Florida Department of Health Pasco County

January 2016 Surveillance Report

Inside this report:

Updated Recommendations for Testing Pregnant Women with a History of Travel to Areas with Ongoing Zika Virus Transmission

Recommendations for Zika virus testing of pregnant women who have a clinical illness consistent with Zika virus disease during or within 2 weeks of travel to areas with ongoing Zika virus transmission are unchanged from CDC recommendations released January 19, 2016 (*1*). Zika virus testing of maternal serum includes reverse transcription-polymerase chain reaction (RT-PCR) testing for symptomatic patients with onset of symptoms during the previous week; immunoglobulin M (IgM) and plaque-reduction neutralizing antibody testing should be performed on specimens collected ≥4 days after onset of symptoms (Figure 1) (*1,10*).

Serologic testing for Zika virus can be offered to asymptomatic pregnant women who traveled to an area with ongoing Zika virus transmission (Figure 1); however, interpretation of results is complex. Because of cross-reactivity among related flaviviruses, such as dengue, yellow fever, and West Nile viruses, a positive IgM result can be difficult to interpret. Plaque-reduction neutralization testing (PRNT) can be performed to measure virus-specific neutralizing antibodies to Zika virus and other flaviviruses. The levels of neutralizing antibodies can then be compared between flaviviruses, but these tests might also be difficult to interpret in persons who were previously infected with or vaccinated against flaviviruses. However, a negative IgM result obtained 2–12 weeks after travel would suggest that a recent infection did not occur and could obviate the need for serial ultrasounds. Based on experience with other flaviviruses, IgM antibodies will be expected to be present at least 2 weeks after virus exposure and persist for up to 12 weeks (*11–14*). Information about the performance of serologic testing of asymptomatic persons is limited; a negative serologic test result obtained 2–12 weeks after travel cannot definitively rule out Zika virus infection. Given these challenges in interpreting serologic test results, health care providers should contact their state, local, or territorial health department for assistance with arranging testing and interpreting results. CDC is working with health departments and other organizations to rapidly increase the availability of testing for Zika virus.

Source: CDC MMWR

Staff Events/News

HIV Outreach staff participated in events at The Lighthouse Ministries in Dade City, the Juvenile Detention Center in San Antonio, Farm Workers, Inc. in Dade City, Operation PAR in New Port Richey, Premier Health Fair in Hudson, and went out with the mobile medical unit.

Epidemiologists Briana O'Sullivan and Jennie Pell attended the Bay Area Professionals in Infection Control (BAPIC) 2016 Annual Conference.

Epidemiologist Deb Hensley attended the Six Sigma Yellow Belt training with other members of the FDOH-Pasco Quality Improvement team.

Influenza Update

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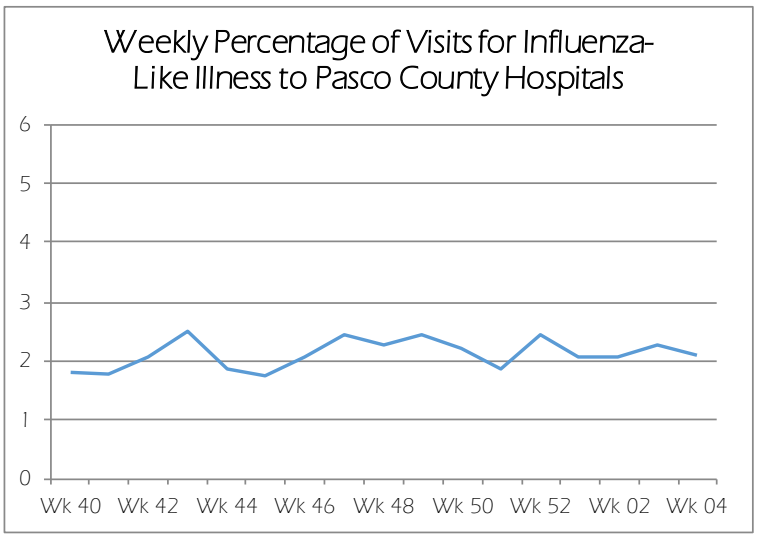


