

EPI INSIGHT: CONNECTING THE DOTS

Wake County Health and Human Services (WCHHS) Epidemiology (Epi) Program Newsletter



Welcome to Epi Insight!

Dear Epi Enthusiasts,

Spring is here, bringing fresh air and fresh challenges. As the public health landscape continues to shift at the national level, our commitment at the local level stays strong. We know how important it is to stay connected, informed, and resilient. In this edition of Epi Insight: Connecting the Dots, we're sharing timely updates, uplifting local work, and continuing to highlight the power of data and collaboration.

Thank you for staying in this with us. We appreciate your partnership and hope you enjoy this edition.

Epi Program Members:

- Morgan Poole, Epi Program Manager: Leading our team with a focus on COVID-19 Surveillance and Guidance, Wastewater Surveillance, Mpox Surveillance, and Heat-Related Illness Surveillance.
- Katie LaWall, Senior Epidemiologist: Specializing in Injuries (including overdoses), Sexually Transmitted Diseases (STDs), ArcGIS/mapping, and Communicable Diseases (including outbreaks as needed).
- Akanksha Acharya, Senior Epidemiologist: Bringing expertise in Respiratory Virus Surveillance, Communicable Diseases, Chronic Diseases, and Mental Health.
- Marlene Kurt, Epidemiology Specialist: Diving deep and bringing knowledge and expertise in Wastewater Surveillance, COVID-19 Data and Research, Maternal and Child Health Data, ArcGIS/mapping, and often serving as our Community Health Worker Liaison.

Together, we find excitement in supporting various areas of public health. We invite you to follow our journey and engage through our quarterly newsletters.

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EPI WORD OF THE DAY

Welcome to the "Epi Word of the Day," where we share key epidemiological terms to deepen your knowledge and enhance your work in public health. This edition's word is...

OUTBREAK

- **Definition:** An outbreak happens when more people than usual get sick in a specific area or group within a set time. It can also refer to two or more cases of a disease or illness that are linked, meaning they likely came from the same source. Outbreaks can be small, affecting a single community, or larger, spreading across multiple locations. Additionally, outbreaks can be associated with specific locations such as restaurants.

During an outbreak, the response varies based on its type, involving teams like the **Epidemiology Program, Communicable Disease Program, Environmental Health and Safety Program** and **Communications**. These teams collaborate with healthcare providers, local businesses, and restaurants to investigate the situation, pinpoint the source, assess cases, and implement strategies to prevent further spread.

Example: Between May 1-August 31, 2024, there was a total of 142 Cyclosporiasis cases reported in Wake County. Of those 142 cases, 35 probable and confirmed cases were investigated as a part of a foodborne illness **outbreak** associated with local restaurants in Wake County.

Why it Matters: Early detection and reporting are key to controlling outbreaks. If you become sick or notice an unusual number of people getting sick, reporting it can help prevent more illnesses.

 **Non-Urgent Reports:** Call 919-250-4462 and leave a message with your contact information. A Communicable Disease nurse will return your call the next business day. Messages are checked daily at 9 a.m., 1 p.m., and 5 p.m., including weekends and holidays.

 **Urgent Reports:** If you suspect a serious public health threat, such as measles, mumps, or another rapidly spreading illness, call 919-250-1217. Calls will be answered or returned within 15 minutes.

By staying informed and reporting concerns, we can all help keep Wake County healthy!

