

Department of Health Pasco County

Main Office
10841 Little Road
New Port Richey, FL 34654
(727) 861-5260
www.pasco.floridahealth.gov

Administrator

Mike Napier, MS

Epidemiology Manager

Garik Nicholson, MPH

Office Hours

Mon-Fri 8am–5pm

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

Epidemiology: (352) 521-1450
Option 2

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) 521-
1450 ext. 6150 (E. Pasco)

HIV (testing): (727) 841-4425 ext.
3655 (W. Pasco) or (352) 521-
1450 ext. 6146 (E. Pasco)

After Hours:

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

Epi Times editor:

Jennie Pell, MPH, CPH
Human Services Program Specialist
(352) 521-1450 ext. 6145
jennie.pell@flhealth.gov

Recreational Water Illnesses (RWIs)

Contrary to popular belief, chlorine does not kill all germs instantly. There are germs today that are very tolerant to chlorine and were not known to cause human disease until recently. Once these germs get in the pool, it can take anywhere from minutes to days for chlorine to kill them. Swallowing just a little water that contains these germs can make you sick.



Recreational water illnesses (RWIs) are caused by germs spread by swallowing, breathing in mists or aerosols of, or having contact with contaminated water in swimming pools, hot tubs, water parks, water play areas, interactive fountains, lakes, rivers, or oceans. RWIs can also be caused by chemicals in the water or chemicals that evaporate from the water and cause indoor air quality problems.

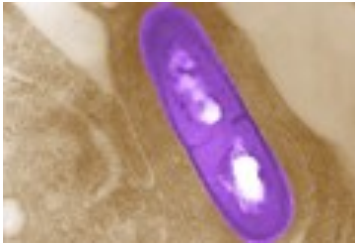
RWIs include a wide variety of infections, such as gastrointestinal, skin, ear, respiratory, eye, neurologic, and wound infections. The most commonly reported RWI is diarrhea. Diarrheal illnesses are caused by germs such as Crypto (short for *Cryptosporidium*), *Giardia*, *Shigella*, *norovirus* and *E. coli* O157:H7. With RWI outbreaks on the rise, swimmers need to [take an active role](#) in helping to protect themselves and prevent the spread of germs. It is important for swimmers to [learn the basic facts about RWIs](#) so they can keep themselves and their family healthy every time they swim.

In the past two decades, there has been a substantial increase in the number of RWI outbreaks associated with swimming. Crypto, which can stay alive for days even in well-maintained pools, has become the leading cause of swimming pool-related outbreaks of diarrheal illness. From 2004 to 2008, reported Crypto cases increased over 200% (from 3,411 cases in 2004 to 10,500 cases in 2008) [1](#).

Although Crypto is tolerant to chlorine, most germs are not. Keeping chlorine at recommended levels is essential to maintain a healthy pool. However, a 2010 study found that 1 in 8 public pool inspections resulted in pools being closed immediately due to serious code violations such as improper chlorine levels [2](#).

Source:
[Centers for Disease Control and Prevention](http://www.cdc.gov)

Keep Listeria Out of Your Kitchen



If you eat food contaminated with bacteria called *Listeria*, you could get so sick that you have to be hospitalized. And for certain vulnerable people, the illness could be fatal.

Contaminated food can bring *Listeria* into the home. Unlike most bacteria, *Listeria* germs can grow and spread in the refrigerator. So if you unknowingly refrigerate *Listeria*-contaminated food, the germs not only multiply at the cool temperature, they could contaminate your refrigerator and spread to other foods there, increasing the likelihood that you and your family will become sick.

Those most at risk for listeriosis—the illness caused by *Listeria monocytogenes*—include pregnant women, older adults and people with compromised immune systems and certain chronic medical conditions (such as HIV/AIDS, cancer, diabetes, kidney disease, and transplant patients). In pregnant women, listeriosis can cause miscarriage, stillbirth, and serious illness or death in newborn babies.

What foods could be contaminated?

