

**Department of Health Pasco County**

Main Office  
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(727) 861-5260

[www.doh.state.fl.us/chdpasco/default.html](http://www.doh.state.fl.us/chdpasco/default.html)

**Administrator**

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**Office Hours**

Mon-Fri 8am–5pm

To report a disease, disease outbreak or request information call:

**Epidemiology:** (352) 521-1450  
Press 1

**Confidential fax:** (352) 521-1435

**TB:** (727) 861-5260 ext. 0253

**Confidential fax:** (727) 861-4844

**Environmental:** (813) 558-5173

**Animal Control**

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

**STD/HIV:** (727) 861-5260 ext.  
0173 (W. Pasco) or (352) 834-  
6150 (E. Pasco)

**HIV (testing):** (727) 841-4425 ext.  
3651 (W. Pasco) or (352) 834-  
6146 (E. Pasco)

**After Hours:**

Pager (727) 257-1177  
Answering Service (727) 815-4088

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## People at High Risk of Developing Flu-Related Complications

Most people who get the flu will have mild illness, will not need medical care or antiviral drugs, and will recover in less than two weeks. Some people, however, are more likely to get flu complications that result in being hospitalized and occasionally result in death. Pneumonia, bronchitis, sinus infections and ear infections are examples of flu-related complications. The flu also can make chronic health problems worse. For example, people with asthma may experience asthma attacks while they have the flu, and people with chronic congestive heart failure may experience a worsening of this condition that is triggered by the flu. The list below includes the groups of people more likely to get flu-related complications if they get sick from influenza.

### People at High Risk for Developing Flu-Related Complications

- Children younger than 5, but especially children younger than 2 years old
- Adults 65 years of age and older
- Pregnant women (and women up to two weeks post partum)
- Also, American Indians and Alaskan Natives seem to be at higher risk of flu complications

### People who have medical conditions including:

- Asthma
- Neurological and neurodevelopmental conditions [including disorders of the brain, spinal cord, peripheral nerve, and muscle such as cerebral palsy, epilepsy (seizure disorders), stroke, intellectual disability (mental retardation), moderate to severe developmental delay, muscular dystrophy, or spinal cord injury].
- Chronic lung disease (such as chronic obstructive pulmonary disease [COPD] and cystic fibrosis)
- Heart disease (such as congenital heart disease, congestive heart failure and coronary artery disease)
- Blood disorders (such as sickle cell disease)
- Endocrine disorders (such as diabetes mellitus)
- Kidney disorders
- Liver disorders
- Metabolic disorders (such as inherited metabolic disorders and mitochondrial disorders)
- Weakened immune system due to disease or medication (such as people with HIV or AIDS, or cancer, or those on chronic steroids)
- People younger than 19 years of age who are receiving long-term aspirin therapy
- People who are morbidly obese (Body Mass Index, or BMI, of 40 or greater)

Source: CDC

## Time Magazine names the Ebola Fighters Person of the Year 2014



December 10, 2014 by Nancy Gibbs

Not the glittering weapon fights the fight, says the proverb, but rather the hero's heart.

Maybe this is true in any battle; it is surely true of a war that is waged with bleach and a prayer.

For decades, Ebola haunted rural African villages like some mythic monster that every few years rose to demand a human sacrifice and then returned to its cave. It reached the West only in nightmare form, a

Hollywood horror that makes eyes bleed and organs dissolve and doctors despair because they have no cure.

But 2014 is the year an outbreak turned into an epidemic, powered by the very progress that has paved roads and raised cities and lifted millions out of poverty. This time it reached crowded slums in Liberia, Guinea and Sierra Leone; it traveled to Nigeria and Mali, to Spain, Germany and the U.S. It struck doctors and nurses in unprecedented numbers, wiping out a public-health infrastructure that was weak in the first place. One August day in Liberia, six pregnant women lost their babies when hospitals couldn't admit them for complications. Anyone willing to treat Ebola victims ran the risk of becoming one.

Which brings us to the hero's heart. There was little to stop the disease from spreading further. Governments weren't equipped to respond; the World Health Organization was in denial and snarled in red tape. First responders were accused of crying wolf, even as the danger grew. But the people in the field, the special forces of Doctors Without Borders/Médecins Sans Frontières (MSF), the Christian medical-relief workers of Samaritan's Purse and many others from all over the world fought side by side with local doctors and nurses, ambulance drivers and burial teams.

Ask what drove them and some talk about God; some about country; some about the instinct to run into the fire, not away. "If someone from America comes to help my people, and someone from Uganda," says Iris Martor, a Liberian nurse, "then why can't I?" Foday Gallah, an ambulance driver who survived infection, calls his immunity a holy gift. "I want to give my blood so a lot of people can be saved," he says. "I am going to fight Ebola with all of my might."

