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25 years of being polio-free in the Americas

In 1975, before widespread immunization against polio, almost 6,000 children were paralyzed in the Americas due to the disease. In 1991, the last 6 cases of polio were reported, and in 1994, the Region was the first in the world to be certified polio-free.

Washington, DC, 21 October 2019 (PAHO)- In August 1991, Luis Fermín Tenorio Cortez, a child born in the mountains of Junín, Peru, was the last victim of wild poliovirus in the Region of the Americas. Fermín hadn't been vaccinated, and so the virus was able to take hold in his body, resulting in irreversible paralysis in his legs.

On October 24, World Polio Day, the Pan American Health Organization (PAHO) is celebrating 25 years of being certified polio-free in North, Central and South America, as well as in the Caribbean. There is no cure for polio, but it's preventable with vaccination.

In 1975, before there was widespread and systematic vaccination in the Americas, nearly 6,000 cases of paralytic polio were reported in the Region, and in 1991 the last six cases were detected. Three years later, in 1994, the disease was formally declared eliminated from the region by an international commission. Progress in vaccinating against polio has continued. Today, only Pakistan and Afghanistan report cases, and the world is getting closer to eradication.

With technical support from PAHO, vaccination coverage in children under the age of 1 rose from 25% in 1978 to more than 80% in 1993. At least 8 out of 10 children were vaccinated, and thanks to herd immunity from the oral vaccine, collective protection was guaranteed.

Almost a decade later, in 1985, PAHO proposed the goal of interrupting the transmission of wild poliovirus in the Americas to its Member States. The countries agreed and made the commitment, taking sustainable actions to mobilize the population and strategic partners like churches and civil society organizations. Partner agencies and other organizations multiplied their efforts, offering technical cooperation and mobilizing resources to support the countries' efforts.

On 24-25 August 1994, after three years without cases, the scientists and experts that formed the International Commission for the Certification of the Eradication of Poliomyelitis (ICCEP) informed PAHO's Director at the time, Dr. Carlyle Guerra de Macedo, that wild poliovirus transmission had been interrupted.

Currently, the children of the Americas have guaranteed access to vaccines that are free, safe and high-quality. Vaccination has been considered a social good, with universal and equal access to everyone. PAHO helps make vaccination sustainable through its Revolving Fund, which most Latin America and Caribbean countries use to purchase the vaccines, needles and other supplies used by the immunization programs. The fund helps countries by providing vaccines and supplies at affordable prices.

Florida Department of Health Pasco County

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Administrator:

Mike Napier, MS

Epidemiology Manager:

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Office Hours:

Mon-Fri 8am-5pm

To report a disease, disease outbreak or request information

Epidemiology: (352) 521-1450,

Option 5

Confidential fax: (352) 521-1435

TB: (727) 861-5260, ext. 0253 **Confidential fax:** (727) 861-4844

Environmental: (727) 841-4425, Option 3

Animal Control (report animal bites): (727) 834-3216
Fax: (813) 929-1218

STD/HIV: (727) 484-3655 (W. Pasco) or (352) 834-6150 (E. Pasco)

HIV (testing): (727) 619-0260 (W. Pasco) or (352) 834-6146 (E. Pasco)

After Hours:

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25 years, cont.

The endgame

"We are currently in the final phase of polio eradication - the endgame – where only one out of three wild polioviruses is still active," said Dr. Ruiz. "Countries should maintain vaccination coverage at or above 95% and strengthen epidemiological surveillance." As long as even one child anywhere is infected with polio, all children everywhere are at risk of getting the disease if they're not vaccinated. However, Ruiz noted, "a polio-free world is possible and we are so close to achieving it."

Polio cases have decreased more than 99% since 1988, when it was estimated that there were 350,000 cases in more than 125 endemic countries, compared to 33 cases of polio reported in 2018 by two countries. More than 15 million people worldwide who can walk today would have been paralyzed without vaccination.

The global efforts that resulted in these achievements were led by the Global Polio Eradication Initiative (GPEI), headed by WHO, Rotary International, the United States Centers for Disease Control and Prevention (CDC), and UNICEF.

Polio eradication – which would mean a world free of poliomyelitis for future generations and economic savings of \$40-50 billion – requires high coverage rates in all corners of the world in order to stop the transmission of this highly contagious virus. However, there are still children who don't have access to vaccination for different reasons: lack of infrastructure, remote areas, displaced populations, conflicts and insecurity, or resisting the vaccine.

If polio is not eradicated, there could be a resurgence of the disease, which could result in the appearance of up to 200,000 new cases worldwide each year within 10 years.

