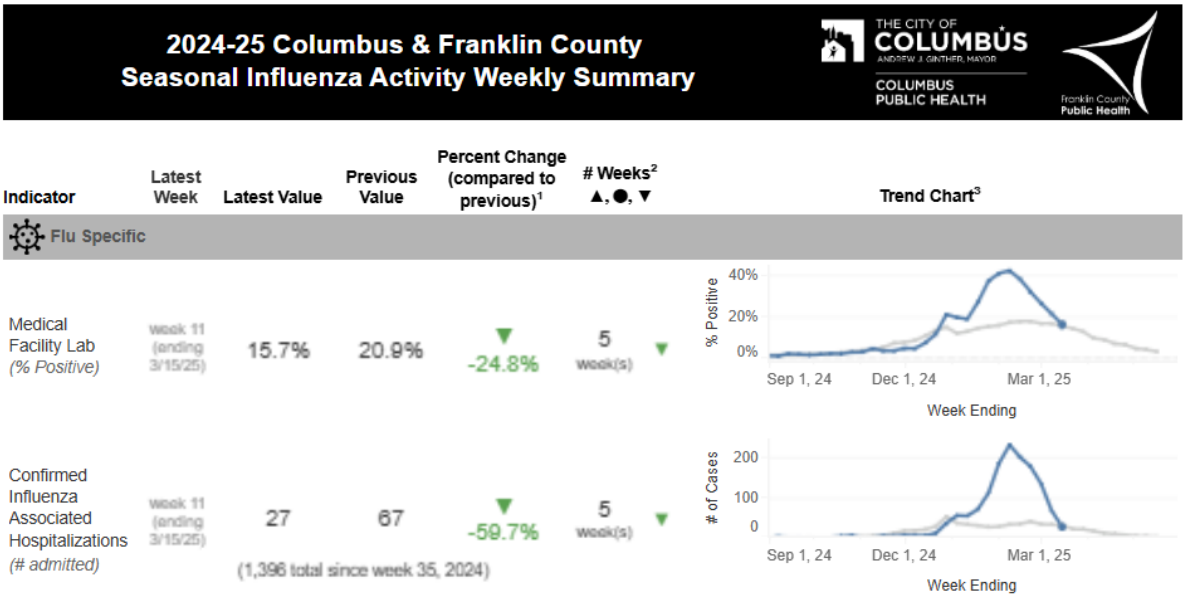


CDC's respiratory virus guidance consists of 5 core and 3 additional prevention strategies.

2024-2025 Franklin County Seasonal Influenza Activity

FRANKLIN COUNTY- LOCAL ACTIVITY

Local influenza activity remains moderate to high.



Source: [Columbus Flu Surveillance Dashboard]

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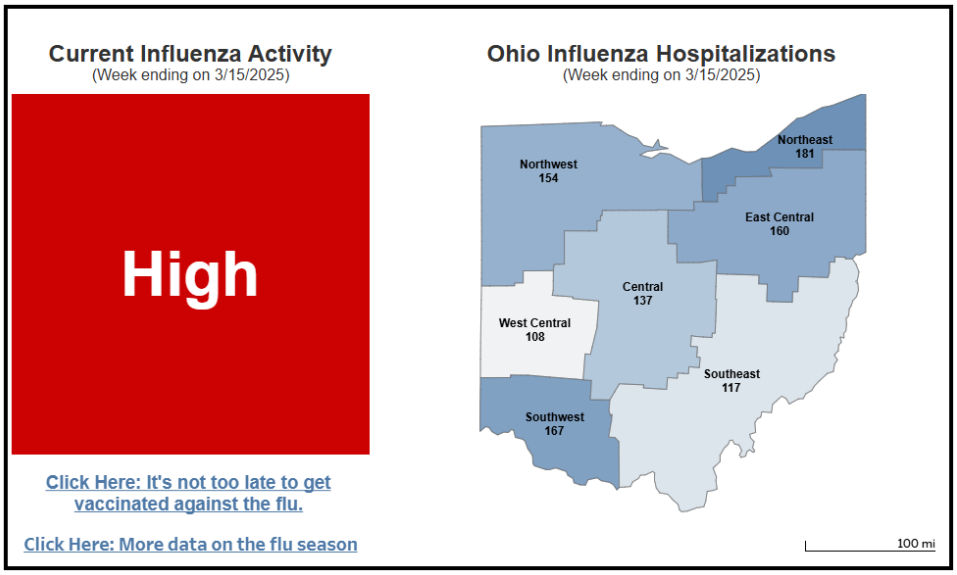
OHIO-STATE ACTIVITY