MSF nurse's assistant Salome Karwah stayed at the bedsides of patients, bathing and feeding them, even after losing both her parents—who ran a medical clinic—in a single week and surviving Ebola herself. "It looked like God gave me a second chance to help others," she says. Tiny children watched their families die, and no one could so much as hug them, because hugs could kill. "You see people facing death without their loved ones, only with people in space suits," says MSF president Dr. Joanne Liu. "You should not die alone with space-suit men."

Those who contracted the disease encountered pain like they had never known. “It hurts like they are busting your head with an ax,” Karwah says. One doctor overheard his funeral being planned. Asked if surviving Ebola changed him, Dr. Kent Brantly turns the question around. “I still have the same flaws that I did before,” he says. “But whenever we go through a devastating experience like what I’ve been through, it is an incredible opportunity for redemption of something. We can say, How can I be better now because of what I’ve been through? To not do that is kind of a shame.”

So that is the next challenge: What will we do with what we’ve learned? This was a test of the world’s ability to respond to potential pandemics, and it did not go well. It exposed corruption in African governments along with complacency in Western capitals and jealousy among competing bureaucrats. It triggered mistrust from Monrovia to Manhattan. Each week brought new puzzles. How do you secure a country, beyond taking passengers’ temperatures at the airport? Who has the power to order citizens to stay home, to post a guard outside their door? What will it take to develop treatments for diseases largely confined to poor nations, even as this Ebola outbreak had taken far more lives by mid-October than all the earlier ones combined?

The death in Dallas of Thomas Eric Duncan, the first Ebola patient diagnosed on U.S. soil, and the infection of two nurses who treated him, shook our faith in the ability of U.S. hospitals to handle this kind of disease. From there the road to full freak-out was a short one. An Ohio middle school closed because an employee had flown on the same plane as one of Duncan’s nurses. Not the same flight, just the same plane. A Texas college rejected applicants from Nigeria, since that country had some “confirmed Ebola cases.” A Maine schoolteacher had to take a three-week leave because she went to a teachers’ conference in Dallas. Fear, too, was global. When a nurse in Spain contracted Ebola from a priest, Spanish authorities killed her dog as a precaution, while #VamosAMorirTodos (We’re all going to die) trended on Twitter. Guests at a hotel in Macedonia were trapped in their rooms for days after a British guest got sick and died. Turned out to have nothing to do with Ebola.

The problem with irrational responses is that they can cloud the need for rational ones. Just when the world needed more medical volunteers, the price of serving soared. When nurse Kaci Hickox, returning from a stint with MSF in Sierra Leone with no symptoms and a negative blood test, was quarantined in a tent in Newark, N.J., by a combustible governor, it forced a reckoning. “It is crazy we are spending so much time having this debate about how to safely monitor people coming back from Ebola-endemic countries,” says Hickox, “when the one thing we can do to protect the population is to stop the outbreak in West Africa.”

Ebola is a war, and a warning. The global health system is nowhere close to strong enough to keep us safe from infectious disease, and “us” means everyone, not just those in faraway places where this is one threat among many that claim lives every day. The rest of the world can sleep at night because a group of men and women are willing to stand and fight. For tireless acts of courage and mercy, for buying the world time to boost its defenses, for risking, for persisting, for sacrificing and saving, the Ebola fighters are TIME’s 2014 Person of the Year.

[Watch the video here](#)