Poliomyelitis was the second vaccine-preventable disease to be eliminated from the Americas (1994), preceded by the regional eradication of smallpox (1971). It was followed by the elimination of rubella and congenital rubella syndrome (2015), and by the elimination of measles in 2016.

Links

- Polio free Americas
- Immunization (PAHO)

Source: PAHO



Florida Arbovirus Surveillance

Andrea Morrison, PhD, MSPH, Dana Giandomenico, MPH, Catherine McDermott, MPH, MHS, and Danielle Stanek, DVM, DOH Bureau of Epidemiology; Lea Heberlein-Larson DrPH, Alexis LaCrue, PHD, Maribel Castaneda, and Valerie Mock, BS, DOH Bureau of Public Health Laboratories; Carina Blackmore, DVM, PhD, DOH Division of Disease Control and Health Protection.

Arbovirus surveillance in Florida includes endemic mosquito-borne viruses such as West Nile virus (WNV), Eastern equine encephalitis virus (EEEV), and St. Louis encephalitis virus (SLEV), as well as exotic viruses such as dengue virus (DENV), chikungunya virus (CHIKV), Zika virus (ZIKV), and California encephalitis group viruses (CEV). Malaria, a parasitic mosquito-borne disease is also included. During the period of September 22-28, 2019, the following arboviral activity was recorded in Florida.

WNV activity: No human cases of WNV infection were reported this week. No horses with WNV infection were reported this week. Fifty-four sentinel chickens tested positive for antibodies to WNV this week in Alachua, Brevard, Citrus, Duval, Hernando, Hillsborough, Indian River, Lee, Martin, Nassau, Orange, Palm Beach, Polk, Putnam, Sarasota, Seminole, St. Lucie, and Volusia counties. In 2019, positive samples from one human, one blood donor, four horses, one eagle, and 323 sentinel chickens have been reported from 29 counties.

SLEV activity: No human cases of SLEV infection were reported this week. One sentinel chicken tested positive for antibodies to SLEV this week in Lee County. In 2019, a positive sample from one sentinel chicken has been reported from one county.

EEEV activity: No human cases of EEEV infection were reported this week. No horses with EEEV infection were reported this week. Three sentinel chickens tested positive for antibodies to EEEV this week in Hernando, Putnam, and Walton counties. In 2019, positive samples from 26 horses, one emu, one eagle, and 106 sentinel chickens have been reported from 30 counties.

International Travel-Associated Dengue Fever Cases: Twenty-two cases of dengue fever were reported this week in persons that had international travel. In 2019, 235 travel-associated cases have been reported.

Dengue Fever Cases Acquired in Florida: One case of locally acquired dengue fever was reported this week in Miami-Dade County. In 2019, six cases of locally acquired dengue fever have been reported.

International Travel-Associated Chikungunya Fever Cases: No cases of chikungunya fever were reported this week in persons that had international travel. In 2019, five travel-associated cases have been reported.

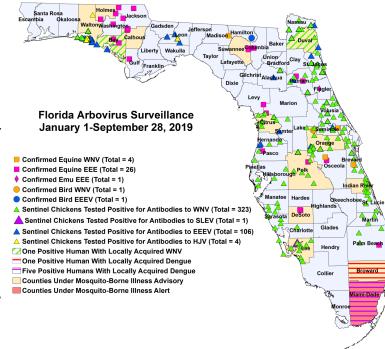
Chikungunya Fever Cases Acquired in Florida: No cases of locally acquired chikungunya fever were reported this week. In 2019, no cases of locally acquired chikungunya fever have been reported.

International Travel-Associated Zika Fever Cases: One case of Zika fever was reported this week in a person that had international travel. In 2019, 34 travel-associated cases have been reported.

Zika Fever Cases Acquired in Florida: No cases of locally acquired Zika fever were reported this week. In 2019, no cases of locally acquired Zika fever have been reported.

Advisories/Alerts: Bay, Broward, Calhoun, Citrus, DeSoto, Duval, Holmes, Indian River, Lee, Orange, Polk, Suwannee, and Walton counties are currently under a mosquito-borne illness advisory. Miami-Dade County is currently under a mosquito-borne illness alert. No other counties are currently under mosquito-borne illness advisory or alert.

There is a Level 2 Travel Health Notice for Nigeria related to the transmission of yellow fever virus. There are also Level 1 Travel Health Notices for Central and South America, Mexico, the Caribbean, Asia, the Pacific Islands, Africa, and the Middle East related to the transmission of dengue virus and for Burundi related to Malaria transmission. Additional information on travel health notices can be found at the following link: wwwnc.cdc.gov/travel/notices. For a map of arboviral disease activity in the United States, please visit the following link: wwwn.cdc.gov/arbonet/maps/ ADB Diseases Map/index.html.



