



Epi Times

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Florida Department of Health Pasco County

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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) 619-0260 (W. Pasco) or (352) 834-6150 (E. Pasco)

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

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Fight the Flu! Get Vaccinated!

Who should get vaccinated this season?

Everyone 6 months of age and older should get a flu vaccine every season. Vaccination to prevent influenza is particularly important for people who are at high risk of serious complications from influenza. See People at High Risk of Developing Flu-Related Complications for a full list of age and health factors that confer increased risk.

Flu vaccination has important benefits. It can reduce flu illnesses, doctors' visits, and missed work and school due to flu, as well as prevent flu-related hospitalizations.

Different flu vaccines are approved for use in different groups of people. Factors that can determine a person's suitability for vaccination, or vaccination with a particular vaccine, include a person's age, health (current and past) and any relevant allergies.

Flu shots are approved for use in pregnant women and people with chronic health conditions. There are flu shots that also are approved for use in people as young as 6 months of age and up.

CDC recommends use of the flu shot (inactivated influenza vaccine or IIV) and the recombinant influenza vaccine (RIV). The nasal spray flu vaccine (live attenuated influenza vaccine or LAIV) should not be used during 2016-2017. More information is available at [Who Should Get Vaccinated Against Influenza](#).

Who Should Not Receive a Flu Shot:

- [People who cannot get a flu shot](#)
 - Children younger than 6 months old
 - People with severe, life-threatening allergies to flu vaccine or any of its ingredients Note: There are certain flu shots that have different age indications. For example people younger than 65 years of age should not get the [high-dose flu shot](#) and people who are younger than 18 years old or older than 64 years old should not get the [intradermal flu shot](#).
- [People who should talk to their doctor before getting the flu shot](#)
 - People who have an allergy to eggs or other vaccine ingredients
 - People who have ever had [Guillain-Barre Syndrome \(GBS\)](#)
 - People who are feeling ill

When should I get vaccinated?

CDC recommends that people get vaccinated by the end of October, if possible. [Children who need two doses of vaccine to be protected should start the vaccination process sooner](#). It takes about two weeks after vaccination for antibodies to develop in the body and provide protection against the flu.

Special Consideration Regarding Egg Allergy

The recommendations for vaccination of people with egg allergies have changed for 2016-2017.

People with egg allergies can receive any licensed, recommended age-appropriate influenza vaccine and no longer have to be monitored for 30 minutes after receiving the vaccine. People who have severe egg allergies should be vaccinated in a medical setting and be supervised by a health care provider who is able to recognize and manage severe allergic conditions.

Source: [CDC](#)

Prevent the Spread of Norovirus

Norovirus causes many people to become ill with vomiting and diarrhea each year. You can help protect yourself and others by washing your hands often and following simple tips to stay healthy.

Noroviruses are a group of related viruses that can cause gastroenteritis (GAS-tro-en-ter-i-tis), which is inflammation of the stomach and intestines. This leads to cramping, nausea, vomiting, and diarrhea.

Norovirus is the most common cause of gastroenteritis in the U.S.

CDC estimates that each year Norovirus causes 19 to 21 million illnesses, 56,000 to 71,000 hospitalizations and 570 to 800 deaths. Anyone can get infected with norovirus and you can get it more than once. It is estimated that a person will get norovirus about 5 times during their lifetime. Many people usually get sick with norovirus in cooler months, especially from November to April.

Norovirus spreads quickly. It is found in the vomit and stool of infected people. You can get it by:

- Eating food or drinking liquids that are contaminated with norovirus
- Touching surfaces or objects with norovirus on them and then putting your hand or fingers in your mouth
- Having direct contact with a person who is infected with norovirus, for example, when caring for someone with norovirus or sharing foods or eating utensils with them

People with norovirus illness are contagious from the moment they begin feeling sick and for the first few days after they recover. Some people may be contagious for even longer. There is no vaccine to prevent norovirus infection or drug to treat sick people. Learn how to protect yourself and others by following a few simple steps.

