





# **Invasive Group A Streptococcus Surveillance 2012-2016**

Rhode Island Department of Health

Division of Preparedness, Response, Infectious  
Disease and Emergency Medical Services

Center for Acute Infectious Disease Epidemiology

# About Invasive Group A Streptococcus



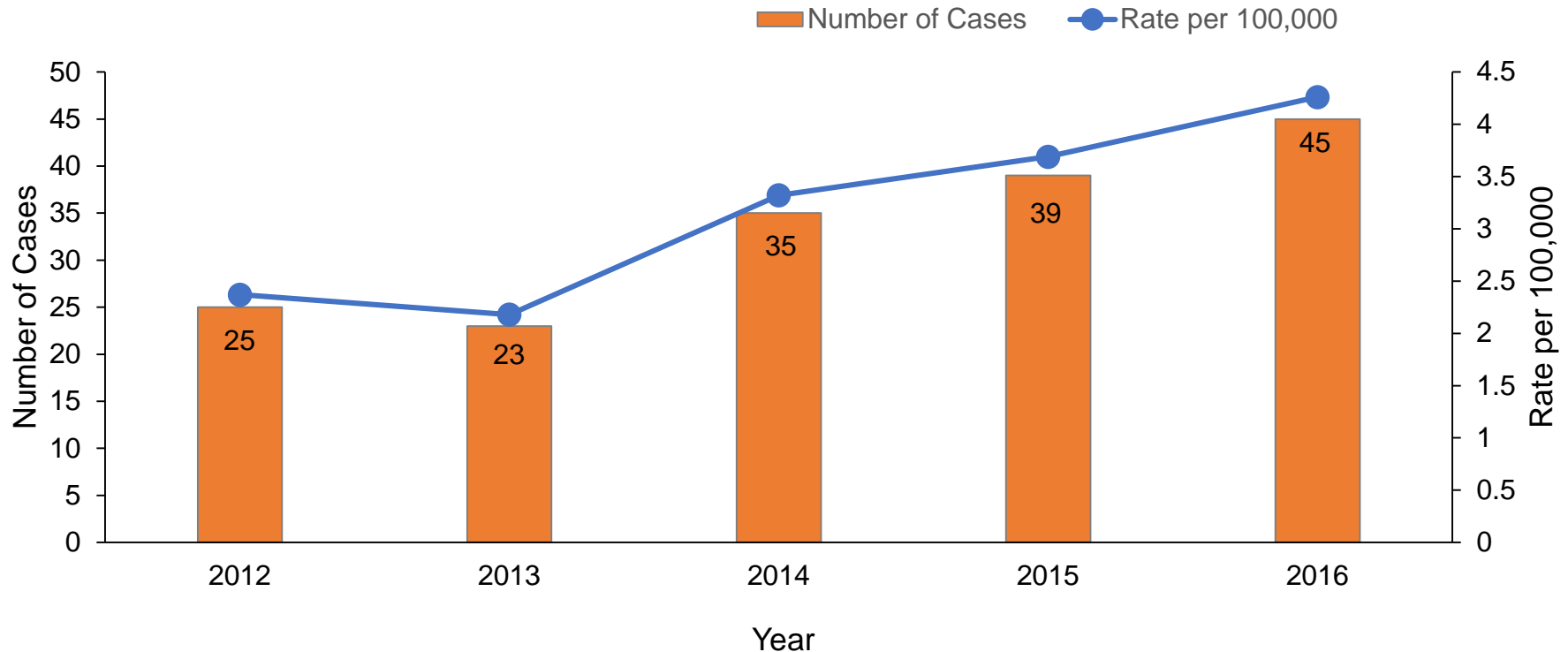
- Invasive Group A Streptococcus (GAS) includes infections in normally sterile sites such as blood, cerebrospinal fluid, or pleural fluid.
- Invasive GAS may manifest in several ways
  - Pneumonia
  - Bacteremia
  - Necrotizing fasciitis
- These bacteria are spread through direct contact with an infected individual's nose or throat discharges or through contact with infected skin lesions.
- Infants and elderly persons have the highest incidence of invasive GAS infections.