2

7

1750

152

173

1

2

1502

Scombroid Poisoning

Vibriosis

Total

STD Morbidity Statistics

- 165 Chlamydia cases
- 40 Gonorrhea cases
- 5 Syphilis cases
- 4 HIV cases

*Provisional data

Most women with gonorrhea do not have any symptoms. Even when a woman has symptoms, they are often mild and can be mistaken for a bladder or vaginal infection.

HIV Outreach Statistics

- 115 individuals were tested for HIV
- 82 rapid Hepatitis tests performed



Jail Linkage Statistics

- 57 rapid HIV tests performed (2 positive)
- 45 Hepatitis tests performed (3 positive)
- 57 individuals were HIV post-test counseled





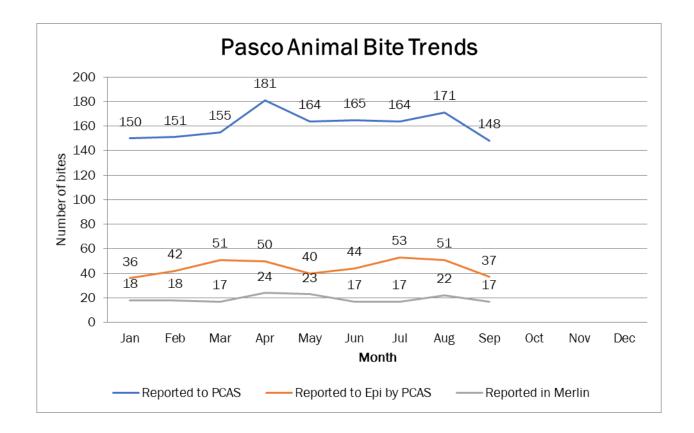






Animal Bites

- Pasco County Animal Services (PCAS) received 148 animal bites in September
- PCAS reported 37 of 148 (25%) cases to PCHD for follow-up
- 17 of 37 (46%) were reported in Merlin after meeting case definition
- DOH Pasco sent 4 animal specimens for rabies testing (0 positive)



Reported to PCAS = Animal exposures reported to PCAS by community or Epi.

Reported to Epi by PCAS = Exposures that require Epi's attention due to the severity of bite, type of animal, inability to locate animal, victim and/or owner and need for rabies prophylaxis.

Reported in Merlin = Involves situations where the animal or person could not be located or exposure victim either accepts or declines rabies vaccinations.















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Staff News and Upcoming Events

Free Hepatitis A and Hepatitis B vaccines to high risk groups

The Florida Department of Health-Pasco County is offering free hepatitis vaccines to those in high risk groups such as recreational drug users, those experiencing homelessness, and those with direct contact with others who have hepatitis A. For more information call Denise at 813-364-5812.

Free Test Fridays

The Florida Department of Health-Pasco County is offering Free Test Fridays. For more information, contact Rob at 727-619-0260.

Pasco Public Defender Mobile Medical Unit

The Florida Department of Health-Pasco County is partnering with the Pasco Public Defender Mobile Medical Unit to provide free rapid HIV and Hepatitis C testing. The Mobile Medical Unit offers free basic medical care for uninsured, free health screenings for all ages, and free flu shots. No appointment is needed. For more information, please call 352-521-1450, option 1 or visit their website, where you can also find a calendar with all of their stops for the month.

Resources

Florida Health Alert Network

Everbridge is a public health notification system that allows us to disseminate pertinent public health information regarding outbreaks or disease trends more efficiently. Everbridge provides users with a wide range of methods to receive information on a variety of communication devices. To register, please visit https://www.surveymonkey.com/r/SD3R5QN

Hepatitis C Consultation Service

The Clinician Consultation Center (CCC) provides no-cost, up-to-date, expert clinical advice to support clinicians managing patients with hepatitis C (HCV) and co-morbidities such as HIV co-infection or substance use disorder. Advice provided is based on federal treatment guidelines, current medical literature, and clinical best practices. Consultation topics include: HCV transmission & prevention, HCV screening & diagnostic testing, HCV staging & monitoring, regimen selection & dosing, drug interactions, HIV/HCV management strategies, prior HCV treatment failure, ESRD/chronic kidney disease, HCV in pregnancy, and management of clinical problems— including cirrhosis and anemia.

Call for a Phone Consultation

Submit a Case for Consultation Online

(844) HEP-INFO or (844) 437-4636

For non-urgent HCV management consultation

Monday-Friday, 9 a.m.—8 p.m. EST

nccc.ucsf.edu

Reportable Diseases/Conditions in Florida

Practitioner List (Laboratory Requirements Differ)

Per Rule 64D 3.029, Florida Administrative Code, promulgated October 20, 2016



Did you know that you are required* to report certain diseases to your local county health department?