EPI SNAPSHOT

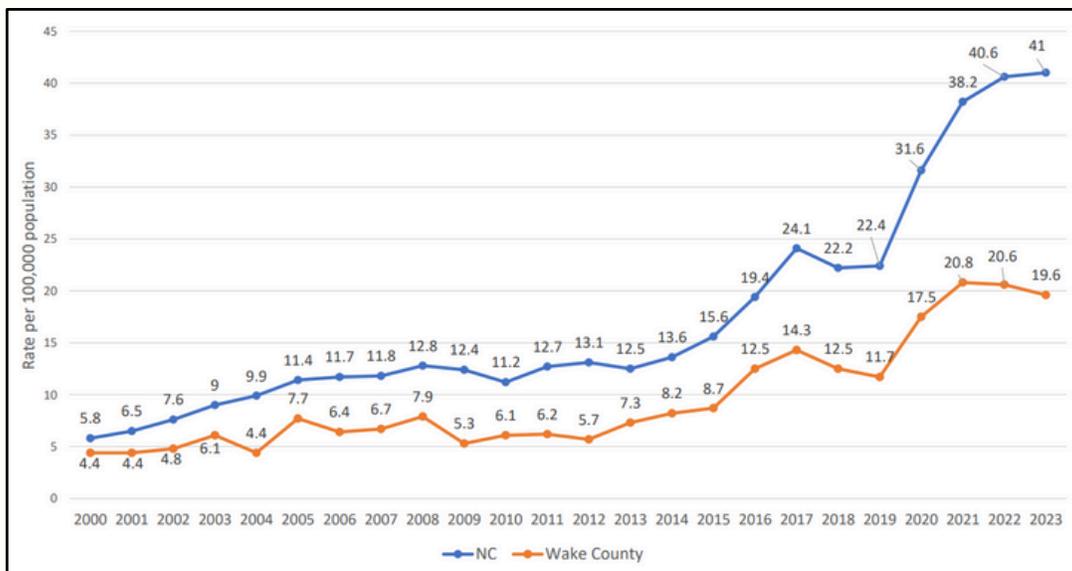
by Katie LaWall, Senior Epidemiologist

Epidemiology Snapshot: Drug Overdose Trends

Welcome to our latest Epidemiology Snapshot, where we provide a concise overview of recent and current disease/illness trends and surveillance efforts. In this edition, we focus on drug overdose trends, highlight different substances, how to recognize the signs of an opioid overdose, and what Wake County is doing to address the issue.

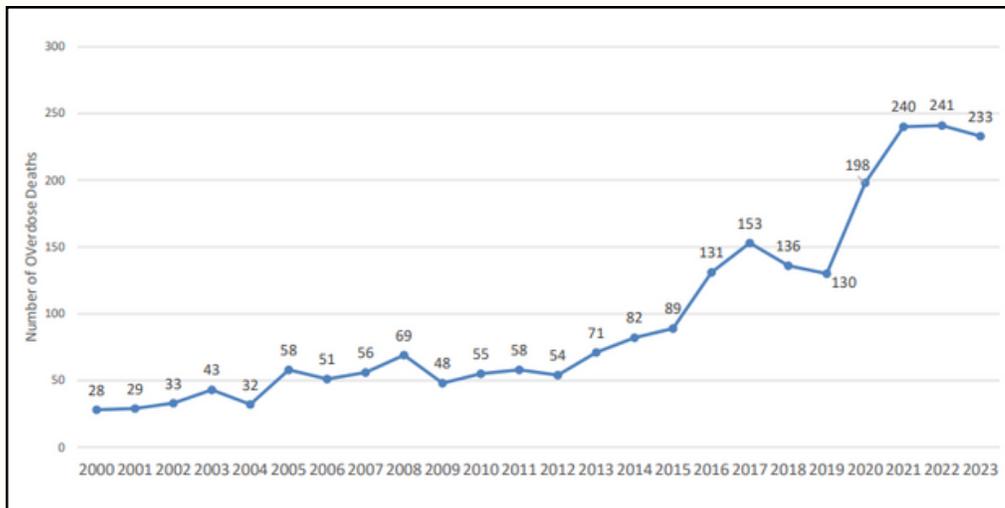
Background and Trends: The number of drug overdose deaths in the U.S. in 2023 was 3.5 times that of 2003, although drug overdose deaths decreased by 3% between 2022 and 2023 (CDC). In 2023, an estimated 105,007 (in 2022, 107,941) drug overdose deaths took place in the U.S. In North Carolina, more than 41,500 individuals have lost their lives to overdoses between 2000 and 2023 (NC DPH Injury and Violence Prevention Branch). In Wake County, there were more than 1,800 overdose deaths from 2010 to 2023, with the annual counts slightly decreasing from 2022 (241) to 2023 (233). Since 2000, Wake County’s overdose death rate, which includes overdoses from all drug types, has been lower than the statewide rate for North Carolina.

Drug Overdose Death Rates, NC Compared to Wake County, 2000-2023



SOURCE: NORTH CAROLINA OVERDOSE EPIDEMIC DATA INTERACTIVE DASHBOARD, [HTTPS://WWW.DPH.NCDHHS.GOV/PROGRAMS/CHRONIC-DISEASE-AND-INJURY/INJURY-AND-VIOLENCE-PREVENTION-BRANCH/NORTH-CAROLINA-OVERDOSE-EPIDEMIC-DATA](https://www.dph.ncdhhs.gov/programs/chronic-disease-and-injury/injury-and-violence-prevention-branch/north-carolina-overdose-epidemic-data), ACCESSED 5/6/2025