# Data Overview, Invasive Group A Streptococcus



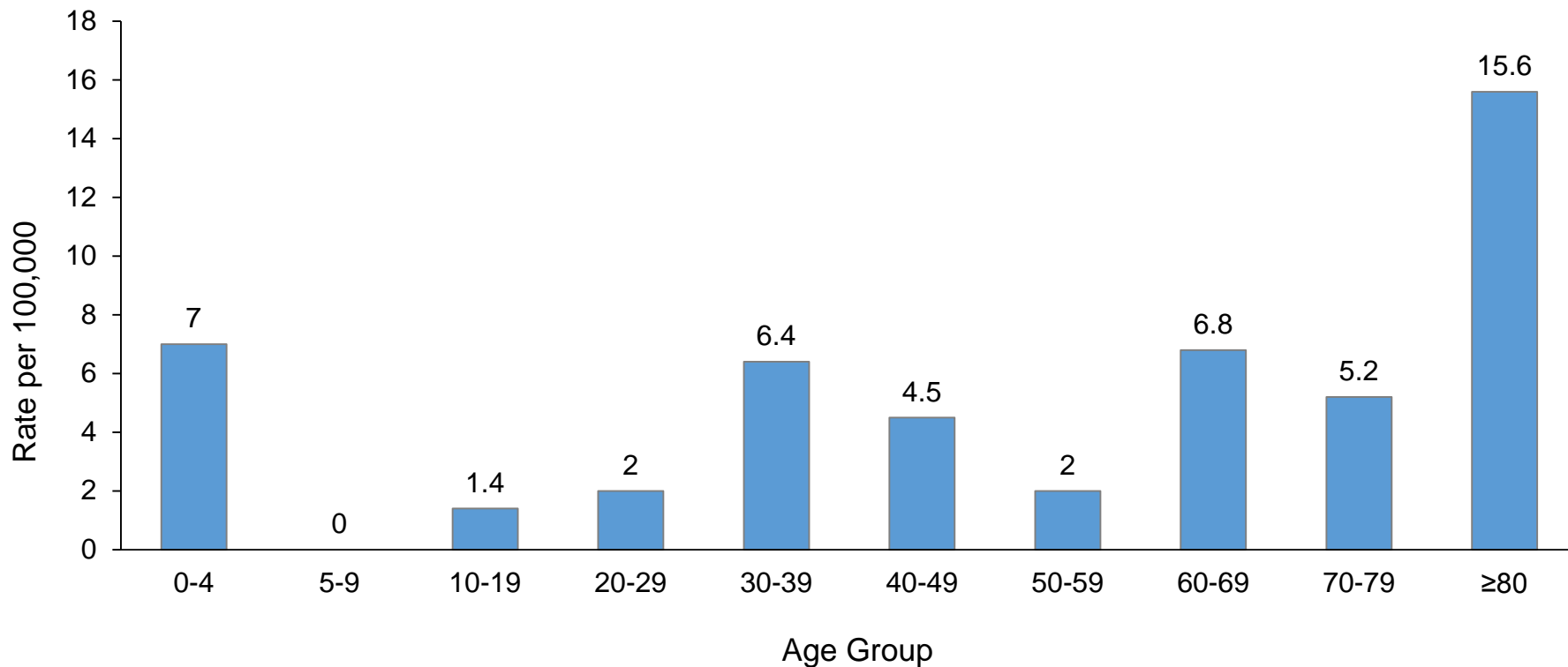
- In 2016, there were 45 cases of invasive Group A Streptococcal disease in Rhode Island.
- The incidence rate was 4.3 cases per 100,000 people.
- This is the highest number of cases and incidence rate for invasive Group A Streptococcal disease in the past five years.
- In recent years, the rates of disease seem to be increasing over time.
- It is unclear why rates appear to be changing this way.