State influenza and influenza-like illness (ILI) activity:

- Florida reported 'local' activity to the Centers for Disease Control and Prevention (CDC) in week 4, this is up from 'sporadic' activity reported in previous weeks.
- While influenza activity has been low, the flu season is finally beginning; there has been an increase in reported outbreaks and a notable increase in emergency department (ED) and urgent care center (UCC) ILI visits in the North, Central, and South East regions of Florida, particularly in the 10 to 19 year age group.
- Influenza activity in Florida often peaks in late January and February; current activity levels are consistent with those historic trends.
- The preliminary estimated number of deaths due to pneumonia and influenza is below levels seen in previous seasons at this time.
- In week 4, four counties reported 'moderate' activity and 46 counties reported 'mild' activity.
- Thirty-two counties reported 'increasing' activity in week 4. This is up from twenty in week 3.
- No influenza-associated pediatric deaths were reported in week 4.
    - Two influenza-associated pediatric deaths have been reported so far this season. While rare, Florida receives reports of influenza-associated pediatric deaths each season.
- In week 4, two influenza outbreaks and one ILI outbreak were reported in a Holmes County nursing home, a Baker County correctional facility, and a Pasco County nursing home, respectively.
- In recent weeks, influenza A (2009 H1N1) has been the most commonly identified influenza subtype by BPHL.

National influenza activity:

- Influenza activity has increased nationally.
- CDC has received increased reports of hospitalizations and other severe outcomes from influenza infection. Individuals at high risk of complications from influenza infection with suspected influenza should be treated with antivirals as early as possible, even prior to laboratory confirmation.
    - Influenza A (2009 H1N1) is the predominately circulating strain.
- The vast majority of circulating flu viruses analyzed this season remain similar to the vaccine virus components for this season's flu vaccines. If you have not yet been vaccinated this season, get vaccinated now.
    - To learn more, please visit: www.cdc.gov/flu/weekly/.
- Highly pathogenic avian influenza (HPAI) H5 viruses have been identified in U.S. backyard and commercial flocks of birds during the spring and summer of 2015. HPAI H5 has not been identified in Florida birds, but identifications are anticipated. No human HPAI infections have been identified in Florida or the rest of the nation.
    - To learn more, please visit: www.floridahealth.gov/novelflu.

Florida Arbovirus Surveillance

Andrea Bingham, PhD, MSPH, Shaiasia Itwaru-Womack, MPH, Katherine Kendrick, MPH, and Danielle Stanek, DVM, DOH Bureau of Epidemiology; Lea Heberlein-Larson, Lylah Seaton, and Valerie Mock, 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) and California encephalitis group viruses (CEV). Malaria, a non-viral mosquito-borne disease is also included. During the period of January 24-30, 2016 the following arboviral activity was recorded in Florida.

This report contains information for 2015 and 2016.

WNV activity: One human case of WNV infection was reported this week in Sarasota County. No horses with WNV infection were reported this week. Three sentinel chickens tested positive for antibodies to WNV this week in Sarasota and Walton Counties. In 2016, positive samples from seven sentinel chickens have been received from three counties. In 2015, positive samples from 12 humans, two blood donors, six horses, 11 mosquito pools, and 446 sentinel chickens have been received from 28 counties.

SLEV activity: No human cases of SLEV infection were reported this week. No sentinel chickens tested positive for antibodies to SLEV this week. In 2016, there have been no positive samples reported. In 2015, positive samples from nine sentinel chickens have been received from seven counties.

EEEV activity: No human cases of EEEV infection were reported this week. No horses with EEEV infection were reported this week. No sentinel chickens tested positive for antibodies to EEEV this week. In 2016, positive samples from four sentinel chickens have been received from two counties. In 2015, positive samples from 82 sentinel chickens, 23 horses, and one goat have been received from 26 counties.

