

FLORIDA DEPARTMENT OF HEALTH IN PINELLAS COUNTY

# EPI WATCH

Monthly Epidemiology and Preparedness Newsletter

October 2015

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For more information, or to add your e-mail address to the distribution list, please contact the Editor.

#### Disease Reporting

To report diseases and clusters of illness (*other than TB/STD/HIV/AIDS*) Phone: (727) 507-4346 Fax: (727) 507-4347



For TB, STD or HIV/AIDS Reporting Phone: (727) 824-6932

Animal Bite Reporting Phone: (727) 524-4410 x7665



5:30pm till 8:30pm (while supplies last) ida Department of Health in Pinellas Coun Pinellas Park Health Department 6350 70th Ave North, Pinellas Park

Fill out your registration form by visiting www.pinellaShealth.com Contact us at 727-507-4346 for more information

#### Flu Boo II

2015 Annual Drive-thru/Walk in Flu Clinic

TRICK-OR-TREAT!! The Florida Department of Health in Pinellas County's (DOH-Pinellas) Flu Boo II clinic will provide flu shots at no cost on <u>Wednesday</u>, <u>October 28, 2015</u> in Pinellas Park.

From 5:30 to 8:30 PM (or until supplies last), DOH-Pinellas staff and volunteers will provide flu vaccines at Pinellas Park health department, located at 6350 76<sup>th</sup> Ave. N. Participants can remain in their cars while they get their flu shot at the drivethrough or come inside the building's clinic area.

Yearly flu vaccines are recommended for anyone older than six months of age, but they're especially important for seniors, pregnant women and people with underlying health conditions. This season's vaccines have been developed to match circulating influenza viruses.

In addition to maintaining good health habits and washing your hands with soap and water, a yearly flu vaccine is the best way to protect yourself and others from influenza. It takes about two weeks after vaccination for protection to set in, so late October is a good time to get immunized before holiday gatherings in November and December.

## HEALTHY PETS, HEALTHY PEOPLE

The Centers for Disease Control and Prevention (CDC) launched a redesigned *Healthy Pets Healthy People* website to coincide with **World Animal Day on October 4,** a day that celebrates the importance of animals and the bonds that people share with them.

The redesigned website offers an alphabetized list and description of diseases that can spread from animals to humans, tips for preventing illnesses acquired from animals, facts on the important role animal's play in our lives, and detailed information about the health benefits of owning a pet. The content is geared toward a broad audience and is an important public health resource.

More information and to view the redesigned site, visit: <u>www.cdc.gov/healthypets</u>.



## Heartland Virus (HRTV): An Emerging Tick-Borne Disease

Heartland virus (HRTV) is an emerging infectious vector-borne disease that belongs to the family of RNA viruses called Phleboviruses. HRTV transmission is not yet fully understood, but the virus is preliminarily thought to be transmitted by the lone star tick species, *Amblyomma americanum*, and causes an ehrlichiosis-like illness in humans. Human cases of HRTV have been reported in Missouri, Oklahoma, and Tennessee, but vector distribution and animal data suggests that the virus may be present across the central and eastern United States, including Florida.



Clinical symptoms of HRTV include an acute onset of fever accompanied by fatigue, anorexia,

headache, nausea, or diarrhea with leukopenia, thrombocytopenia, and mild to moderately elevated liver transaminases. Patients displaying symptoms of HRTV may appear to have erlichiosis, but will not respond to doxycycline treatment and will test negative for ehrlichiosis (co-infection is possible). There is no specific treatment for HRTV; however, supportive therapy can be used to treat some symptoms and most cases have fully recovered.

#### Please contact the Florida Department of Health in Pinellas County at 727-507-4346 if you have a patient that meets all of the following inclusion criteria:

Exposure and all of the following

- 1) Aged ≥ 18 years
  - 2) Fever (≥ 38C)
  - 3) Leukopenia (white blood cell count < 4,500 cells/ $\mu$ L)
  - 4) Thrombocytopenia (platelet count <150,000 cells/mL)
  - 5) Acute illness onset in the last two weeks
  - 6) No underlying conditions that could explain their clinical findings (e.g., cancer)

Exposure: having been in wooded, brushy, or grassy areas (i.e. potential tick habitat) during the 2 weeks prior to onset of illness. A history of a tick bite is not required. Most people who develop a tick-borne disease do not remember being bitten by a tick.

Furthermore, if a tick-borne illness, including ehrlichiosis, anaplasmosis, Rocky Mountain spotted fever (RMSF), and other spotted fever rickettsiosis (SFR) is suspected, CDC recommended treatment is doxycycline and should be initiated immediately.

