



# **EPI WATCH**

Monthly Epidemiology and Preparedness Newsletter

**April 2017** 

## Florida Department of Health in Pinellas County

205 Dr. Martin Luther King Jr. Street N. St. Petersburg, FL 33701 (727) 824-6900 www.PinellasHealth.com

#### Director

Ulyee Choe, DO Ulyee.Choe@flhealth.gov

#### **Editor**

JoAnne Lamb, MPH joanne.lamb@flhealth.gov

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

## Division of Disease Control and Health Protection



#### **Disease Reporting**

To report diseases and clusters of illness:

Phone: (727) 824-6932 Fax: (727) 820-4270 (excluding HIV/AIDS)

To Report HIV/AIDS by mail: Surveillance Room 3-138 205 Dr. MLK Jr St. N St. Petersburg, FL 33701

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

### **Bat Maternity Season Starts April 16**

The Florida Fish and Wildlife Conservation Commission (FWC) wants to remind everyone that bat maternity season begins on April 16 and goes through August 14. Groups of bats gather to birth and raise their young until they are able to fly and feed themselves. During this time, the public cannot exclude bats roosting in houses and buildings unless they receive a permit from FWC.

Bats serve as an important part of our ecosystem by providing seed dispersal and insect removal. In Florida, there are 13 different species of native bats. Several of these are rare or threatened species so precaution should be taken not to disturb them during hibernation or maternity season. Most bats in Florida reproduce once per year, giving birth to 1-2 pups, during the summer maternity season. The Florida bonneted bat, found in south Florida, is known to reproduce almost year-round.



Source: FWC

If you see a bat, the best thing to do is leave it alone. To prevent bats from roosting in attics or buildings, entry points should be sealed up during the fall and winter months when bats are hibernating elsewhere. Bats in Florida are protected year-round, and therefore it is illegal to harm or kill them. If bats are found within your home or building and you wish to remove those bats, you must safely exclude them without harming them using FWC approved guidelines and techniques. Your local FWC office can be contacted for more information: http://myfwc.com/.

### **Update: Influenza Season**

According the Centers for Disease Control and Prevention (CDC), the 2016-2017 influenza season has peaked around the United States, but several weeks of elevated flu activity is expected. Confirmed cases of influenza continue to be reported by healthcare providers and hospitals. At this time, influenza B viruses have been the most frequently identified by public health laboratories.

Now is still a good time to get vaccinated! The 2016-2017 influenza vaccine provides protection from most of the circulating viruses. The composition of US flu vaccine is reviewed annually and updated to match what research suggests will be the most common viruses circulating. For 2017-2018, trivalent vaccines are recommended to contain:

- •an A/Michigan/45/2015 (H1N1)pdm09-like virus
- •an A/Hong Kong/4801/2014 (H3N2)-like virus
- •a B/Brisbane/60/2008-like (B/Victoria lineage) virus

The quadrivalent vaccine, is recommended to be produced using the same viruses mentioned above, as well as a B/Phuket/3073/2013-like (B/Yamagata lineage) virus.

More information on the 2016-2017 influenza season and the flu vaccine, can be found here: <a href="https://www.cdc.gov/flu/index.htm">https://www.cdc.gov/flu/index.htm</a>

## **Advisory: Pertussis (Whooping Cough) in Pinellas County**

Original distribution on March 24, 2017

The Florida Department of Health in Pinellas County has detected a recent increase in reported local cases of *Bordetella pertussis* (also known as "whooping cough") in unvaccinated school-aged children. Please take this into consideration when evaluating a patient with a cough illness consistent with pertussis and/or who is a close contact to a case of pertussis. Please consider following up your evaluation with laboratory testing.

### **ACTION REQUESTED:**

- Increase your index of suspicion for pertussis, including atypical breakthrough cases.
- Advise any symptomatic patients to call ahead to make appointments so staff can take the appropriate precautions to limit exposure to other patients.
- Offer alternate waiting area or a mask to any patient presenting with cough illness.
- Take precautions to protect pregnant women and immunocompromised individuals (staff or patients) against exposure.
- Collect a nasopharyngeal swab and order a PCR and culture. Culture is the most specific test for pertussis, but PCR is more sensitive and results are available quickly. It is recommended that they are ordered together.
- Identify close contacts of the case to determine the need for chemoprophylaxis.
- If pertussis is highly suspected, consider recommending that cases and symptomatic contacts stay at home until they complete an appropriate course of antibiotics.