Protect Yourself and Others from Norovirus

- **Practice proper hand hygiene** [Wash your hands](#) carefully with soap and water, especially after using the toilet and changing diapers and always before eating or preparing food. If soap and water aren't available, use an alcohol-based hand sanitizer. These alcohol-based products can help reduce the number of germs on your hands, but they are not a substitute for washing with soap and water.
- **Take care in the kitchen** Carefully rinse fruits and vegetables, and cook oysters and other shellfish thoroughly before eating.
- **Do not prepare food while infected** People with norovirus illness should not prepare food for others while they have symptoms and for at least 2 days after they recover from their illness. [Also see For Food Workers: Norovirus and Working with Food.](#)
- **Clean and disinfect contaminated surfaces** After throwing up or having diarrhea, immediately clean and disinfect contaminated surfaces using a bleach-based household cleaner as directed on the product label. If no such cleaning product is available, you can use a solution made with 5 tablespoons to 1.5 cups of household bleach per 1 gallon of water.
- **Wash laundry thoroughly** Immediately remove and wash clothing or linens that may be contaminated with vomit or stool. Handle soiled items carefully—try not to shake them—to avoid spreading virus. If available, wear rubber or disposable gloves while handling soiled clothing or linens and wash your hands after handling. Wash soiled items with detergent at the maximum available cycle length and then machine dry.

Common Norovirus Outbreak Settings

Norovirus spreads quickly from person to person in enclosed places like nursing homes, daycare centers, schools, and cruise ships. It is also a major cause of outbreaks in restaurants and catered-meal settings if contaminated food is served.

Many Names, Same Symptoms

You may hear norovirus illness called "food poisoning" or "stomach flu." Norovirus can cause foodborne illness, as can other germs and chemicals.

Norovirus illness is not related to the flu (influenza). Though they may share some of the same symptoms, the flu is a respiratory illness caused by influenza virus.

For most people norovirus illness is not serious and they get better in 1 to 3 days. But it can be serious in young children, the elderly, and people with other health conditions. It can lead to severe dehydration, hospitalization and even death. To learn more about dehydration and how to prevent and treat it see [norovirus treatment](#).

Norovirus Symptoms

Common symptoms:

- Cramping
- Nausea
- Vomiting
- Diarrhea

Less common symptoms:

- Low-grade fever
- Chills
- Headache
- Muscle aches
- Fatigue

Protect Against Respiratory Syncytial Virus

RSV usually causes mild, cold-like symptoms. But it can lead to serious illness, especially for infants and older adults. Wash your hands often to help protect yourself and others from RSV.

Each year in the United States, more than 57,000 children younger than 5 years old are hospitalized due to RSV infection, and about 14,000 adults older than 65 years die from it.

Respiratory syncytial virus, or RSV, is most common during fall, winter and spring. It can spread through coughing and sneezing. You can also get RSV by touching surfaces that have RSV on them, then touching your eyes, nose, or mouth. Almost all children get RSV by the time they are 2 years old. Healthy children usually experience mild, cold-like symptoms and recover on their own within a week or two. But RSV can cause severe lung infections, including bronchiolitis (infection of small airways in the lungs) and pneumonia (an infection of the lungs).

Those who have a higher risk for severe illness caused by RSV include:

- Premature babies
- Children younger than 2 years old with chronic lung disease or certain heart problems
- Adults 65 years and older
- People with weakened immune systems, such as from HIV infection, organ transplants, or specific medical treatments like chemotherapy

Help Prevent the Spread of RSV

You can help protect yourself and others from RSV infection by following a few prevention tips:

- **Wash your hands often** [Wash your hands](#) often with soap and water for 20 seconds, and help young children do the same. If soap and water are not available, use an alcohol-based hand sanitizer. Washing your hands will help protect you from germs.
- **Keep your hands off your face** Avoid touching your eyes, nose, and mouth with unwashed hands. Germs spread this way.
- **Avoid close contact with sick people** Avoid close contact, such as kissing, and sharing cups or eating utensils with people who have cold-like symptoms.
- **Cover your coughs and sneezes** Cover your mouth and nose with a tissue when coughing or sneezing. Throw the tissue in the trash afterward.
- **Clean and disinfect surfaces** Clean and disinfect surfaces and objects that people frequently touch, such as toys and doorknobs. When people infected with RSV touch surfaces and objects, they can leave behind germs. Also, when they cough or sneeze, droplets containing germs can land on surfaces and objects.
- **Stay home when you are sick** If possible, stay home from work, school, and public areas when you are sick. This will help protect others from catching your illness.

If you have cold-like symptoms, you should take extra care to stay away from people [who have a higher risk for severe illness caused by RSV](#). Whether this is possible or not, you should carefully follow the prevention tips above.