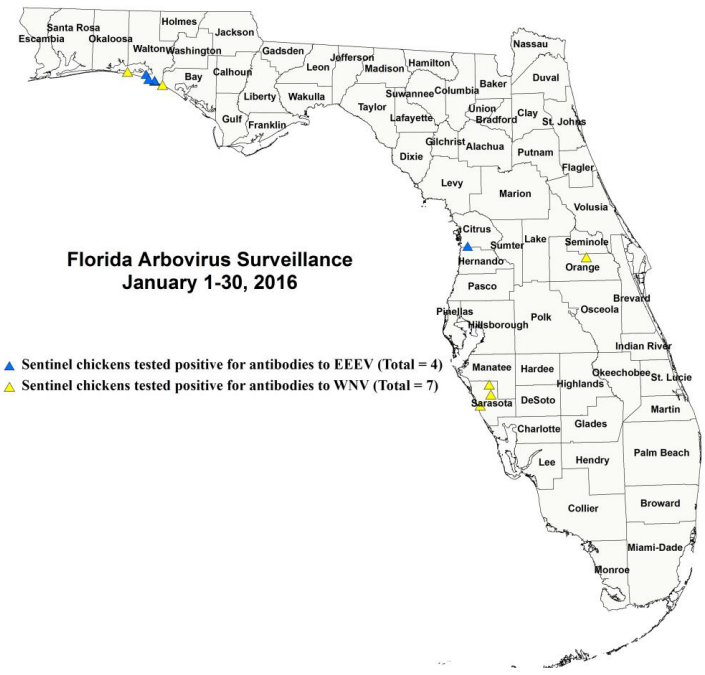
International Travel-Associated Dengue Fever Cases: Six cases of dengue fever were reported this week in persons that had international travel. In 2015, 87 travel-associated cases have been reported. In 2016, five cases have been reported.

Dengue Fever Cases Acquired in Florida: No cases of locally acquired dengue fever were reported this week. In 2015, one case of locally acquired dengue fever has been reported.

International Travel-Associated Chikungunya Fever Cases: No cases of chikungunya fever were reported this week in persons that had international travel. In 2015, 75 travel-associated cases have been reported.

Chikungunya Fever Cases Acquired in Florida: No cases of locally acquired chikungunya fever were reported this week. In 2015, no cases of locally acquired chikungunya fever have been reported.

International Travel-Associated Zika Fever Cases: Six cases of Zika fever were reported this week in persons that had international travel. In 2016, nine travel-associated cases have been reported. No cases of locally acquired Zika fever have been reported.



Advisories/Alerts: No counties are currently under mosquito-borne illness advisory or alert. There is a Level 2 (Alert) Travel Health Notice from the CDC for multiple countries in the Caribbean, Central and South America, Mexico, Cape Verde, and Samoa related to Zika virus transmission and a possible association with poor pregnancy outcomes. Pregnant women should consider postponing travel to these areas. There is a Level 1 (Watch) Travel Health Notice from the CDC for multiple countries in the Caribbean, Central and South America, and Mexico, related to the transmission of chikungunya virus. While a travel health notice has not been issued for the recent locally acquired dengue fever cases in Hawaii, visitors should continue to take appropriate mosquito bite precautions while traveling. Additional information on travel health notices can be found at the following link: http://wwwnc.cdc.gov/travel/notices.