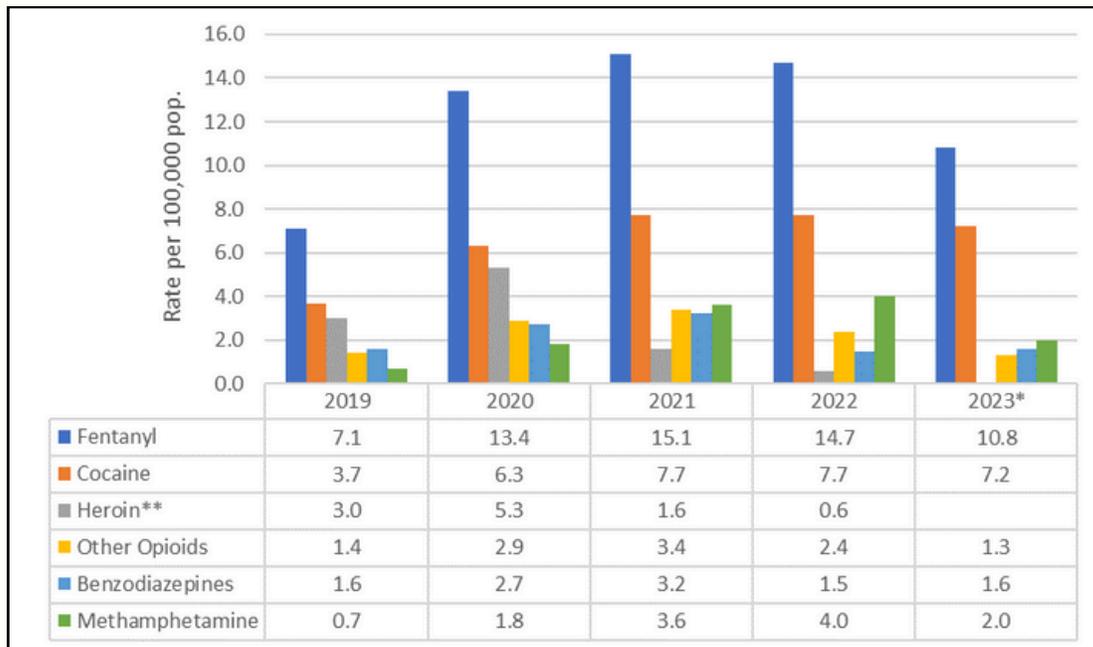
Drug Overdose Death Counts in Wake County, 2000-2023



SOURCE: NORTH CAROLINA OVERDOSE EPIDEMIC DATA INTERACTIVE DASHBOARD, [HTTPS://WWW.DPH.NCDHHS.GOV/PROGRAMS/CHRONIC-DISEASE-AND-INJURY/INJURY-AND-VIOLENCE-PREVENTION-BRANCH/NORTH-CAROLINA-OVERDOSE-EPIDEMIC-DATA](https://www.dph.ncdhhs.gov/programs/chronic-disease-and-injury/injury-and-violence-prevention-branch/north-carolina-overdose-epidemic-data), ACCESSED 4/11/2025

Wake County saw a substantial increase in fentanyl-related deaths through 2021. In 2022 and 2023, deaths involving most drug types—including cocaine and heroin—began to decline, while deaths involving benzodiazepines remained stable. Overdose deaths involve a combination of drugs, and individual deaths may be reported in more than one of those categories. The substance category of “other opioids” includes substances such as prescription opioids like morphine, codeine, and oxycodone (among others). Benzodiazepines, frequently referred to as “benzos” are depressant substances that cause sedation and hypnosis, and reduce anxiety, muscle spasms, and seizures. Some common brands of benzodiazepines include Xanax, Ativan, Klonopin, and Versed (among others).

Overdose Death Rates by Substance, Wake County, 2019-2023*



NOTE: OVERDOSE DEATHS USUALLY INVOLVE A COMBINATION OF DRUGS. INDIVIDUAL DEATHS MAY BE REPORTED IN MORE THAN ONE CATEGORY. *2023 DATA ARE PROVISIONAL. **2023 RATE FOR HEROIN IS SUPPRESSED DUE TO LOW COUNTS (1-4). SOURCE: NCDHHS DIVISION OF PUBLIC HEALTH, INJURY AND VIOLENCE PREVENTION BRANCH, PROVIDED BY REQUEST, 08/2024.

Recent trends show that males are consistently more likely to die from an overdose and visit the emergency department (ED) for a suspected drug overdose than females. Between 2019 and 2023, the Non-Hispanic Black population had a higher rate of dying from an unintentional poisoning (majority of drug overdoses) than the Non-Hispanic White population. The 25-34 and 35-44 age groups accounted for over 50% of unintentional poisoning deaths in Wake County between 2019 and 2023.

More overdose data and trends can be found in the [annual Injury Report](#) and [annual Drug Overdose Integrated Epidemiologic Profile](#).

Here are some signs to look for (CDC):

- Unconsciousness or inability to awaken
- Slow or shallow breathing or difficulty breathing such as choking sounds or a gurgling/snoring noise from a person who cannot be awakened
- Discolored skin (especially in nails or lips)
- Small, constricted "pinpoint pupils" that don't react to light

Steps to take if someone is overdosing (CDC):

- Administer an overdose reversal medication like naloxone (if available) and call 911. Naloxone kits are available for free, dependent on supply, at the Wake County Health and Human Services Pharmacy.
- Try to keep the person awake and breathing.
- Lay the person on their side to prevent choking.
- Stay with the person until emergency assistance arrives.