Children often pass the virus to one another at their school or childcare center. Limiting the time that high-risk children spend in these settings during the RSV season may help protect them from infection. For more information, see [Preventing the Spread of Illness In Child Care or School](#).

There is no vaccine to prevent RSV infection yet, but scientists are working hard to develop one. And there is a medicine that can help protect some babies. This medicine (called palivizumab) is a series of monthly shots. Doctors usually give the shots once a month during RSV season to infants and young children who have a higher risk for serious illness caused by RSV. If you are concerned about your child's risk for RSV, talk to your pediatrician about these shots.

Know the symptoms

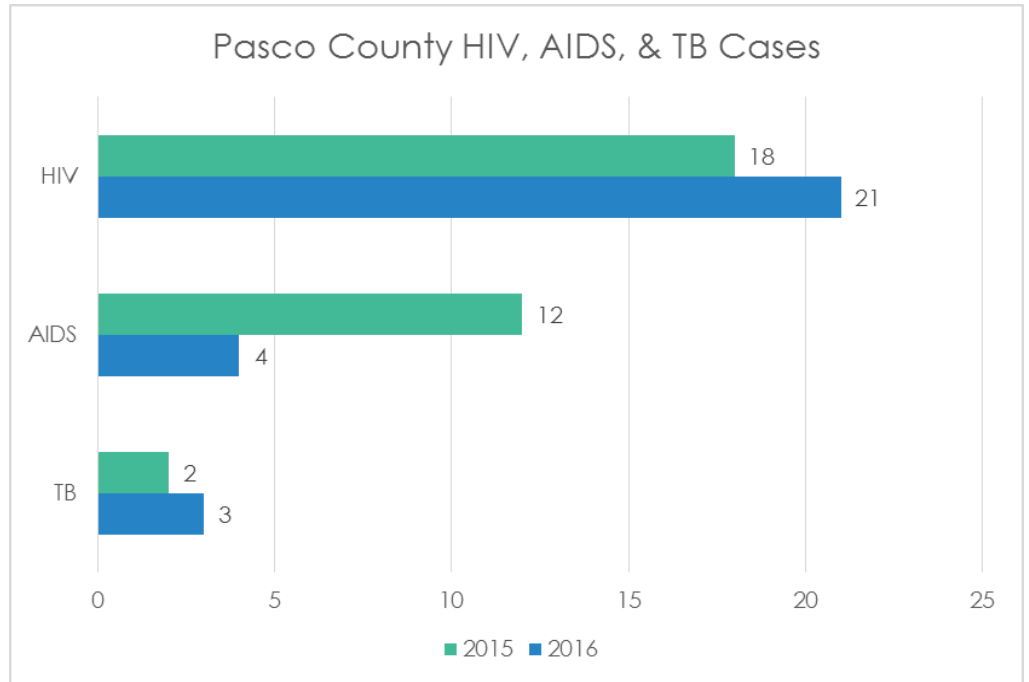
Many of the first symptoms of RSV infection are similar to the common cold. Infants and young children may have:

- Fever
- Reduced appetite
- Runny nose
- Cough
- Wheezing

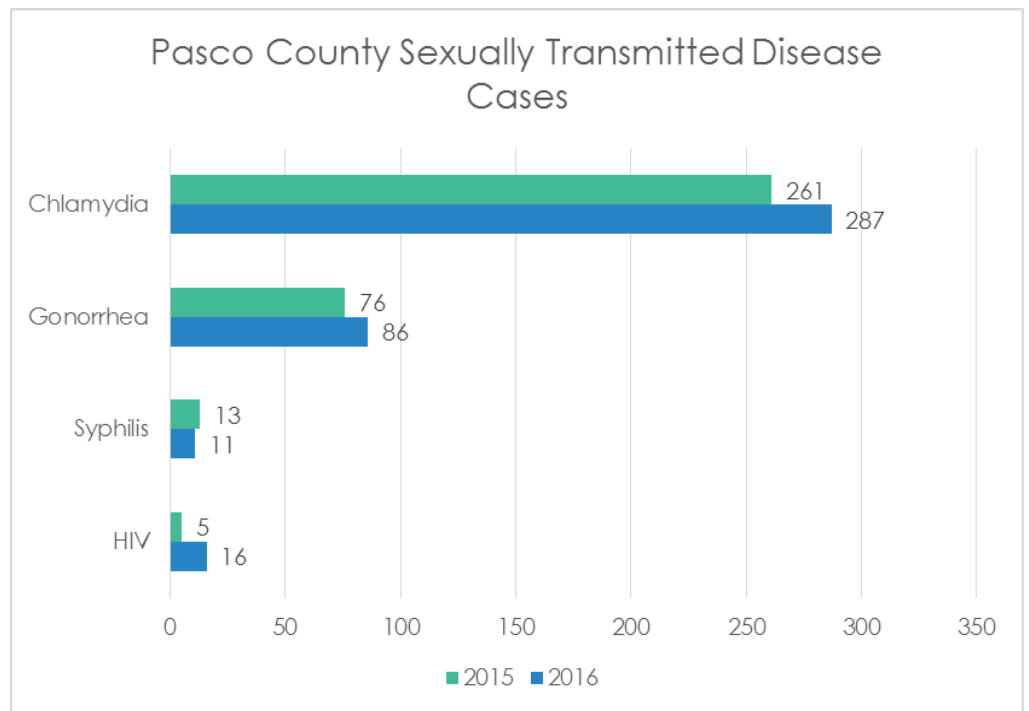
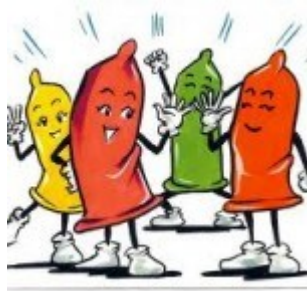
Call a doctor if your child has difficulty breathing, is not drinking enough fluids, or experiences worsening symptoms.