- ! Report immediately 24/7 by phone upon initial suspicion or laboratory test order
- Report immediately 24/7 by phone
- Report next business day
- + Other reporting timeframe

- ! Outbreaks of any disease, any case, cluster of cases, or exposure to an infectious or non-infectious disease, condition, or agent found in the general community or any defined setting (e.g., hospital, school, other institution) not listed that is of urgent public health significance
- Acquired immune deficiency syndrome (AIDS)
- **Amebic encephalitis**
- ! Anthrax
- Arsenic poisoning
- ! Arboviral diseases not otherwise listed
- Babesiosis
- ! Botulism, foodborne, wound, and unspecified
- Botulism, infant
- ! Brucellosis
- · California serogroup virus disease
- Campylobacteriosis
- Cancer, excluding non-melanoma skin cancer and including benign and borderline intracranial and CNS tumors
- Carbon monoxide poisoning
- Chancroid
- Chikungunya fever
- Chikungunya fever, locally acquired
- Chlamydia
- ! Cholera (Vibrio cholerae type O1)
- Ciguatera fish poisoning
- + Congenital anomalies
- · Conjunctivitis in neonates <14 days old
- Creutzfeldt-Jakob disease (CJD)
- Cryptosporidiosis
- Cyclosporiasis
- ! Dengue fever
- ! Diphtheria
- Eastern equine encephalitis
- Ehrlichiosis/anaplasmosis
- Escherichia coli infection, Shiga toxinproducing
- Giardiasis, acute
- ! Glanders
- Gonorrhea
- · Granuloma inguinale

- ! Haemophilus influenzae invasive disease in children <5 years old</p>
- Hansen's disease (leprosy)
- Hantavirus infection
- Hemolytic uremic syndrome (HUS)
- Hepatitis A
- Hepatitis B, C, D, E, and G
- Hepatitis B surface antigen in pregnant women and children <2 years old
- Herpes B virus, possible exposure
- Herpes simplex virus (HSV) in infants <60 days old with disseminated infection and liver involvement; encephalitis; and infections limited to skin, eyes, and mouth; anogenital HSV in children <12 years old
- + Human immunodeficiency virus (HIV) infection
- HIV-exposed infants <18 months old born to an HIV-infected woman
- Human papillomavirus (HPV)associated laryngeal papillomas or recurrent respiratory papillomatosis in children <6 years old; anogenital papillomas in children ≤12 years old
- ! Influenza A, novel or pandemic strains
- Influenza-associated pediatric mortality in children <18 years old</p>
- Lead poisoning (blood lead level ≥5 µg/dL)
- Legionellosis
- Leptospirosis
- **Listeriosis**
- Lyme disease
- Lymphogranuloma venereum (LGV)
- Malaria
- Measles (rubeola)
- ! Melioidosis
- Meningitis, bacterial or mycotic
- ! Meningococcal disease
- Mercury poisoning
- Mumps
- Neonatal abstinence syndrome (NAS)
- Neurotoxic shellfish poisoning
- Paratyphoid fever (Salmonella serotypes Paratyphi A, Paratyphi B, and Paratyphi C)
- Pertussis

- Pesticide-related illness and injury, acute
- ! Plague
- Poliomyelitis
- Psittacosis (ornithosis)
- Q Fever
- Rabies, animal or human
- Rabies, possible exposure
- Ricin toxin poisoning
- Rocky Mountain spotted fever and other spotted fever rickettsioses
- Rubella
- . St. Louis encephalitis
- Salmonellosis
- Saxitoxin poisoning (paralytic shellfish poisoning)
- Severe acute respiratory disease syndrome associated with coronavirus infection
- Shigellosis
- ! Smallpox
- Staphylococcal enterotoxin B poisoning
- Staphylococcus aureus infection, intermediate or full resistance to vancomycin (VISA, VRSA)
- Streptococcus pneumoniae invasive disease in children <6 years old
- Syphilis
- Syphilis in pregnant women and neonates
- Tetanus
- Trichinellosis (trichinosis)
- Tuberculosis (TB)
- ! Tularemia
- Typhoid fever (Salmonella serotype Typhi)
- ! Typhus fever, epidemic
- ! Vaccinia disease
- Varicella (chickenpox)
- ! Venezuelan equine encephalitis
- Vibriosis (infections of Vibrio species and closely related organisms, excluding Vibrio cholerae type O1)
- ! Viral hemorrhagic fevers
- West Nile virus disease
- Yellow fever
- ! Zika fever

Coming soon: "What's Reportable?" app for iOS and Android