Source: Time Magazine



## 4th Quarter 2014 Disease Summary



Disease/Condition*	2014	2014	2013	2013
	Oct - Dec	YTD	Oct - Dec	YTD
ARSENIC POISONING	0	0	0	1
CAMPYLOBACTERIOSIS	13	62	5	30
CARBON MONOXIDE POISONING	0	3	0	2
CHIKUNGUNYA FEVER	0	3	0	0
CHOLERA (VIBRIO CHOLERAЕ TYPE O1)	0	1	0	0
CREUTZFELDT-JAKOB DISEASE (CJD)	0	1	0	0
CRYPTOSPORIDIOSIS	32	142	0	7
CYCLOSPORIASIS	0	0	0	2
DENGUE FEVER	0	0	1	3
ESCHERICHIA COLI, SHIGA TOXIN-PRODUCING (STEC) INFECTION	2	16	3	16
GIARDIASIS, ACUTE	5	34	9	24
HAEMOPHILUS INFLUENZAE INVASIVE DISEASE	2	3	2	8
HEPATITIS A	0	7	4	7
HEPATITIS B, ACUTE	11	54	12	39
HEPATITIS B, CHRONIC	21	78	11	46
HEPATITIS B, SURFACE ANTIGEN IN PREGNANT WOMEN	2	10	2	7
HEPATITIS C, ACUTE	0	7	0	1
HEPATITIS C, CHRONIC	252	1000	138	546
INFLUENZA-ASSOCIATED PEDIATRIC MORTALITY	1	1	0	1
LEAD POISONING	28	50	15	37
LEGIONELLOSIS	4	8	2	3
LISTERIOSIS	2	3	0	0
LYME DISEASE	2	6	0	2
MALARIA	0	1	0	0
MENINGITIS, BACTERIAL OR MYCOTIC	0	0	0	1
MENINGOCOCCAL DISEASE	1	2	1	3
MERCURY POISONING	0	1	0	0
MUMPS	0	2	0	0
PERTUSSIS	3	19	7	24
PESTICIDE-RELATED ILLNESS AND INJURY, ACUTE	0	0	0	1
RABIES, ANIMAL	1	6	0	2
RABIES, POSSIBLE EXPOSURE	35	189	68	248
ROCKY MOUNTAIN SPOTTED FEVER & SPOTTED FEVER RICKETTSIOSIS	0	1	0	0
SALMONELLOSIS	33	130	56	167
SHIGELLOSIS	1	7	0	3
STREP PNEUMONIAE INVASIVE DISEASE, DRUG-RESISTANT	2	7	0	7
STREP PNEUMONIAE INVASIVE DISEASE, DRUG-SUSCEPTIBLE	2	11	3	14
TYPHOID FEVER	1	1	0	0
VARICELLA (CHICKENPOX)	0	15	2	15
VIBRIOSIS (VIBRIO ALGINOLYTICUS)	0	1	0	1
VIBRIOSIS (VIBRIO CHOLERAЕ TYPE NON-O1)	0	2	0	0
VIBRIOSIS (VIBRIO FLUVIALIS)	0	1	0	0
VIBRIOSIS (VIBRIO PARAHAEMOLYTICUS)	0	0	1	2
VIBRIOSIS (VIBRIO VULNIFICUS)	2	2	0	0
WEST NILE VIRUS NEUROINVASIVE DISEASE	0	1	0	0
<b>TOTAL</b>	<b>458</b>	<b>1888</b>	<b>342</b>	<b>1270</b>

## PASCO HIV/AIDS/TB 4th Quarter Summary



<u>Disease</u>	2014	2014	2013
	<u>Oct - Dec</u>	<u>YTD (Dec)</u>	<u>YTD (Dec)</u>
HIV*	17	55	40
AIDS*	8	33	25
TB**	4	5	6

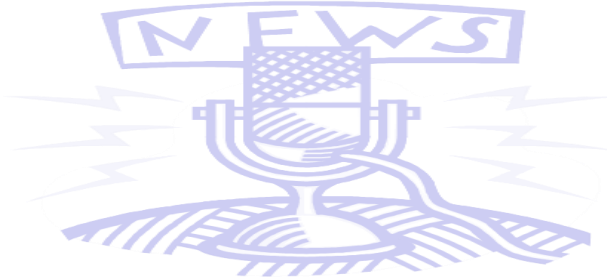
\*Florida Department of Health, Bureau of HIV/AIDS (excluded DOC cases from report)

\*\*Bureau of TB & Refugee Health

Department of Health - Pasco County offers **FREE RAPID HIV TESTING**.

Get tested today and receive results in 20 minutes!

For more information please visit <http://www.doh.state.fl.us/chdPasco/epi.html> or call (727) 841-4425 ext. 3651 or (352) 834-6146



### Transit agency sues Gilead over pricing of hepatitis C drug

December 10, 2014 — The lawyers for the Southeastern Pennsylvania Transportation Authority, or SEPTA, announced on Wednesday that they have filed a lawsuit against Gilead Sciences challenging the “exorbitant pricing” of its hepatitis C drug, Sovaldi.

The release from Philadelphia’s transit agency said that Gilead has been selling a 12-week dose of Sovaldi in the United States for about \$84,000, or \$1,000 a pill, far above its price in other countries and the original projected price.

The pharmaceuticals company has had \$8.5 billion in sales of the drug through the first three quarters of this year, the release added.

Gilead told CNBC in an emailed statement that it had “just received the complaint and therefore [has] no comment at this time.”

This summer, the Senate Finance Committee sent a letter to Gilead questioning the rationale for setting such a high price, as the expensive drug will have an impact on Medicare, Medicaid and other federal programs.

“That price appears to be higher than expected given the costs of development and production and the steep discounts offered in other countries,” the committee said in a July release.

SEPTA has spent at least \$2.4 million on the drug this year for members of the health plans it funds for employees and retirees, Dow Jones reported, citing the lawsuit.