Listeria has been linked to a variety of ready-to-eat foods, including deli meats, hot dogs, smoked seafood and store-prepared deli-salads. A draft study released May 10, 2013 by the Food and Drug Administration (FDA) and the U.S. Department of Agriculture's Food Safety and Inspection Service (FSIS) evaluates the risk of listeriosis associated with foods prepared in retail delis. There are many steps that deli operators and processing establishments that supply food to delis can follow to reduce the risk of listeriosis.

FDA and FSIS recommend that consumers at risk for developing listeriosis—including older adults, pregnant women and people with compromised immune systems—reheat hot dogs and lunch meats until steaming hot.

At-risk consumers are also advised to avoid unpasteurized milk and soft cheeses (such as feta, brie, camembert, blue-veined cheeses, "queso blanco," "queso fresco" or Panela), unless they are made with pasteurized milk.

And *Listeria* can sometimes be found in other foods. In 2011, a multi-state outbreak of listeriosis tied to contaminated cantaloupes caused illnesses and deaths.

Donald Zink, Ph.D, senior science advisor at FDA's Center for Food Safety and Applied Nutrition, says FDA is aware of cases of foodborne illness caused by bacteria that can live in the kitchen and spread to foods that had not been contaminated.

Consumers are advised to wash all fruits and vegetables under running water just before eating, cutting or cooking, even if you plan to peel the produce first. Scrub firm produce such as melons and cucumbers with a clean produce brush.

To further protect yourself and your family from *Listeria*, follow these steps:

Keep Refrigerated Foods Cold

Chilling food properly is an important way of reducing risk of *Listeria* infection. Although *Listeria* can grow at refrigeration temperatures, it grows more slowly at refrigerator temperatures of 40 degrees F or less.

- Keep your refrigerator at 40 degrees F or lower and the freezer at 0 degrees F or lower.
- Wrap or cover foods with a sheet of plastic wrap or foil or put foods in plastic bags or clean covered containers before you place them in the refrigerator. Make certain foods do not leak juices onto other foods.
- Place an appliance thermometer, such as a refrigerator thermometer, in the refrigerator, and check the temperature periodically. Adjust the refrigerator temperature control, if necessary, to keep foods as cold as possible without causing them to freeze. Place a second thermometer in the freezer to check the temperature there.
- Use precooked and ready-to-eat foods as soon as you can. The longer they are stored in the refrigerator, the more chance *Listeria* has to grow.

"If you have leftovers in your refrigerator, it's best to throw them out after three days, just to be sure," says Zink. "It's better to be safe than sorry."

Clean Refrigerator Regularly

Listeria can contaminate other food through spills in the refrigerator.

- Clean up all spills in your refrigerator right away—especially juices from hot dog and lunch meat packages, raw meat, and raw poultry. Consider using paper towels to avoid transferring germs from a cloth towel.

Clean the inside walls and shelves of your refrigerator with warm water and liquid soap, then rinse. As an added measure of caution, you can sanitize your refrigerator monthly using the same procedures described below for kitchen surfaces.

Clean Hands and Kitchen Surfaces Often

Listeria can spread from one surface to another.

- Thoroughly wash food preparation surfaces with warm, soapy water. As an added precaution you should sanitize clean surfaces by using any of the kitchen surface sanitizer products available from grocery stores, being careful to follow label directions.

You can make your own sanitizer by combining 1 teaspoon of unscented bleach to one 1 quart of water, flooding the surface and letting it stand for 10 minutes. Then rinse with clean water. Let surfaces air dry or pat them dry with fresh paper towels. Bleach solutions get less effective with time, so discard unused portions daily.

- A cutting board should be washed with warm, soapy water after each use. Nonporous acrylic, plastic, or glass boards can be washed in a dishwasher.
- Dish cloths, towels and cloth grocery bags should be washed often in the hot cycle of your washing machine.

It's also important, to wash hands with warm water and soap for at least 20 seconds before and after handling food.