State of Ohio | Current Influenza Activity

Last Updated: **2025-03-21**
Updated Fridays During Flu Season



Activity Indicators
(Week ending on 3/15/2025)

Data Source	Current Week	Percent Change From Last Week	Trend Direction
% of Outpatient Visits Influenza-like Illness (ILI) Outpatient Data (ILINet Sentinel Provider Visits)	5.37%	-19.73%	↓
% of Emergency Department (ED) Visits Fever and ILI Specified ED Visits (EpiCenter)	1.94%	-10.60%	↓
% of ED Visits Constitutional ED Visits (EpiCenter)	12.91%	-9.02%	↓
Hospitalizations Confirmed Influenza-associated Hospitalizations (Ohio Disease Reporting System)	1024	-25.69%	↓

Footnotes:

- **Emergency Department Visits (EpiCenter):** A five-year average, which includes data from the 2017-2018 and 2018-2019 seasons in addition to data from the 2021-2022 through 2023-2024 seasons is displayed in the figure above. EpiCenter data from the 2019-2020 and 2020-2021 influenza seasons have been omitted from the five-year baseline average due to data instability and the effects of the COVID-19 pandemic.

- **Sentinel Providers (ILINet):** A five-year average, which includes data from the 2017-2018 and 2018-2019 seasons in addition to data from the 2021-2022 through 2023-2024 seasons is displayed in the figure above. ILINet data from the 2019-2020 and 2020-2021 influenza seasons have been omitted from the five-year baseline average due to data instability and the effects of the COVID-19 pandemic.

- **Influenza-associated Hospitalizations (ODRS):** A five-year average, which includes data from the 2017-2018 and 2018-2019 seasons in addition to data from the 2021-2022 through 2023-2024 seasons is displayed in the figure above. Influenza-associated hospitalization data from the 2019-2020 and 2020-2021 influenza seasons have been omitted from the five-year baseline average due to data instability and the effects of the COVID-19 pandemic.

Source: Ohio Department of Health - Influenza Dashboard

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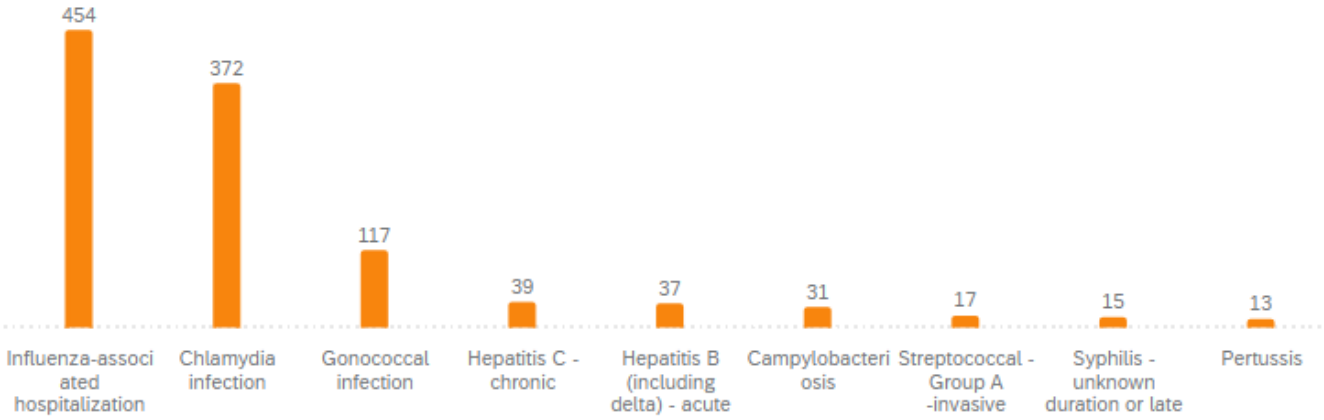
NATIONAL ACTIVITY

Source: CDC - FluView Surveillance Map

FCPH Reportable Diseases/Conditions Data

2025 Top 10 Reportable Conditions



Contains suspected, probable, and confirmed cases. Does not include HIV, syphilis, or COVID-19 data. Values above 10 have been hidden for confidentiality purposes.