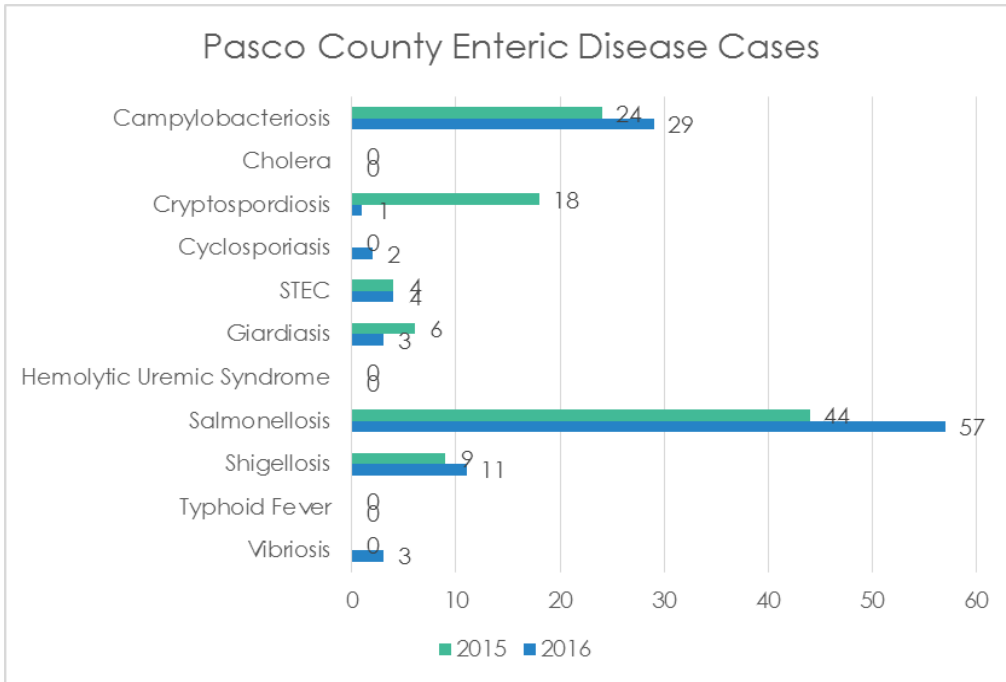
HIV, AIDS, & TB 3rd Quarter Summary



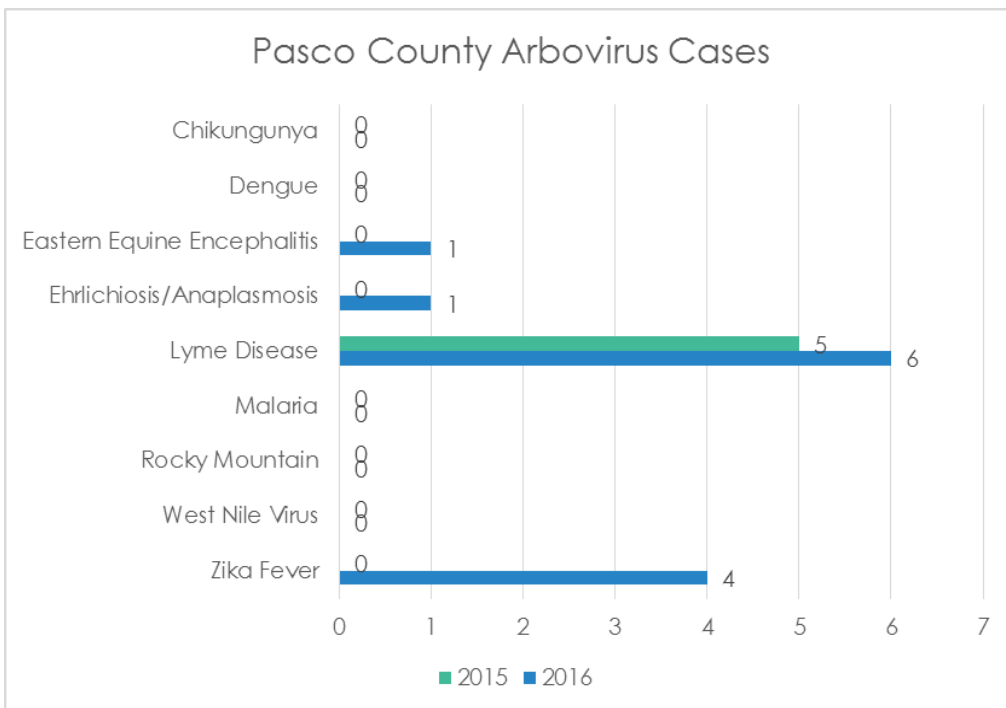
STDs 3rd Quarter Summary



Enteric Disease 3rd Quarter



Arbovirus 3rd Quarter



Disease Summary 3rd Quarter 2016	Jul - Sep		YTD	
	2016	2015	2016	2015
CNS Diseases and Bacteremias				
Creutzfeldt-Jacob Disease (CJD)				1
Haemophilus influenzae			6	1
Legionellosis		4	6	6
Listeriosis				1
Meningitis, Bacterial or Mycotic		5	2	6
Meningococcal Disease	1		1	
S. aureus Infection, Intermediate Resistance to Vanomycin			1	
Strep pneumoniae Invasive Disease, Drug-Resistant			2	1
Strep pneumoniae Invasive Disease, Drug-Susceptible	2		14	4
Enteric Infections				
Campylobacteriosis	29	24	68	77
Cholera (Vibrio cholerae Type O1)				
Cryptosporidiosis	1	18	7	24
Cyclosporiasis	2		3	
Escherichia coli Shiga Toxin-Producing (STEC)	4	4	13	8
Giardiasis	3	6	11	15
Hemolytic Uremic Syndrome (HUS)				1
Salmonellosis	57	44	95	97
Shigellosis	11	9	16	12
Typhoid Fever				
Vibriosis	3		3	2
Vaccine Preventable Diseases				
Measles				
Mumps				1
Pertussis	7	1	12	13
Varicella	4	5	8	21
Vector Borne, Zoonoses				
Chikungunya Fever				
Eastern Equine Encephalitis	1		1	
Ehrlichiosis/Anaplasmosis	1		1	1
Lyme Disease	6	5	8	5
Malaria				
Rabies, Animal			2	1
Rabies, Possible Exposure	28	37	109	146
Rocky Mountain Spotted Fever and Rickettsiosis				
West Nile Virus Neuroinvasive Disease				
Zika Fever	4		8	
Viral Hepatitis				
Hepatitis A	1	2	3	4
Hepatitis B, Acute	24	24	73	54
Hepatitis B, Chronic	19	29	70	74
Hepatitis B, Surface Antigen in Pregnant Women	3	4	6	8
Hepatitis C, Acute	8	2	20	4
Hepatitis C, Chronic	291	223	882	660
Hepatitis E				
Other				
Carbon Monoxide Poisoning	3		7	2
Influenza-Associated Pediatric Mortality				
Lead Poisoning	11	10	26	26
Mercury Poisoning			1	
Pesticide-Related Illness and Injury			1	
Total	524	456	1486	1276

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..."