Wake County Drug Overdose Prevention Initiative and Opioid Settlement Program:**Drug Overdose Prevention Initiative**

The Drug Overdose Prevention Initiative is designed to prevent and reduce substance use disorders in at-risk populations, support harm-reduction strategies, and link individuals to services to address social determinants of health. Through the Initiative, Wake County contracts with Healing Transitions, The Alice Aycock Poe Center for Health Education and Recovery Communities of North Carolina to address substance use and prevention efforts. More information on the Drug Overdose Prevention Initiative can be found [here](#).

Opioid Settlement Program

In July 2021, a bipartisan coalition of state attorneys general announced the National Opioid Settlement—a historic \$26 billion agreement to support communities harmed by the opioid epidemic. The state of North Carolina and all 100 counties, including Wake County, joined the agreement. In April 2024, the Wake County Board of Commissioners approved the Wake County Opioid Settlement Funding Plan for Fiscal Year 2025, which has allocated \$12.5 million for use through June 2025 to achieve improvements in key strategy areas with a focus on youth, historically marginalized populations, and residents involved in the justice system. This is part of a larger plan to invest approximately \$67.7 million into fighting the opioid epidemic from 2022 through 2038. More information on the national opioid settlement and Wake County's portion of it can be found [here](#).

EPI HUMOR CORNER

This issue's laugh:

“What do you call a disease when it makes a comeback?”

A viral trend.

RECENT PUBLICATIONS

FROM THE WAKE COUNTY EPIDEMIOLOGY PROGRAM

- 2025 Mental Health Issue Brief: Youth Mental Health
- 2024 Mental Health Issue Brief: Suicide
- 2024 Public Health Maternal and Child Health Report
- 2024 Public Health Communicable Disease Report
- 2024 Public Health Injury Report
- 2023 Public Health Chronic Disease Report
- 2023 Wake County Drug Overdose Integrated Epidemiologic Profile (DOIEP)
- For all other reports and briefs, please visit wake.gov/epidemiology

BEHIND THE RESPONSE: Tracking Measles and H5N1 Avian Influenza in 2025

by Morgan Poole, Epidemiology Program Manager

As public health professionals, we know that disease prevention doesn't take a day off. In 2025, we find ourselves responding to two very different, yet equally concerning public health challenges—measles and H5N1 avian influenza. Each presents unique threats, and both underscore the critical role of surveillance, vaccination, and coordinated response.

Measles: A Reemerging Threat

After years of low case counts, measles is making an alarming return. According to the Centers for Disease Control and Prevention ([CDC](#)), as of April 10, 2025, there have been 712 confirmed cases reported in 25 states—the highest count in over a decade. Seven outbreaks account for most of these cases, with a heavy concentration in Texas, where over 500 cases have been documented, primarily in areas with low immunization rates. While measles was declared eliminated in the U.S. in 2000, the recent rise in vaccine hesitancy and delays in routine childhood immunizations during the COVID-19 pandemic have created fertile ground for its resurgence. In 2025, the majority of cases have occurred among unvaccinated individuals, with three confirmed deaths already reported—two children in Texas and one adult in New Mexico.

The CDC and local health departments are responding with case investigations, contact tracing, community outreach, and targeted vaccination campaigns. National surveillance is coordinated through the National Notifiable Diseases Surveillance System (NNDSS), which allows real-time monitoring and facilitates a swift response. Public health educators are also working to counter misinformation and build vaccine confidence in communities most affected.

H5N1 Avian Influenza: Vigilance Amidst Low Public Risk

The H5N1 avian influenza outbreak, initially affecting poultry, has now extended to dairy cows and humans. As of February 24, 2025, the [CDC](#) has confirmed 70 human cases of H5N1 in the United States since April 2024. Most of these infections have been linked to direct exposure to infected dairy cows or poultry. Tragically, the U.S. recorded its first H5N1-related death in January 2025—a resident of Louisiana.

The CDC is utilizing a multifaceted surveillance strategy, including enhanced monitoring of individuals exposed to infected animals, wastewater surveillance to detect early signs of outbreaks, and collaborations with laboratories to increase testing capacity for H5N1. The CDC also continues to collaborate with agencies like the United States Department of Agriculture ([USDA](#)) and the Food and Drug Administration ([FDA](#)) to address the outbreak. Key initiatives include targeted education campaigns for farmworkers, advising the public to avoid contact with sick or dead animals, encouraging individuals to get the flu vaccine, and discouraging the consumption of raw dairy products.