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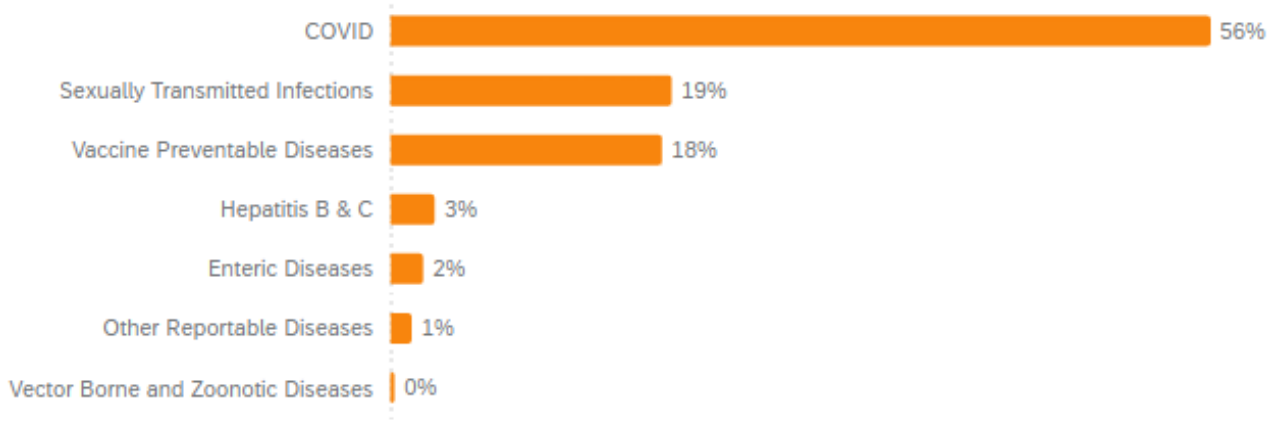
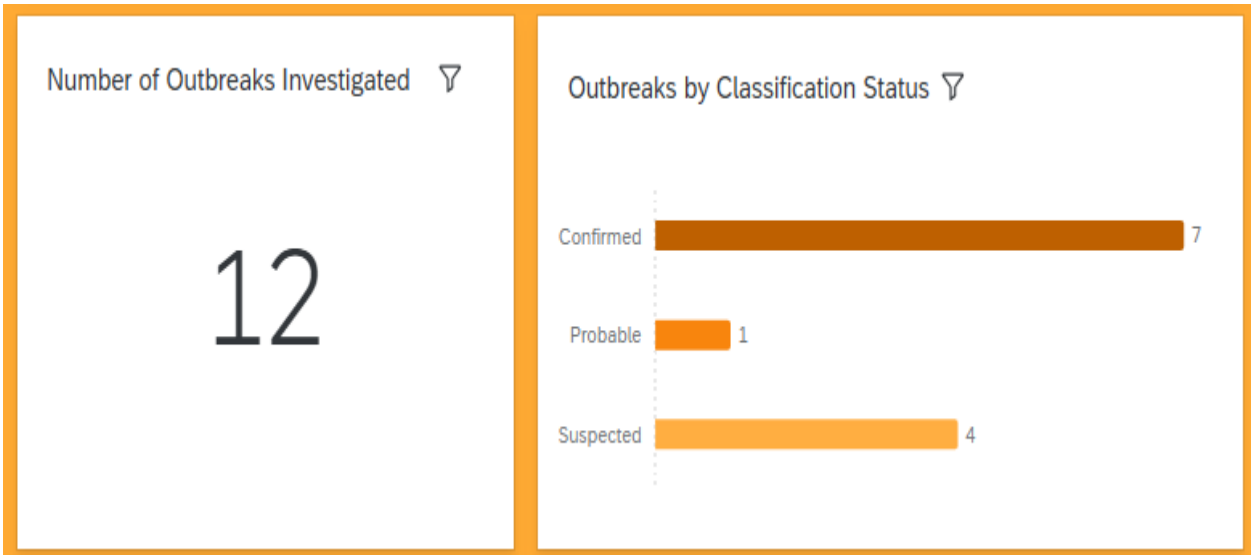
2025 Reportable Condition by Cateory



HIV data was excluded from STI category.

2025 Outbreaks



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Data are current as of 3/24/2025.

Contains Suspected, Probable, and Confirmed cases.
Cases counts labeled as <10 due to confidentiality purposes.
Counts do not include cases in cities of Columbus and Worthington; only FCPH jurisdictions are included.
HIV data is excluded.

Respectfully submitted by Alex Jones, Assistant Health Commissioner/Director of Prevention & Wellness, April 2, 2025