PASCO HIV/AIDS/TB 1st Quarter Summary



| | 2015 | 2015 | 2014 |
|----------------|------------------|------------------|------------------|
| <u>Disease</u> | <u>Jan - Mar</u> | <u>YTD (Mar)</u> | <u>YTD (Mar)</u> |
| HIV* | 21 | 21 | 10 |
| AIDS* | 11 | 11 | 8 |
| TB** | 1 | 1 | 0 |

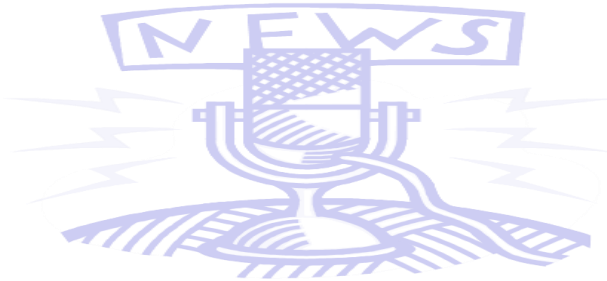
*Florida Department of Health, Bureau of HIV/AIDS (excluded DOC cases from report)

**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. 3655 or (352) 521-1450 ext. 6146



U.S. Multi-state Measles Outbreak 2014–2015

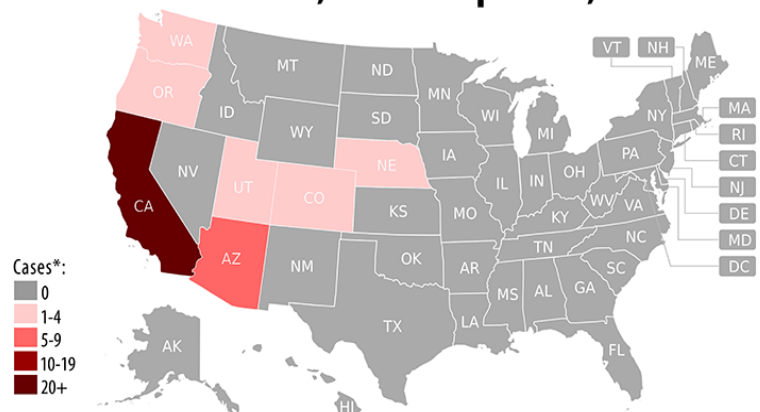
The United States is currently experiencing a large, multi-state outbreak of measles linked to an amusement park in California.

The outbreak likely started from a traveler who became infected overseas with measles, then visited the amusement park while infectious. However, no source has been identified.

Analysis by CDC scientists shows that the measles virus type in this outbreak (B3) is identical to the virus type that caused the large measles outbreak in the Philippines in 2014. This virus type has also been identified within the past 6 months in 14 other countries. Additionally, at least 6 other states in the U.S. have had measles cases with B3 virus type, not associated with the current outbreak.

On January 23, 2015, CDC issued a Health Advisory to notify public health departments and healthcare facilities about this multi-state outbreak and to provide guidance for healthcare providers nationwide.

U.S. Multi-state Measles Outbreak December 28, 2014 - April 10, 2015



From December 28 to April 10, 2015, 147 people from 7 states [AZ (7), CA (131), CO (1), NE (2), OR (1), UT (3), WA (2)] were reported to have measles and are considered to be part of a large outbreak linked to an amusement park in California*.

*Provisional data reported to CDC's National Center for Immunization and Respiratory Diseases



