



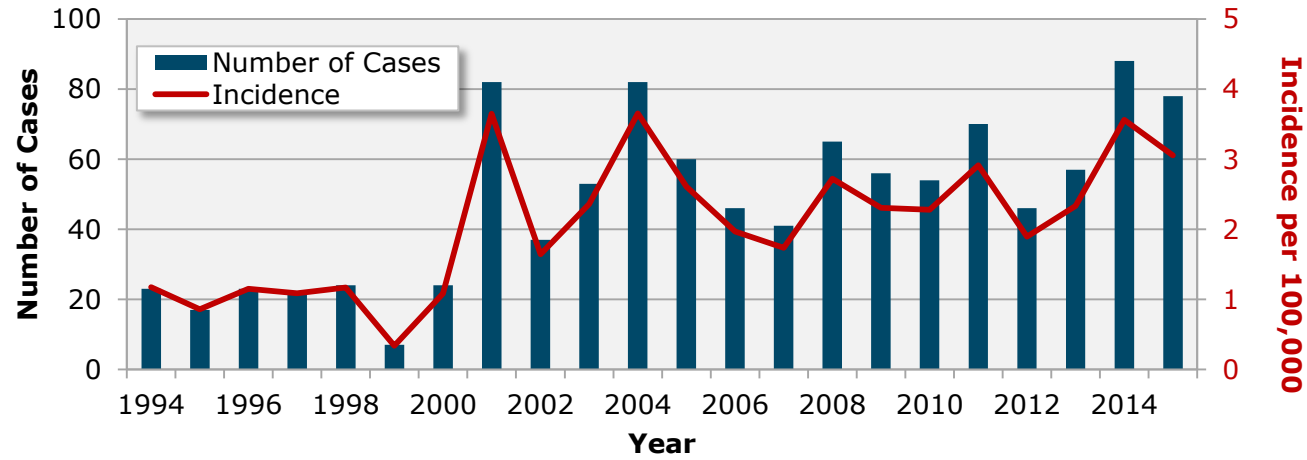
# 2015 Profile of Invasive Group A *Streptococcus* in Dallas County

## Dallas County Health and Human Services

### Summary of Invasive Group A *Streptococcus* Cases, 2015

	n (%)	Incidence per 100,000
<b>Total</b>	78 (100.0)	3.1
<b>Sex</b>		
Male	43 (55.1)	3.4
Female	35 (44.9)	2.7
<b>Race/Ethnicity</b>		
Hispanic	21 (26.9)	2.1
White	28 (35.9)	3.5
Black	27 (34.6)	4.7
Asian	2 (2.6)	1.3
American Indian	0	N/A
<b>Age Group (years)</b>		
<1	0	N/A
1-4	4 (5.1)	2.6
5-9	2 (2.6)	1.0
10-14	2 (2.6)	1.1
15-19	0	N/A
20-29	6 (7.7)	1.5
30-39	7 (9.0)	1.8
40-49	8 (10.3)	2.4
50-59	18 (23.1)	5.7
≥60	31 (39.7)	8.3
<b>Hospitalizations</b>	36 (46.2)	1.4
<b>Deaths</b>	4 (5.1)	0.2
<b>Isolation Site of Culture</b>		
Blood	73 (93.6)	N/A
Bone	1 (1.3)	N/A
Joint	1 (1.3)	N/A
Peritoneal fluid	1 (1.3)	N/A
Pleural fluid	2 (2.6)	N/A

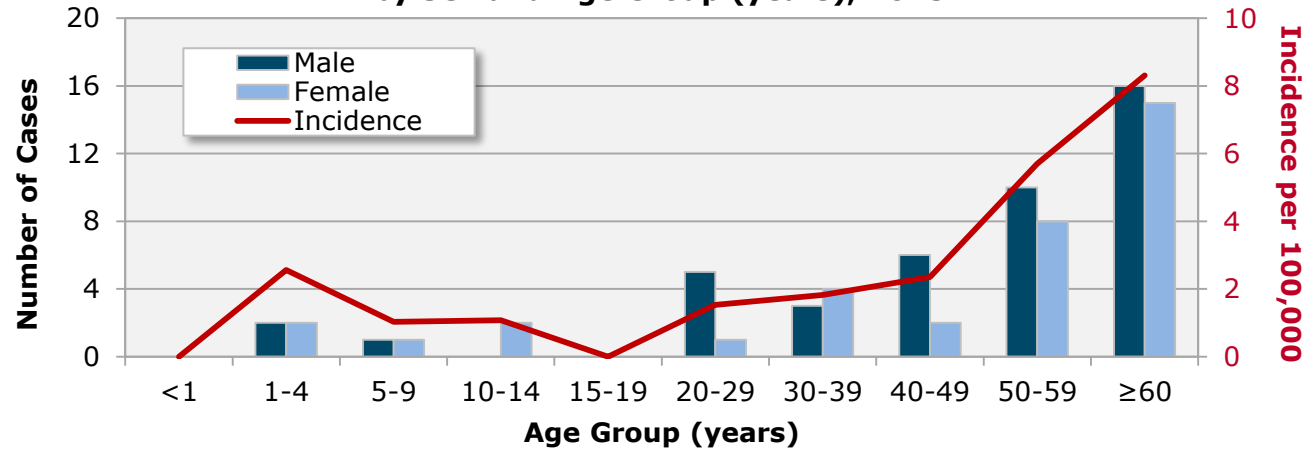
### Invasive Group A *Streptococcus* Cases and Incidence by Year of Onset, Dallas County, 1994-2015