# Reported Cases of Invasive Group A Streptococcus, Rhode Island, 2012-2016



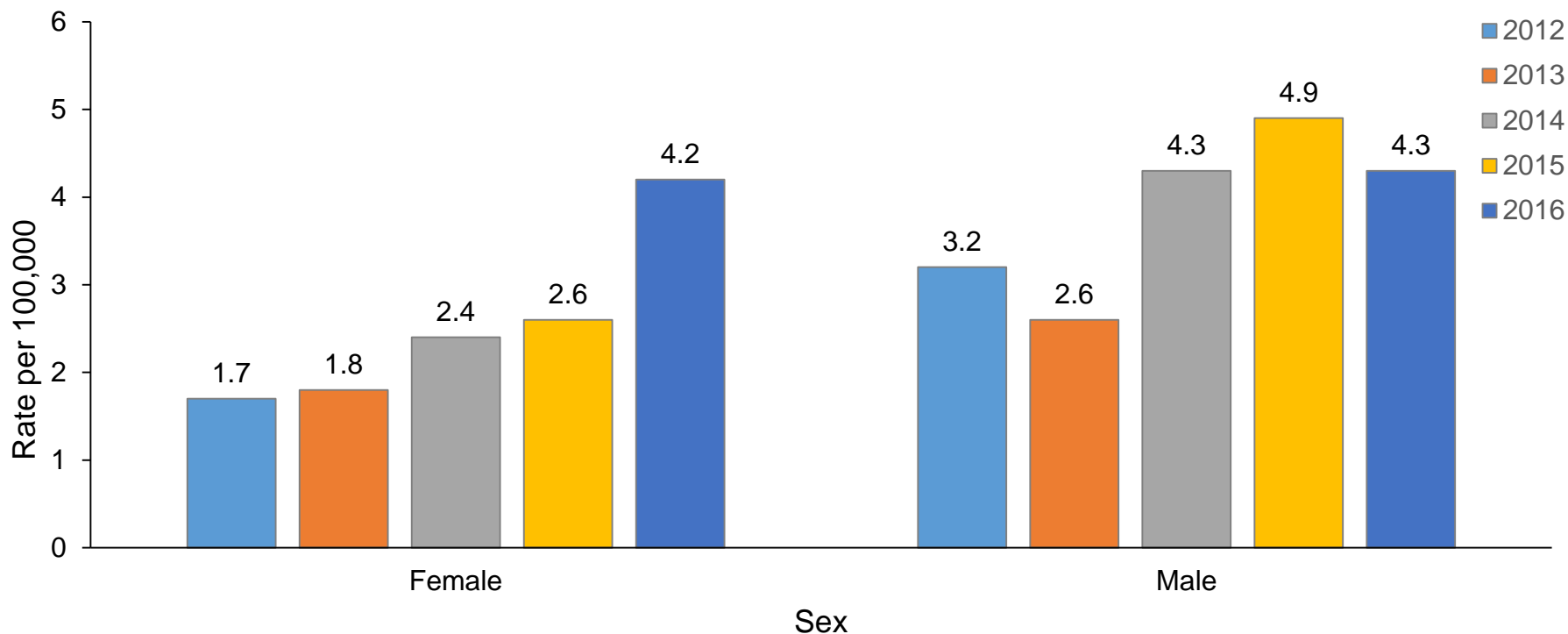
**Figure 1:** In 2016, there were 45 cases of invasive Group A Streptococcal disease in Rhode Island, with a rate of 4.3 cases per 100,000 population. This is the highest number of cases in the past five years. It is unclear why rates appear to be increasing over time.