More information can be found here <u>http://www.cdc.gov/ncezid/dvbd/heartland/</u>

# 2014-2015 Ebola Outbreak in West Africa - Update

as of October 15, 2015

- As of the October 14, 2015, the World Health Organization (WHO) Situation Report, there were no new confirmed cases reported in the week up to October 11. This is the second consecutive week with no confirmed cases of Ebola Virus Disease (EVD).
- There are 150 registered contacts being monitored in Guinea, and an additional 259 contacts who remain untraced. All registered contacts in Sierra Leone have completed the 21-day monitoring period, but 2 high-risk contacts remain untraced. A country is considered to be free of Ebola virus transmission when 42 days (double the 21-day incubation period of the Ebola virus) has elapsed since the last patient in isolation became laboratory negative for EVD.
- Although the situation has improved dramatically within countries with widespread transmission, there is continued potential for resurgence and translocation.
- As of September 21, 2015, enhanced entry screening was discontinued for travelers coming to the United States from Liberia. DOH is currently monitoring any travelers returning from CDC designated Ebola-affected areas (currently, Sierra Leone and Guinea) twice-daily for 21 days.
- No confirmed cases of Ebola viral disease have been identified in Florida.

Additional information, including case counts and EVD affected areas, can be found here: http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/index.html

#### **Selected Reportable Diseases in Pinellas County**

	Pinellas		YTD Total			Pinellas County Annual Totals		
Disease	September 2015	September 2014	Pinellas 2015	Pinellas 3 YR Avg. (2012-2014)	Florida 2015	2014	2013	2012
A. Vaccine Preventable				-				
Measles				0	5			
Mumps				0	10			
Pertussis	3	3	9	13	262	19	17	10
Varicella	2	7	32	14	584	35	19	16
B. CNS Diseases & Bacteremias								
Creutzfeldt-Jakob Disease (CJD)			3	1	23			2
Meningitis (Bacterial, Cryptococcal,			3	3	98	4	5	6
Mycotic)				-		-		Ű
Meningococcal Disease			1	0	20		1	
C. Enteric Infections				1				
Campylobacteriosis	11	5	88	57	1651	103	63	59
Cryptosporidiosis	1	44	31	80	681	240	19	29
Cyclosporiasis				2	22		5	1
E. coli Shiga Toxin (+)		1	2	5	86	6	7	8
Giardiasis	3	2	22	24	788	42	34	32
Hemolytic Uremic Syndrome (HUS)				0	4		1	
Listeriosis	1		2	1	28			5
Salmonellosis	29	23	140	134	4131	216	203	203
Shigellosis	10	3	137	12	1433	21	5	18
D. Viral Hepatitis				1				
Hepatitis A			3	2	90	2	6	4
Hepatitis B: Pregnant Woman +HBsAg	3		31	13	344	21	17	16
Hepatitis B, Acute	5	4	44	22	375	44	39	16
Hepatitis C, Acute	2	1	18	10	130	19	17	5
Animal Rabies			1	0	55	2		
Rabies, possible exposure	11	13	90	149	2480	190	193	201
Chikungunya Fever		3	2	2	109	10		
Dengue				1	36	1	2	3
Eastern Equine Encephalitis				0				
Lyme Disease	1	1	6	4	131	5	8	6
Malaria			1	2	26	3	1	2
St. Louis Encephalitis				0				
West Nile Virus			1	0	9			
F. Others								
AIDS**	7	12	93	101	1914	148	118	130
HIV**	26	29	246	171	5157	263	185	177
Chlamydia	342	281	3163	2138	n/a	3853	4141	3812
Gonorrhea	114	105	1094	691	n/a	1295	1424	1029
Hansen's Disease				0	17			
Lead Poisoning: Children < 6 years:		1	3	3	109	8	4	2
Legionellosis	3	1	13	10	222	13	10	13
Mercury Poisoning			1	1	11	2		
Syphilis, Total	19	16	200	75	n/a	186	114	141
Syphilis, Infectious (Primary and Sec- ondary)	11	9	124	29	n/a	75	52	61
Syphilis, Early Latent	5	4	45	26	n/a	61	37	47
Syphilis, Congenital	5	4	45 3	26	n/a n/a	01	57	4/
Syphilis, Late Syphilis (Late Latent;	3	3	3 31	19	n/a n/a	50	25	33
Neurosyphilis)								
Tuberculosis	4	4	9	13	n/a	25	30	17
Vibrio Infections	1	1	7	7	150	10	11	10

n/a = not available at this time. Blank cells indicate no cases reported. Reportable diseases include confirmed and probable cases only. All case counts are provisional. Data is collected from the Merlin Reportable Disease database, surveillance systems maintained at the Florida Department of Health in Pinellas County, and Florida CHARTS <a href="http://www.floridacharts.com/charts/default.aspx">http://www.floridacharts.com/charts/default.aspx</a>.

surveillance systems maintained at the Florida Department of Health in Pinelias County, and Florida CHARTS http://www.floridacharts.com/charts/defa

\*STD data in PRISM is continually updated. Please note, data from the previous month takes up to an additional month or more to be correctly updated.

\*\*Current HIV Infection data reflects any case meeting the CDC definition of "HIV infection" which includes all newly reported HIV cases and newly reported AIDS cases with no previous report of HIV. Newly reported HIV Infection cases do not imply they are all newly diagnosed cases. For a more detailed explanation on changes in reporting and changes in trends, please contact the Bureau of HIV/AIDS, Data Analysis Section.