Epidemiology Disease Summary	January		YTD	
	2016	2015	2016	2015
CNS Diseases and Bacteremias				
Creutzfeldt-Jacob Disease (CJD)	-	-	-	-
Haemophilus influenzae	-	-	-	-
Legionellosis	-	-	-	-
Listeriosis	-	-	-	-
Meningitis, Bacterial or Mycotic	-	-	-	-
Meningococcal Disease	-	-	-	-
Strep pneumoniae Invasive Disease, Drug-Resistant	2	-	2	-
Strep pneumoniae Invasive Disease, Drug-Susceptible	2	2	2	2
Enteric Infections				
Campylobacteriosis	9	4	9	4
Cholera (Vibrio cholerae Type O1)	-	-	-	-
Cryptosporidiosis	-	2	-	2
Cyclosporiasis	-	-	-	-
Escherichia coli Shiga Toxin-Producing (STEC)	1	-	1	-
Giardiasis	2	-	2	-
Hemolytic Uremic Syndrome (HUS)	-	-	-	-
Salmonellosis	7	8	7	8
Shigellosis	1	-	1	-
Typhoid Fever	-	-	-	-
Vibriosis	-	-	-	-
Vaccine Preventable Diseases				
Measles	-	-	-	-
Mumps	-	-	-	-
Pertussis	1	-	1	-
Varicella	1	1	1	1
Vector Borne, Zoonoses				
Chikungunya Fever	-	-	-	-
Ehrlichiosis/Anaplasmosis	-	-	-	-
Lyme Disease	-	-	-	-
Malaria	-	-	-	-
Rabies, Animal	-	1	-	1
Rabies, Possible Exposure	12	17	12	17
Rocky Mountain Spotted Fever and Rickettsiosis	-	-	-	-
West Nile Virus Neuroinvasive Disease	-	-	-	-
Zika Virus	-	-	-	-
Viral Hepatitis				
Hepatitis A	-	2	-	2
Hepatitis B, Acute	8	4	8	4
Hepatitis B, Chronic	11	10	11	10
Hepatitis B, Surface Antigen in Pregnant Women	1	-	1	-
Hepatitis C, Acute	6	-	6	-
Hepatitis C, Chronic	79	81	79	81
Other				
Carbon Monoxide Poisoning	2	1	2	1
Influenza-Associated Pediatric Mortality	-	-	-	-
Lead Poisoning	3	-	3	-
Mercury Poisoning	-	-	-	-
Total	148	133	148	133

STD Monthly Morbidity Statistics

- Chlamydia = 56
- Gonorrhea = 14
- Syphilis = 1
- HIV = 0

In men, gonorrhea can cause a painful condition in the tubes attached to the testicles. In rare cases, this may cause a man to be sterile, or prevent him from being able to father a child.

HIV Outreach Statistics

- 69 individuals were tested for HIV
- 9 individuals were tested for Syphilis
- 44 rapid Hepatitis tests performed
- 4 individuals tested positive for HIV and 3 individuals tested positive for AIDS

Current HIV Infection data by year of report reflects any case meeting the CDC definition of 'HIV infection' which includes all newly reported HIV cases and newly reported AIDS cases with no previous report of HIV in Florida. If a case is later identified as being previously diagnosed and reported from another state, the case will no longer be reflected as a Florida case and the data will be adjusted accordingly. Data from the most recent calendar year (2015 & 2016) are considered provisional and therefore should not be used to confirm or rule out an increase in newly reported cases in Florida. The final year-end numbers for 2015 are generated in July of the following year, after duplicate cases are removed from the dataset, as is customary of HIV surveillance in the US.