## 2014 Year in Review

### Jail Linkage

#### Males

HIV: 379 tests performed, 0 positive (0%)

Hepatitis A, B, and C: 247 tests performed, 109 positive (44%)

RPR: 260 tests performed, 5 positive (2%)

Chlamydia/Gonorrhea: 25 tests performed, 5 positive (20%)

#### Females

HIV: 188 tests performed, 0 positive (0%)

Hepatitis A, B, and C: 113 tests performed, 75 positive (66%)

RPR: 119 tests performed, 8 positive (7%)

Chlamydia/Gonorrhea: 19 tests performed, 3 positive (16%)

### STD/HIV

Disease Intervention Specialists worked 1466 field records in Prism in 2014

Chlamydia: 1000

Gonorrhea: 164

Syphilis: 177

HIV: 125

### Tuberculosis

5 cases of Pulmonary Tuberculosis

Incidence rate 1.05 per 100,000

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# Reportable Diseases/Conditions in Florida

## Practitioner List (Laboratory Requirements Differ)

Effective June 4, 2014



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

Florida Department of Health in Pasco County - Epidemiology  
13941 15th Street, Dade City, FL 33525  
Phone (352) 521 - 1450 option 6  
After Hours Reporting (727) 257 - 1177 (pager)  
Confidential Fax (352) 521 - 1435

- ! 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

### Birth Defects (850) 245 - 4444 x2198

- + Congenital anomalies
- + Neonatal abstinence syndrome (NAS)

### Cancer (850) 245 - 4401

- + Cancer, excluding non-melanoma skin cancer and including benign and borderline intracranial and CNS tumors

### HIV/AIDS fax to (352) 521 - 1435

- + Acquired immune deficiency syndrome (AIDS)
- + Human immunodeficiency virus (HIV) infection
  - HIV, exposed infants <18 months old born to an HIV-infected woman

### STDs fax to (352) 521 - 1435

- Chancroid
- Chlamydia
- Conjunctivitis in neonates <14 days old
- Gonorrhea
- Granuloma inguinale
- 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 papillomavirus (HPV), associated laryngeal papillomas or recurrent respiratory papillomatosis in children <6 years old; anogenital papillomas in children <12 years old
- Lymphogranuloma venereum (LGV)
- Syphilis

### 📞 Syphilis in pregnant women and neonates

### Tuberculosis fax to (727) 861 - 4844

- Tuberculosis (TB)

### All Others fax to (352) 521 - 1435

- ! 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

### 📞 Amebic encephalitis

### ! Anthrax

- Arsenic poisoning
- Arboviral diseases not otherwise listed

### ! Botulism, foodborne, wound, and unspecified

- Botulism, infant

### ! Brucellosis

- California serogroup virus disease
- Campylobacteriosis
- Carbon monoxide poisoning
- Chikungunya fever

### 📞 Chikungunya fever, locally acquired

### ! Cholera (*Vibrio cholerae* type O1)

- Ciguatera fish poisoning
- Creutzfeldt-Jakob disease (CJD)
- Cryptosporidiosis
- Cyclosporiasis
- Dengue fever

### 📞 Dengue fever, locally acquired

### ! Diphtheria

- Eastern equine encephalitis
- Ehrlichiosis/anaplasmosis
- *Escherichia coli* infection, Shiga toxin-producing
- Giardiasis, acute

### ! Glanders

### ! *Haemophilus influenzae* invasive disease in children <5 years old

- 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 or children <2 years old

### 📞 Herpes B virus, possible exposure

### ! Influenza A, novel or pandemic strains

### 📞 Influenza-associated pediatric mortality in children <18 years old

- Lead poisoning
- Legionellosis
- Leptospirosis

### 📞 Listeriosis

- Lyme disease
- Malaria

### ! Measles (rubeola)

### ! Melioidosis

- Meningitis, bacterial or mycotic

### ! Meningococcal disease

- Mercury poisoning

### • Mumps

### 📞 Neurotoxic shellfish poisoning

### 📞 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

### • Tetanus

- Trichinellosis (trichinosis)

### ! 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

\*Section 381.0031 (2), *Florida Statutes* (F.S.), provides that "Any practitioner licensed in this state to practice medicine, osteopathic medicine, chiropractic medicine, naturopathy, or veterinary medicine; any hospital licensed under part I of chapter 395; or any laboratory licensed under chapter 483 that diagnoses or suspects the existence of a disease of public health significance shall immediately report the fact to the Department of Health." Florida's county health departments serve as the Department's representative in this reporting requirement. Furthermore, Section 381.0031 (4), F.S. provides that "The department shall periodically issue a list of infectious or noninfectious diseases determined by it to be a threat to public health and therefore of significance to public health and shall furnish a copy of the list to the practitioners..."