# Rate of Invasive Group A Streptococcus, Age Group, Rhode Island, 2016



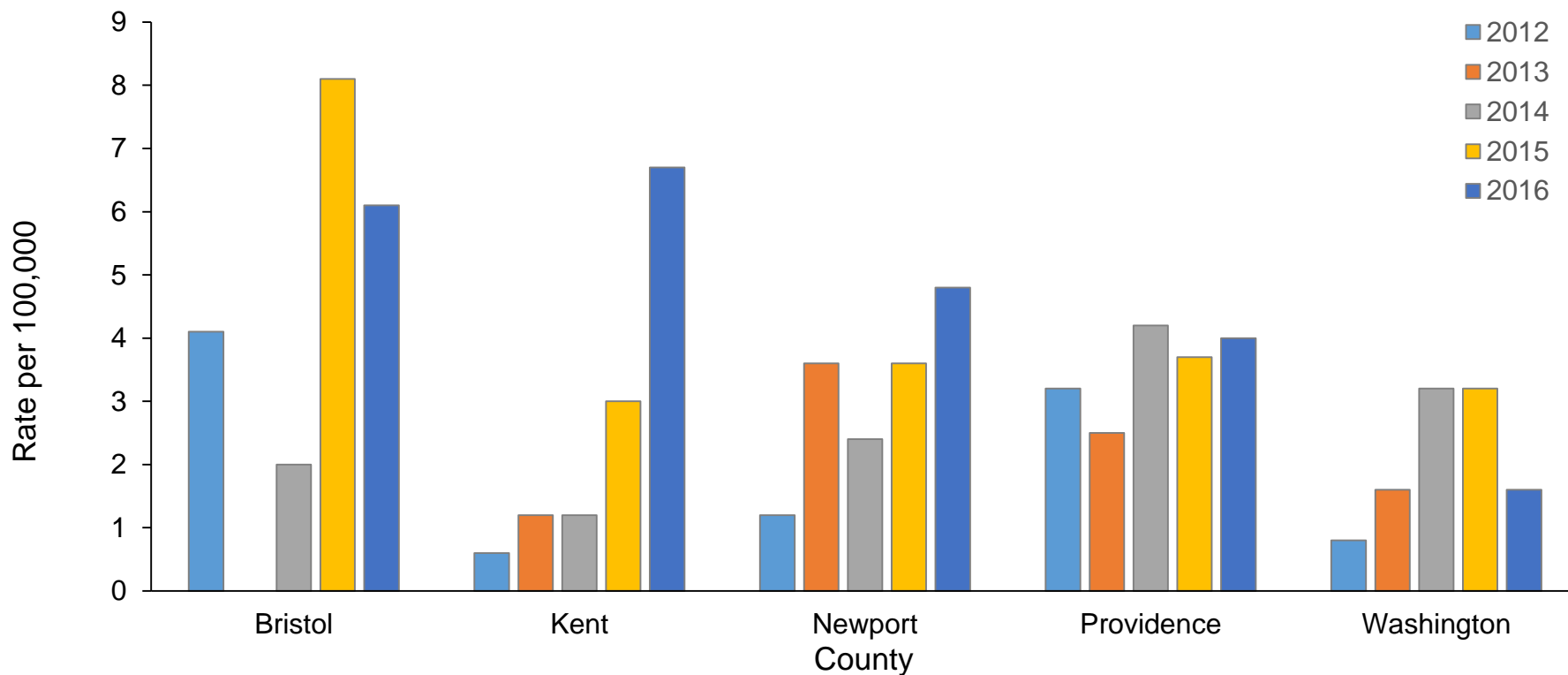
**Figure 2:** Invasive Group A Streptococcal disease disproportionately affects the elderly population as noted by the elevated rates for those 60 and older. In 2016, elderly persons aged 80 and older had the highest rate of invasive Group A Streptococcal infections with 15.6 cases per 100,000 population. Those 80 and over have the highest five-year average rate at 11.7 cases per 100,000 people.

# Rate of Invasive Group A Streptococcus, Gender and Year, Rhode Island, 2012-2016



**Figure 3:** In Rhode Island, males generally have higher rates of invasive Group A Streptococcal disease than females. In 2016, the rate in males and females was similar at 4.3 cases per 100,000 people and 4.2 cases per 100,000 people, respectively. It is unclear why rates in females were elevated in 2016.