**SYMPTOMS:** The initial stage lasts for 1-2 weeks and consists of mild symptoms of upper respiratory tract inflammation that gradually develops with coryza and an intermittent, non-productive cough. The next stage consists of spasms of cough that occur without taking a breath, that may end with a gasp, whoop, or vomiting (post-tussive emesis). This stage may last longer than 4 weeks. The final stage lasts two to six weeks or longer, and consists of the gradual resolution of the paroxysmal coughing.

**INCUBATION:** Typical incubation period is 7–10 days (range 5–21 days).

**PERIOD OF COMMUNICABILITY:** An individual can be contagious up to 21 days after symptom onset or until completion of appropriate antibiotic therapy (e.g. 5 days of azithromycin).

**DIAGNOSTICS:** Culture and PCR are the recommended tests for pertussis.

**TREATMENT:** Azithromycin is the drug of choice. Erythromycin, clarithromycin, and trimethoprim-sulfamethoxazole (TMP-SMX) may also be used as alternatives if azithromycin is contraindicated.

Report any pertussis cases immediately 24/7 by phone to the Florida Department of Health in Pinellas County (DOH-Pinellas) at 727-824-6932.

More information on diagnosis, treatment and vaccination of Pertussis, please visit the CDC website: https://www.cdc.gov/pertussis/about/index.html

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

	Pinellas		YTD Total		Pinellas County Annual Totals		
D.			Pinellas	Florida			
Disease	March 2017	March 2016	2017	2017	2016	2015	2014
A. Vaccine Preventable							
Measles	0	0	0	2	0	0	0
Mumps	0	0	1	3	0	0	0
Pertussis	13	0	17	78	18	17	19
Varicella	1	12	8	195	74	38	35
B. CNS Diseases & Bacteremias							
Creutzfeldt-Jakob Disease (CJD)	0	0	0	10	2	3	0
Meningitis (Bacterial, Cryptococcal, Mycotic)	1	1	3	25	7	6	4
Meningococcal Disease	0	0	0	9	0	1	0
C. Enteric Infections							
Campylobacteriosis	12	14	40	688	146	104	103
Cryptosporidiosis	1	3	4	76	27	49	240
Cyclosporiasis	0	0	0	0	5	3	0
E. coli Shiga Toxin (+)	0	0	1	36	3	2	6
Giardiasis	8	3	15	252	41	30	42
Hemolytic Uremic Syndrome (HUS)	0	0	0	5	0	0	0
Listeriosis	0	0	0	11	2	2	0
Salmonellosis	12	1	34	840	188	196	216
Shigellosis	2	1	5	211	19	174	21
D. Viral Hepatitis							
Hepatitis A	0	0	0	55	2	4	2
Hepatitis B: Pregnant Woman +HBsAg	4	3	8	125	28	37	21
Hepatitis B, Acute	4	5	13	155	68	57	44
Hepatitis C, Acute	3	1	7	70	49	32	19
E. VectorBorne/Zoonoses							
Animal Rabies	2	1	3	40	4	1	2
Rabies, possible exposure	12	14	38	752	131	114	190
Chikungunya Fever	0	0	0	0	1	2	10
Dengue	0	0	0	9	2	3	1
Eastern Equine Encephalitis	0	0	0	0	0	0	0
Lyme Disease	1	1	3	47	11	6	5
Malaria	0	0	0	9	0	2	3
West Nile Virus	0	0	0	2	1	1	0
Zika Virus	0	0	3	126	23	0	0
F. Others							
Chlamydia	403	372	1146	n/a	4086	4168	3853
Gonorrhea	141	131	376	n/a	1562	1439	1295
Hansen's Disease	0	0	0	6	0	0	0
Lead Poisoning	2	3	9	143	32	40	62
Legionellosis	2	1	4	74	19	18	13
Mercury Poisoning	0	0	0	9	0	1	2
Syphilis, Total	25	33	70	n/a	400	289	186
Syphilis, Infectious (Primary and Secondary)	15	18	38	n/a	188	151	75
Syphilis, Early Latent	3	11	19	n/a	146	83	61
Syphilis, Congenital	0	0	1	n/a	2	3	0
Syphilis, Late Syphilis (Late Latent; Neurosyphilis )	7	4	13	n/a	64	52	50
Tuberculosis	0	3	1	n/a	31	14	25
Vibrio Infections	0	0	2	50	8	11	10

n/a = not available at this time. 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>

<sup>\*</sup>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.

<sup>\*</sup> Florida tracks cases of HIV/AIDS. For the most up to date data, please visit: <a href="http://www.floridahealth.gov/diseases-and-conditions/aids/surveillance/index.html">http://www.floridahealth.gov/diseases-and-conditions/aids/surveillance/index.html</a>