1st Quarter 2015 Disease Summary

| <u>Disease/Condition*</u> | <u>2015 Jan - Mar</u> | <u>2015 YTD</u> | <u>2014 Jan - Mar</u> | <u>2014 YTD</u> |
|-----------------------------------------------------|---------------------------|---------------------|---------------------------|---------------------|
| ARSENIC POISONING | - | - | - | - |
| CAMPYLOBACTERIOSIS | 16 | 16 | 13 | 13 |
| CARBON MONOXIDE POISONING | 1 | 1 | 1 | 1 |
| CHIKUNGUNYA FEVER | - | - | - | - |
| CHOLERA (VIBRIO CHOLERAЕ TYPE O1) | - | - | - | - |
| CREUTZFELDT-JAKOB DISEASE (CJD) | - | - | - | - |
| CRYPTOSPORIDIOSIS | 2 | 2 | 2 | 2 |
| CYCLOSPORIASIS | - | - | - | - |
| DEGUE FEVER | - | - | - | - |
| EHRlichiosis/ANAPLASMOSIS | 1 | 1 | - | - |
| ESCHERICHIA COLI, SHIGA TOXIN-PRODUCING (STEC) | 3 | 3 | 4 | 4 |
| GIARDIASIS, ACUTE | 3 | 3 | 5 | 5 |
| HAEMOPHILUS INFLUENZAE INVASIVE DISEASE | 1 | 1 | 1 | 1 |
| HEMOLYTIC UREMIC SYNDROME (HUS) | 1 | 1 | - | - |
| HEPATITIS A | 2 | 2 | 3 | 3 |
| HEPATITIS B, ACUTE | 19 | 19 | 13 | 13 |
| HEPATITIS B, CHRONIC | 27 | 27 | 13 | 13 |
| HEPATITIS B, SURFACE ANTIGEN IN PREGNANT WOMEN | 4 | 4 | 3 | 3 |
| HEPATITIS C, ACUTE | - | - | - | - |
| HEPATITIS C, CHRONIC | 296 | 296 | 149 | 149 |
| INFLUENZA-ASSOCIATED PEDIATRIC MORTALITY | - | - | - | - |
| LEAD POISONING | 8 | 8 | 11 | 11 |
| LEGIONELLOSIS | - | - | 2 | 2 |
| LISTERIOSIS | 1 | 1 | 1 | 1 |
| LYME DISEASE | - | - | - | - |
| MALARIA | - | - | - | - |
| MEASLES | - | - | - | - |
| MENINGITIS, BACTERIAL OR MYCOTIC | 1 | 1 | - | - |
| MENINGOCOCCAL DISEASE | - | - | - | - |
| MERCURY POISONING | - | - | - | - |
| MUMPS | 1 | 1 | - | - |
| PERTUSSIS | 5 | 5 | 7 | 7 |
| PESTICIDE-RELATED ILLNESS AND INJURY, ACUTE | - | - | - | - |
| RABIES, ANIMAL | 1 | 1 | 2 | 2 |
| RABIES, POSSIBLE EXPOSURE | 49 | 49 | 50 | 50 |
| ROCKY MOUNTAIN SPOTTED FEVER | - | - | - | - |
| SALMONELLOSIS | 19 | 19 | 25 | 25 |
| SHIGELLOSIS | - | - | 2 | 2 |
| STREP PNEUMONIAE INVASIVE DISEASE, DRUG-RESISTANT | - | - | 3 | 3 |
| STREP PNEUMONIAE INVASIVE DISEASE, DRUG-SUSCEPTIBLE | 4 | 4 | 5 | 5 |
| VARICELLA (CHICKENPOX) | 6 | 6 | 7 | 7 |
| VIBRIOSIS (VIBRIO ALGINOLYTICUS) | - | - | - | - |
| VIBRIOSIS (VIBRIO CHOLERAЕ TYPE NON-O1) | - | - | 1 | 1 |
| VIBRIOSIS (VIBRIO FLUVIALIS) | - | - | - | - |
| VIBRIOSIS (VIBRIO PARAHAEMOLYTICUS) | - | - | - | - |
| VIBRIOSIS (VIBRIO VULNIFICUS) | 1 | 1 | - | - |
| WEST NILE VIRUS NEUROINVASIVE DISEASE | - | - | - | - |
| TOTAL | 472 | 472 | 323 | 323 |

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 2

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

- ! 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
- ! 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
- ☎ Dengue fever, locally acquired
- ! Diphtheria
- Eastern equine encephalitis
- Ehrlichiosis/anaplasmosis
- *Escherichia coli* infection, Shiga toxin-producing
- Giardiasis, acute
- ! Glanders
- Gonorrhea

- Granuloma inguinale
- ! *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
- 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
- Lead poisoning
- 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
- ☎ 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

*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..."