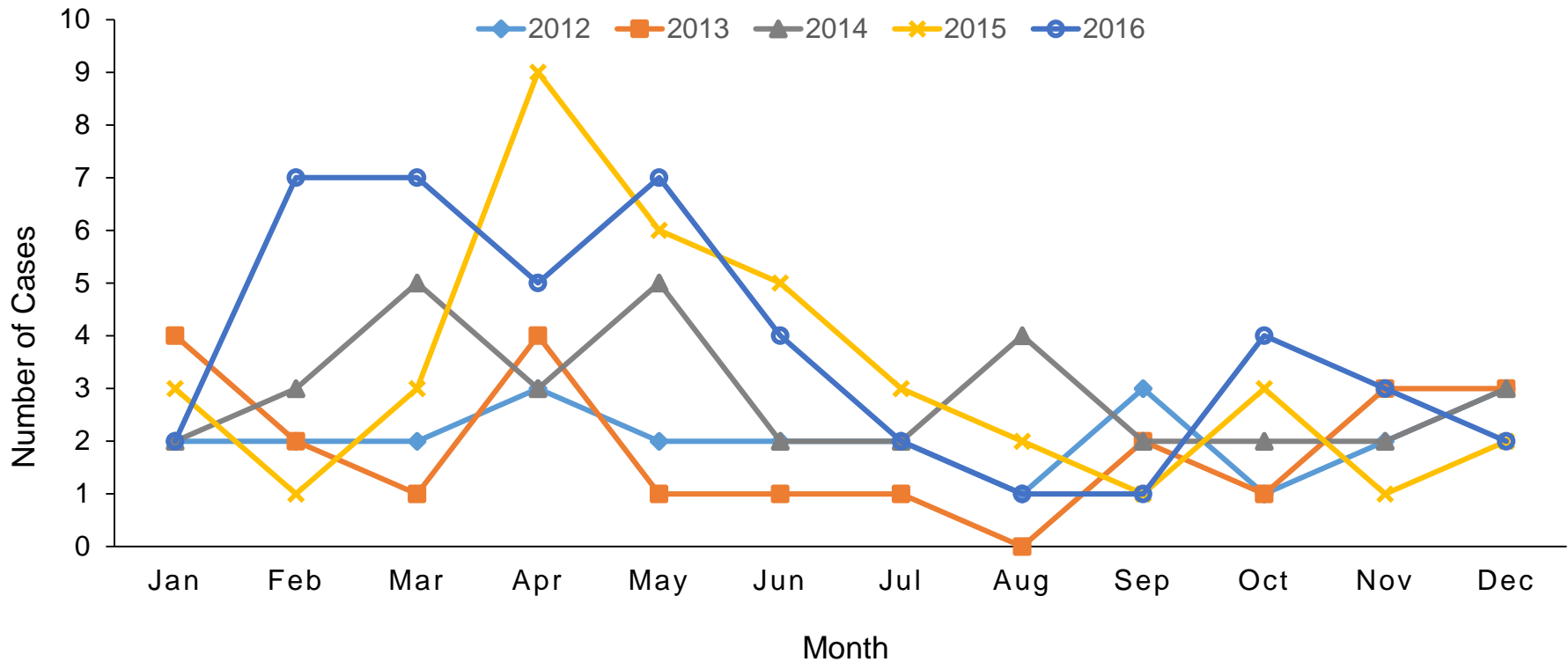
# Rate of Invasive Group A Streptococcus, County and Year, Rhode Island, 2012-2016



**Figure 4:** In 2016, Kent County had the highest rate of invasive Group A Streptococcus cases (6.7 cases per 100,000 people). Due to small case numbers, rates in counties fluctuate over time. The five-year average (2012-2016) rate was highest in Bristol County (4.1 cases per 100,000 people) and lowest in Washington County (2.1 cases per 100,000 people).



# Reported Cases of Invasive Group A Streptococcus, Month and Year, Rhode Island, 2012-2016



**Figure 5:** Invasive Group A Streptococcal disease occurs year-round in Rhode Island, with no clear trend in seasonality. There is no known reason for the increases in cases early in 2016.