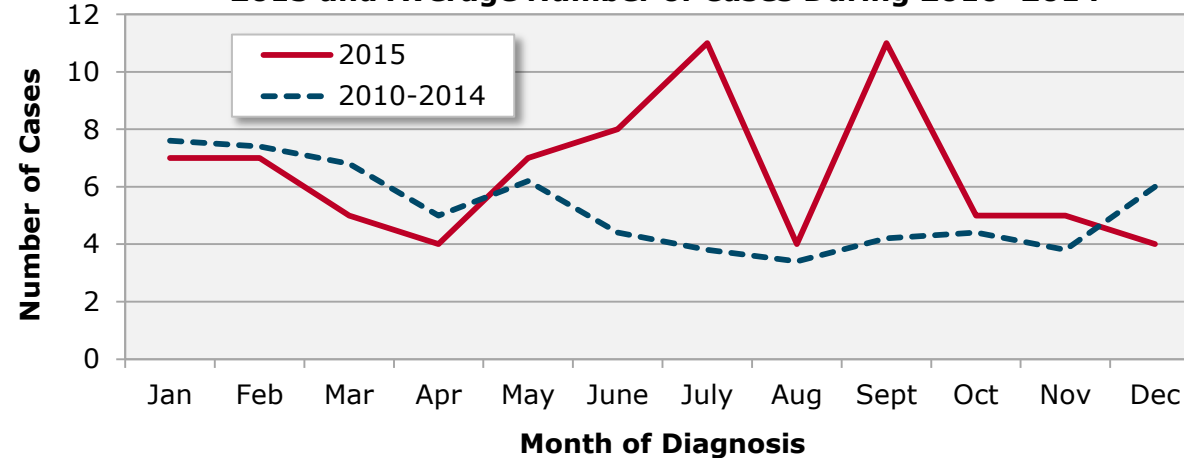
### Summary

- Invasive group A *Streptococcus* (GAS) illnesses are identified by isolation of *Streptococcus pyogenes* by culture from normally sterile sites (e.g. blood, CSF, pleural fluid) or culture from any site when necrotizing fasciitis or toxic shock syndrome is present.
- Clinical syndrome manifestations of invasive GAS infections include necrotizing fasciitis, toxic shock syndrome, septic arthritis, bacteremia, pneumonia and puerperal sepsis.
- Persons at increased risk of invasive GAS infections include those who are elderly, immunosuppressed, or have chronic illnesses like cancer and diabetes, or have skin lesions (such as cuts, chickenpox, or surgical wounds).

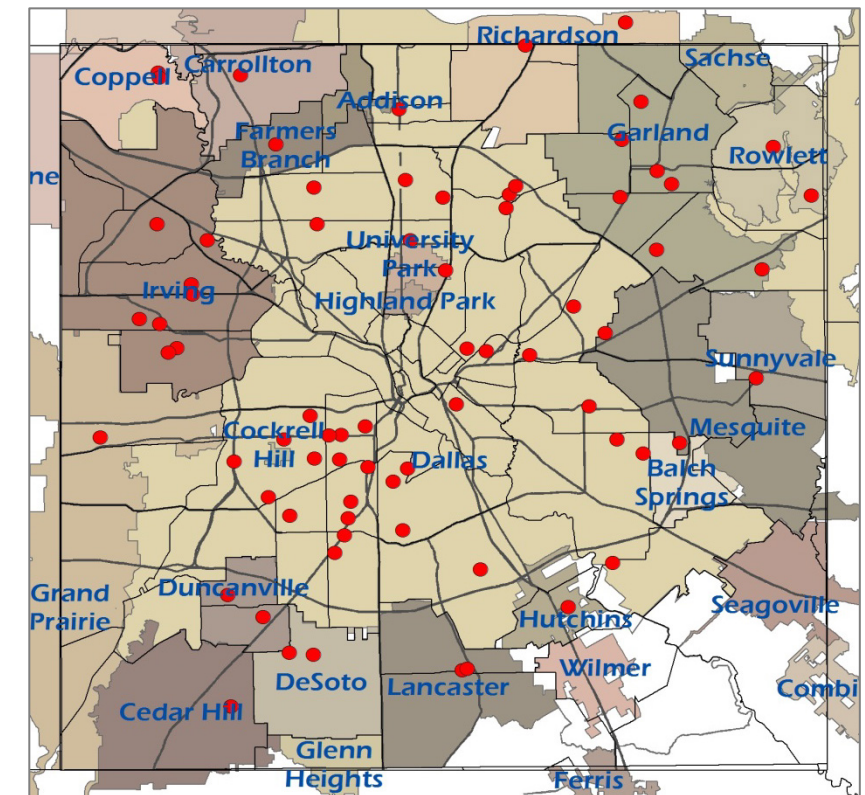
### Invasive Group A *Streptococcus* Cases and Incidence by Sex and Age Group (years), 2015



### Invasive Group A *Streptococcus* Cases by Month of Diagnosis, 2015 and Average Number of Cases During 2010-2014



### Distribution of Invasive Group A *Streptococcus* Cases, 2015



Note: Incidence calculated using projected population data for 2015  
 Data Sources: Dallas County Department of Health and Human Services, Epidemiology Division; National Electronic Disease Surveillance System (NEDSS); Population data obtained through the Centers for Disease Control and Prevention: WONDER Bridged-Race Population Estimates 1990-2015.