2019-2023 Kentucky Reportable Diseases Table Summary

The data in this table shows the counts for the reportable diseases in the state of Kentucky from the years 2019-2023. Data was collected from CDC Wonder and NEDSS. Data is passively reported to public health by providers and laboratories following 902 KAR 2:020. The 902 KAR 2:020 regulation states clinical isolates or clinical specimens must be sent to the Kentucky Division of Laboratory Services by the reference laboratory for primary or confirmatory testing and reported to the local health department where the patient resides. A CDC surveillance case definition was used to define each disease for public health collection and classification. CDC surveillance case definitions are different from clinical diagnoses of a disease by a healthcare provider and are not intended for healthcare providers' diagnoses. Therefore, the counts on this table may vary from clinically diagnosed cases. Also included in this table, are the rates for individual years as well as the 5-year annual rate. Census population estimates for the State of Kentucky for each year were used to calculate the rates. These values can be used to compare any changes in counts/rates for each disease between the years 2019 and 2023.

Some findings to note include:

- A slight increase in reporting of CPOs could be a result of improved reporting and testing capability for CPOs during the COVID-19 pandemic. The lower number of CPO reports in 2020 could be due to a noted decline in identification of OXA carbapenemase during that year.
- The rise in tuberculosis cases is symmetrical and likely follows a recurring trend every 5-10 years, making it unrelated to any specific event.
- The HIV/AIDS average annual new cases for Kentucky are around 350 cases per year. The cases took a dip during 2020 (COVID year) and then increased above the baseline during 2021, 2022 and 2023. More information about HIV/AIDS data can be found on the KDPH HIV/AIDS Section website.
- A case definition change of Acute Hepatitis C in 2020 allows for use of more objective laboratory data and reduces reliance on subjective symptom data, improving the ability to classify cases accurately.
- The Hepatitis A counts for 2019 are higher because of the outbreak that occurred in 2017 and continued for a couple of years.

Continual monitoring of these diseases is important to understand the burden of diseases among the Commonwealth of Kentucky and to identify any trends that may indicate any emerging public health threats or the effectiveness of public health interventions. Public health officials, researchers, and policymakers can examine this data to influence decisions about resource allocation, preventive measures, and areas that need further investigation.

Data for the years 2020-2024 will be updated by the end of 2025.