Staying Ahead of the Curve

Both the measles outbreaks and H5N1 detections reflect the importance of foundational public health work: routine immunization, strong surveillance infrastructure, interagency collaboration, and transparent risk communication. These aren't just cornerstones of outbreak response—they are the bedrock of community protection.

Whether it's responding to vaccine-preventable diseases or preparing for emerging zoonotic threats, public health is most effective when it's proactive, not reactive. The good news? Every case investigated, every vaccination administered, and every partner engaged is a step toward containment and, ultimately, prevention. **Let's stay vigilant, informed, and continue to lead with science.**

COMMUNITY CONNECTION: Five Years After COVID-19 Began - What the Epi Reflection Wall Says About Where We Are Now

by Marlene Kurt, Epidemiology Specialist

Last month, we marked the five-year anniversary of COVID-19 with a simple poster board we called the Epi Reflection Wall. It wasn't elaborate, just sticky notes and a prompt inviting staff to reflect on what the pandemic meant to them, their work, their teams, or their community. The responses were honest and unfiltered. Some shared feelings of burnout. Others wrote about pride. One note just said, "Tired." It was a reminder that although the public health emergency officially ended, many of us are still carrying the weight of it.

EPI REFLECTION WALL

Five Years Since the Start of COVID-19: Looking Back, Moving Forward

WHAT IS THIS?

It has been five years since the COVID-19 pandemic upended our world, changing public health, our communities, and our daily lives in ways we never expected.

From the early response efforts to the ongoing impacts today, we've faced challenges, growth, and resilience—both individually and as a team.

This wall is a space to reflect on that journey, recognize what we've overcome, and share what we've learned as we continue shaping the future of public health.

SINCERELY FROM OUR EPIDEMIOLOGY PROGRAM:
MORGAN POOLE
AKANKSHA ACHARYA
KATIE LAWALL
MARLENE KURT

HOW TO PARTICIPATE:

Grab a sticky note and add your thoughts! You can share:

- One word that describes your experience during the COVID-19 response
- A memorable moment – a major challenge, a proud achievement, or even a lighthearted team memory
- A lesson learned – something this experience taught you about public health or yourself
- Advice you would give your past self in early 2020

Share your thoughts throughout the week!

WHY ARE WE DOING THIS?

COVID-19 was one of the greatest public health challenges of our time. Looking back helps us process how far we've come, recognize our collective efforts, and carry forward valuable lessons. By reflecting together, we can:

- Acknowledge the hard work and resilience of our team
- Learn from the past to improve future public health responses
- Appreciate the strength of our field and the people in it.

Now, five years later, we're not in crisis mode, but the pressure hasn't let up. In some ways, it's grown. Over 700 measles cases have been reported across more than 25 states this year, most in people who were unvaccinated. Avian influenza (H5N1) has moved from poultry to dairy cows. Since April 2024, there have been 70 human cases in the U.S., including one death. These aren't just headlines. They're reminders that infectious threats don't wait for us to rebuild and they're not isolated events. Vector-borne diseases, antimicrobial resistance, opioid overdoses, and chronic disease inequities continue to challenge public health systems on every front. And yet, much of the infrastructure built during the pandemic is now being scaled back or lost.



In our department, we've had to get creative. We've leaned on each other, cross-trained staff, prioritized high-risk settings, and tried to stay ready to pivot when guidance shifts. We've focused more on community partnerships and fast communication. Even when we're tired, the work keeps showing up, and so do we.

That's what the Reflection Wall reminded me of. That behind the data and the dashboards are people. People who are still trying to do good work, even with limited tools. People who care deeply, even when public trust feels shaky. People who know that part of rebuilding trust means listening, validating, and being willing to say, "I don't know, but I'll find out."

We know this field doesn't stay in the spotlight for long but public health work never disappears. It shifts. It adapts. And it continues because we do.