# Invasive Group A Streptococcus Frequency and Rates by Year, Rhode Island, 2012-2016



**Table 1. Frequency by Year**

	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
<b>Number of Cases</b>	25	23	35	39	45

**Table 2. Rate by Year**

	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>
<b>Rate per 100,000</b>	2.4	2.2	3.3	3.7	4.3

# Invasive Group A Streptococcus Frequency, Age Group and Year, Rhode Island, 2012-2016



**Table 3. Frequency by Age Group and Year**

	2012	2013	2014	2015	2016
<b>0-4</b>	0	1	1	2	4
<b>5-9</b>	2	0	3	1	0
<b>10-19</b>	4	0	1	1	2
<b>20-29</b>	3	2	3	6	3
<b>30-39</b>	1	1	1	1	8
<b>40-49</b>	5	4	2	4	7
<b>50-59</b>	1	4	9	6	3
<b>60-69</b>	1	3	5	7	7
<b>70-79</b>	2	4	3	6	3
<b>≥80</b>	6	4	7	5	8
<b>Total</b>	25	23	35	39	45

# Invasive Group A Streptococcus Rates, Age Group and Year, Rhode Island, 2012-2016



**Table 4. Rate by Age Group and Year**

	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
<b>0-4</b>	0.0	1.7	1.7	3.5	7.0
<b>5-9</b>	3.3	0.0	5.0	1.7	0.0
<b>10-19</b>	2.8	0.0	0.7	0.7	1.4
<b>20-29</b>	2.0	1.4	2.0	4.1	2.0
<b>30-39</b>	0.8	0.8	0.8	0.8	6.4
<b>40-49</b>	3.2	2.6	1.3	2.6	4.5
<b>50-59</b>	0.7	2.6	5.9	4.0	2.0
<b>60-69</b>	1.0	2.9	4.9	6.8	6.8
<b>70-79</b>	3.5	6.9	5.2	10.4	5.2
<b>≥80</b>	11.7	7.8	13.6	9.7	15.6

# Invasive Group A Streptococcus Frequency and Rates, Gender and Year, Rhode Island, 2012-2016



**Table 5. Frequency by Sex and Year**

	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
<b>Female</b>	9	10	13	14	23
<b>Male</b>	16	13	22	25	22
<b>Total</b>	25	23	35	39	45

**Table 6. Rate by Sex and Year**

	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
<b>Female</b>	1.7	1.8	2.4	2.6	4.2
<b>Male</b>	3.2	2.6	4.3	4.9	4.3

# Invasive Group A Streptococcus Frequency, County and Year, Rhode Island, 2012-2016



**Table 7. Frequency by County and Year**

	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
<b>Bristol</b>	2	0	1	4	3
<b>Kent</b>	1	2	2	5	11
<b>Newport</b>	1	3	2	3	4
<b>Providence</b>	20	16	26	23	25
<b>Washington</b>	1	2	4	4	2
<b>All</b>	25	23	35	39	45

# Invasive Group A Streptococcus Rates by County and Year, Rhode Island, 2012-2016



**Table 8. Rate by County and Year**

	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
<b>Bristol</b>	4.0	0.0	2.0	8.0	6.1
<b>Kent</b>	0.6	1.2	1.2	3.0	6.7
<b>Newport</b>	1.2	3.6	2.4	3.6	4.8
<b>Providence</b>	3.2	2.6	4.2	3.7	4.0
<b>Washington</b>	0.8	1.6	3.2	3.2	1.6

# Invasive Group A Streptococcus Frequency, Month and Year, Rhode Island, 2012-2016



**Table 9. Frequency by Month and Year**

	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
<b>Jan</b>	2	4	2	3	2
<b>Feb</b>	2	2	3	1	7
<b>Mar</b>	2	1	5	3	7
<b>Apr</b>	3	4	3	9	5
<b>May</b>	2	1	5	6	7
<b>Jun</b>	2	1	2	5	4
<b>Jul</b>	2	1	2	3	2
<b>Aug</b>	1	0	4	2	1
<b>Sep</b>	3	2	2	1	1
<b>Oct</b>	1	1	2	3	4
<b>Nov</b>	2	3	2	1	3
<b>Dec</b>	3	3	3	2	2
<b>All</b>	25	23	35	39	45





# Notes on Data

- Case counts include patients classified as confirmed and probable cases.
- “Event Date” (used to classify cases by month and year) is generated based on the availability of data in the following order:
  1. Illness onset date
  2. Specimen collection date
  3. Date of report to public health agency
- Rate is calculated per 100,000 population. The population denominator is based on 2010 US Census Population.