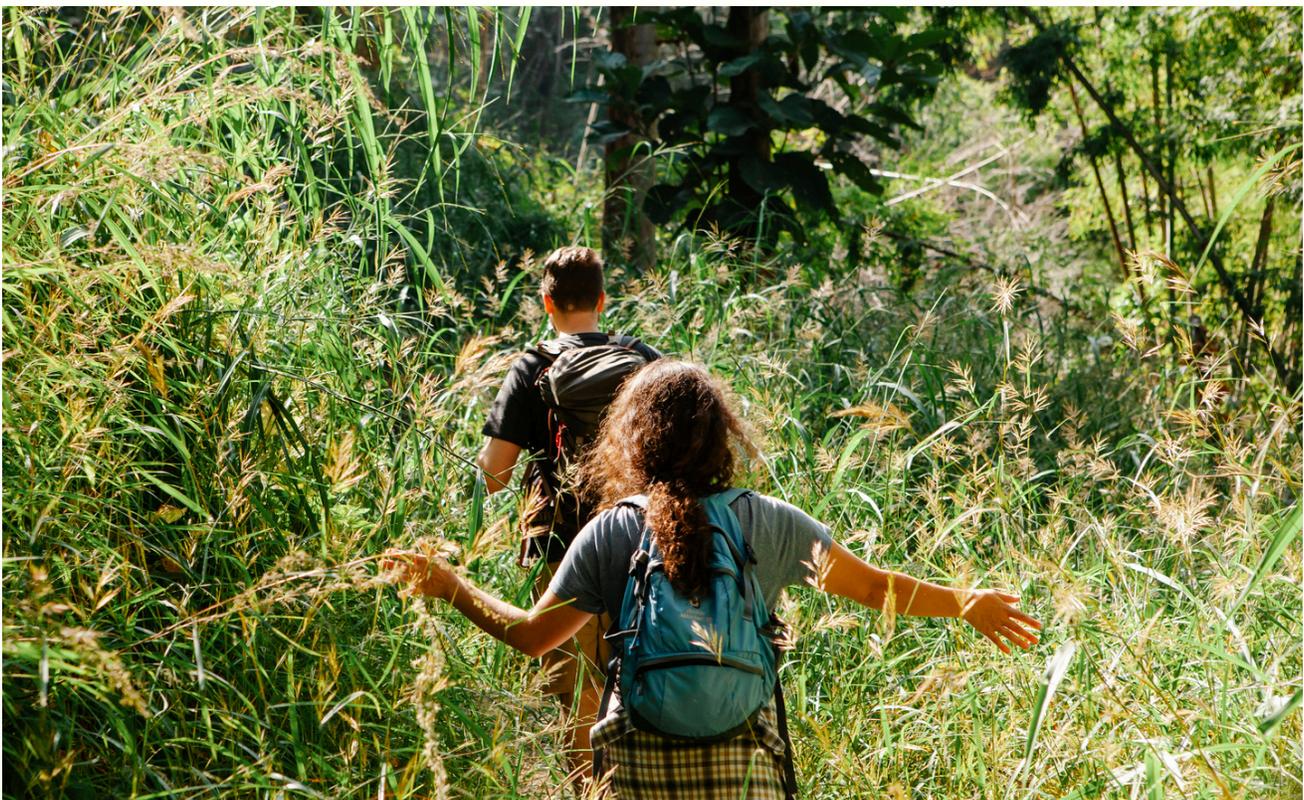
Preparing for Summer in Wake County: Your Essential Guide to a Fun Season!

by Akanksha Acharya, Senior Epidemiologist

The sun is shining, the days are longer, and summer has finally arrived in Wake County! Whether you're hiking through the woods, enjoying the lake, or simply relaxing in your backyard, there's no better time to embrace the great outdoors. But as we dive into summer fun, we also need to stay smart about our health. Here's how you can protect yourself and your loved ones while making the most of this beautiful season.

Watch out for mosquitoes and ticks:

While the outdoors is calling, mosquitoes and ticks are also out and about, bringing the risk of diseases like Lyme disease, Ehrlichiosis, Dengue, and Malaria. Tick and mosquito-transmitted diseases affect people across the United States and are significant health threats in North Carolina. Based on public health surveillance conducted by the North Carolina Department of Health and Human Services Division of Public Health, almost 800 cases of tick and mosquito-borne diseases were reported among people in North Carolina last year.



Mosquito Protection:

- Dress in long sleeves and pants when possible.
- Use EPA-approved insect repellent with DEET, picaridin, or oil of lemon eucalyptus.
- Eliminate standing water around your home, think about those flowerpots, birdbaths, and gutters where mosquitoes love to breed!
- Keep doors and windows screened to keep them out.

Tick Protection:

- Wear light-colored clothing so ticks are easier to spot.
- Tuck your pants into socks or boots and stay on trails to avoid tick-heavy areas.
- After outdoor adventures, do a thorough tick check, especially around your hairline, underarms, and waist.
- Protect your pets with vet-approved tick prevention.

For more tips on mosquito and tick prevention, visit: [CDC Vector-Borne Diseases](https://www.cdc.gov/vector-borne-diseases/).



Join the Fight the Bite Campaign

The "Fight the Bite" campaign, powered by the North Carolina Department of Health and Human Services ([NCDHHS](https://www.ncdhhs.gov/)), is raising awareness about tick- and mosquito-borne diseases across the state. Local schools are joining the movement too, with a K-12 poster contest that helps spread the message in a fun, creative way. Let's all do our part, use repellent, dump standing water, and protect your family!

The Sun is Shining but Is Your Skin Safe?

It's a perfect summer day in Wake County. You step outside, feeling the warmth of the sun on your skin. Maybe you're headed to the park, a backyard barbecue, or just running errands. The last thing on your mind? Skin cancer. But every minute in the sun adds up, and without protection, those invisible UV rays can increase your risk.

Skin cancer is the most commonly diagnosed cancer in North Carolina. From 2017 to 2021, the state saw a melanoma incidence rate of 26.8 per 100,000 people. While the melanoma death rate has slightly declined in recent years, North Carolina's rates are still higher than the national average ([NCDHHS](#)).

So, how can you enjoy the sun safely without sacrificing your summer fun?

- **Make Sunscreen a Habit:** Just like brushing your teeth, applying sunscreen should be part of your daily routine. Use a broad-spectrum sunscreen with SPF 15 or higher and reapply every two hours, especially after swimming or sweating.
- **Dress Smart:** Think of your clothing as armor against UV rays. A wide-brimmed hat, sunglasses, and lightweight, long-sleeved clothing can help protect your skin.
- **Time Your Sun Exposure:** The sun's rays are most intense between 10 a.m. and 4 p.m. If possible, plan outdoor activities for the early morning or late afternoon when UV exposure is lower.

The sun may feel good on your skin, but don't let it catch you off guard. Protect yourself now so you can enjoy many more summers to come.

For more sun safety tips, visit [CDC Sun Safety](#).

Hot Days, Cool Moves: Stay Safe in the Summer Heat

Summer heat can turn dangerous if we're not prepared. A mild heat rash or cramps can quickly progress to heat exhaustion and, if left unchecked, lead to a life-threatening heat stroke. Did you know that between June 2 and August 31, 2024, Wake County recorded 305 heat-related emergency department visits? This is an increase from 238 in 2023. With 24 heat alerts issued last summer, staying cool and hydrated is more important than ever. Protect yourself by drinking plenty of water, resting in the shade, and limiting strenuous activities during peak heat. A little caution goes a long way in keeping you safe!

Heat Safety Tips:

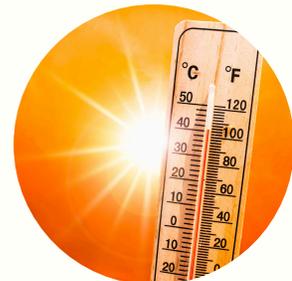
- **Hydrate:** Drink water throughout the day, even if you're not thirsty! Avoid sugary drinks and alcohol, they can dehydrate you.
- **Cool Off:** Take breaks in the shade or in air-conditioned spaces. If you don't have AC, visit a public library or community center to cool down.
- **Clothing:** Wear light, loose-fitting clothing and keep a wide-brimmed hat on to protect your head.
- **Avoid Peak Heat:** Steer clear of strenuous outdoor activities between 10 a.m. and 4 p.m., when it's hottest.

Signs of heat exhaustion include dizziness, nausea, and heavy sweating. If you or someone else shows symptoms, move to a cooler place and seek help immediately.

For more tips on heat safety, visit [CDC Heat Health](#).

For statewide heat-related illness surveillance reports and to sign up for the heat health alert system, visit [NCDHHS Heat Health Alert System](#).

Summer in Wake County is the perfect time to soak up the outdoors, but it's important to stay aware of potential risks. By taking the right precautions, you can enjoy a fun, safe, and healthy summer. Keep these tips in mind, and you'll be set to make the most of all the season has to offer! Stay safe and enjoy every moment, Wake County!



EPI ALERTS AND NOTIFICATIONS

Latest News from the CDC Health Alert Network (HAN)

The CDC issued the following HAN notifications to inform the public of a public health incident of importance.

Health Alert Network (HAN) No. 523 – Ongoing Risk of Dengue Virus Infections and Updated Testing Recommendations in the United States. Issued on 03/18/2025.

Health Alert Network (HAN) No. 522 – Expanding Measles Outbreak in the United States and Guidance for the Upcoming Travel Season. Issued on 03/07/2025.

Health Alert Network (HAN) No. 521 – Ebola Outbreak Caused by Sudan virus in Uganda. Issued on 02/06/2025.

Health Alert Network (HAN) No. 520 – Accelerated Subtyping of Influenza A in Hospitalized Patients. Issued on 01/16/2025.

Health Alert Network (HAN) No. 519 – First Case of Clade I Mpox Diagnosed in the United States. Issued on 11/18/2024.

For more details and information on the CDC Health Alert Network and these alerts, please visit: <https://emergency.cdc.gov/han/>

UPCOMING EVENTS AND OBSERVANCES

- 2025 CSTE Annual Conference, Grand Rapids, Michigan- June 8-12, 2025
- 2025 NCPHA Fall Educational Conference, Wilmington, North Carolina- September 17-19, 2025
- World Environment Day- June 5, 2025
- National HIV Testing Day- June 27, 2025
- World Hepatitis Day- July 28, 2025
- National Immunization Awareness Month- August, 2025
- National Breastfeeding Month- August, 2025
- World Breastfeeding Week- August 1-7, 2025

RESOURCES

FOR MORE INFORMATION AND GUIDANCE, VISIT THE FOLLOWING LINKS:

[HTTPS://WWW.CDC.GOV/NCHS/PRODUCTS/DATABRIEFS/DB522.HTM](https://www.cdc.gov/nchs/products/databriefs/db522.htm)
[HTTPS://WWW.DPH.NCDHHS.GOV/PROGRAMS/CHRONIC-DISEASE-AND-INJURY/INJURY-AND-VIOLENCE-PREVENTION-BRANCH/NORTH-CAROLINA-OVERDOSE-EPIDEMIC-DATA](https://www.dph.ncdhhs.gov/programs/chronic-disease-and-injury/injury-and-violence-prevention-branch/north-carolina-overdose-epidemic-data)
[HTTPS://WWW.CDC.GOV/STOP-OVERDOSE/RESPONSE/INDEX.HTML](https://www.cdc.gov/stop-overdose/response/index.html)
[HTTPS://WWW.CDC.GOV/MEASLES/DATA-RESEARCH/INDEX.HTML](https://www.cdc.gov/measles/data-research/index.html)
[HTTPS://WWW.DSHS.TEXAS.GOV/NEWS-ALERTS/MEASLES-OUTBREAK-2025](https://www.dshs.texas.gov/news-alerts/measles-outbreak-2025)
[HTTPS://WWW.NMHEALTH.ORG/ABOUT/ERD/IDEB/MOG/](https://www.nmhealth.org/about/erd/ideb/mog/)
[HTTPS://PMC.NCBI.NLM.NIH.GOV/ARTICLES/PMC9197781/](https://pmc.ncbi.nlm.nih.gov/articles/PMC9197781/)
[HTTPS://WWW.CDC.GOV/BIRD-FLU/SITUATION-SUMMARY/INDEX.HTML](https://www.cdc.gov/bird-flu/situation-summary/index.html)
[HTTPS://WWW.APHIS.USDA.GOV/LIVESTOCK-POULTRY-DISEASE/AVIAN/AVIAN-INFLUENZA](https://www.aphis.usda.gov/livestock-poultry-disease/avian/avian-influenza)
[HTTPS://WWW.FDA.GOV/FOOD/ALERTS-ADVISORIES-SAFETY-INFORMATION/INVESTIGATION-AVIAN-INFLUENZA-H5N1-VIRUS-DAIRY-CATTLE](https://www.fda.gov/food/alerts-advisories-safety-information/investigation-avian-influenza-h5n1-virus-dairy-cattle)
[HTTPS://WWW.CDC.GOV/VECTOR-BORNE-DISEASES/INDEX.HTML](https://www.cdc.gov/vector-borne-diseases/index.html)
[HTTPS://WWW.DPH.NCDHHS.GOV/CHRONIC-DISEASE-AND-INJURY/CANCER-PREVENTION-AND-CONTROL/STATE-CANCER-BURDEN-RESOURCE-GUIDE/DOWNLOAD?ATTACHMENT=](https://www.dph.ncdhhs.gov/chronic-disease-and-injury/cancer-prevention-and-control/state-cancer-burden-resource-guide/download?attachment=)
[HTTPS://WWW.CDC.GOV/SKIN-CANCER/SUN-SAFETY/INDEX.HTML](https://www.cdc.gov/skin-cancer/sun-safety/index.html)
[HTTPS://WWW.CDC.GOV/HEAT-HEALTH/ABOUT/INDEX.HTML?CDC_AA_REFVAL=HTTPS%3A%2F%2FWWW.CDC.GOV%2FEXTREME-HEAT%2FPREVENTION%2FINDEX.HTML](https://www.cdc.gov/heat-health/about/index.html?CDC_AA_REFVAL=HTTPS%3A%2F%2FWWW.CDC.GOV%2FEXTREME-HEAT%2FPREVENTION%2FINDEX.HTML)
[HTTPS://EPI.DPH.NCDHHS.GOV/OEI/CLIMATE/HEAT.HTML](https://epidph.ncdhhs.gov/oei/climate/heat.html)

REACH US & SUBSCRIBE!

VISIT OUR WEBPAGE AND SUBSCRIBE AT: [WAKE.GOV/EPIDEMIOLOGY](https://wake.gov/epidemiology)

DATA REQUEST FORM: [SUBMIT A REQUEST FOR DATA FROM OUR EPIDEMIOLOGY PROGRAM](#)

WAKE COUNTY EPIDEMIOLOGY PROGRAM PHONE NUMBER: 919-250-1252

FOR NON-DATA RELATED INFORMATION, EMAIL [WAKEEPIDEMOLOGY@WAKE.GOV](mailto:wakeepidemiology@wake.gov)