Jail Linkage Statistics

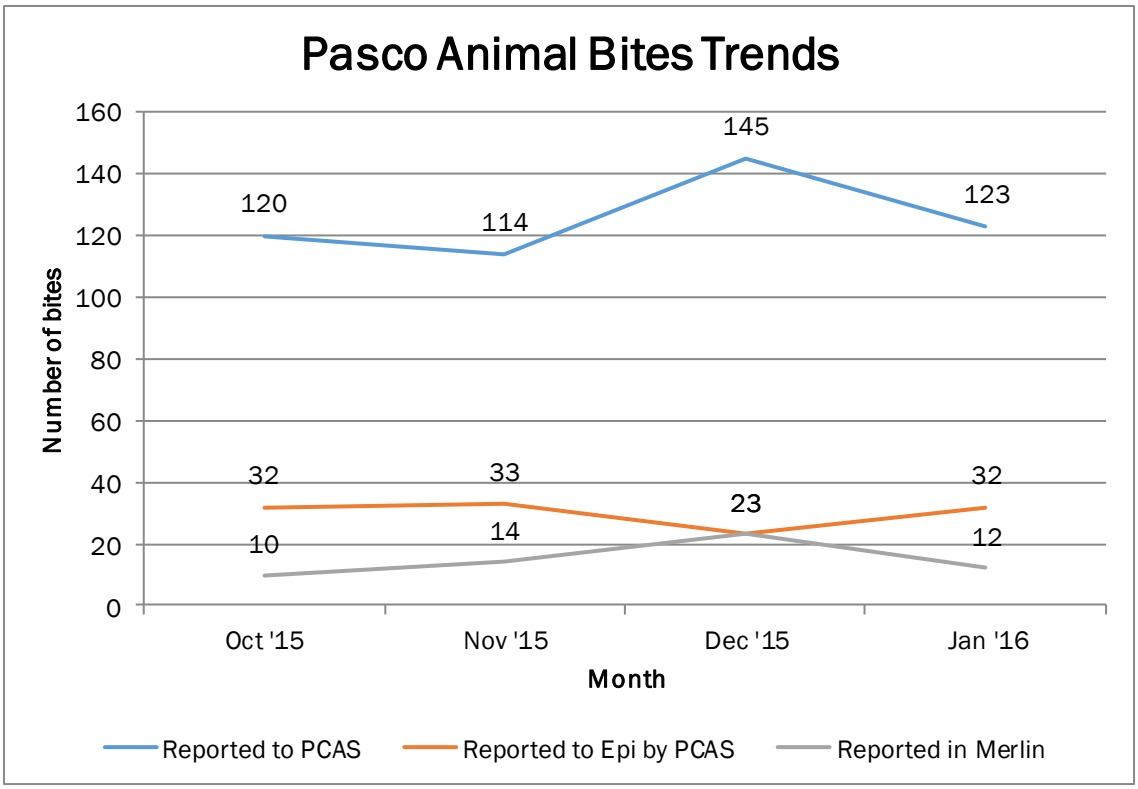
- 8 rapid HIV tests performed (0 – positive)
- 7 Hepatitis tests performed (4 – positive)
- 7 RPR tests performed (0 – positive)
- 0 Gonorrhea/Chlamydia tests performed (0 – positive)
- 8 individuals were HIV post-test counseled

Tuberculosis Statistics

- 6 TB cases
- 3 Suspect cases
- 20 LTBI clients
- 9 new (0 no shows) refugees
- 9 Follow up immunization visits

Animal Bites

- Pasco County Animal Services (PCAS) received 123 animal bites in January
- PCAS reported 32 of 123 (26%) cases to PCHD for follow-up
- 12 of 32 (38%) were reported in Merlin after meeting case definition
- DOH – Pasco sent 7 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.

Dole Fresh Vegetables Announces Voluntary Withdrawal for Salads

For Immediate Release January 22, 2016 — Dole Fresh Vegetables, Inc., is temporarily suspending operations at its Springfield, Ohio production facility, and is voluntarily withdrawing from the market all Dole-branded and private label packaged salads processed at that location (see the product list at http://www.cdc.gov/listeria/outbreaks/) Products subject to the voluntary withdrawal are identified with a product code beginning with the letter "A" in the upper right-hand corner of the package (see example below), and are sold in the following states and Canadian provinces noted below. This suspension and withdrawal is being performed voluntarily by Dole out of an abundance of caution, in collaboration with the Food and Drug Administration and Centers for Disease Control. See more about this withdrawal at www.cdc.gov/listeria/outbreaks/

No additional Dole facilities are affected. Other Dole products, including fresh fruit, fresh vegetables and packaged salads from Dole's other processing facilities (with product codes beginning with the letters "B" or "N"), are not part of this voluntary withdrawal.

Retailers and consumers who have any remaining product with an "A" code should not consume it, and are urged to discard it. Retailer and consumer questions about the voluntary withdrawal should be directed to the Dole Food Company Consumer Response Center at 800-356-3111) (hours are 8:00am-8:00pm Eastern Time, Monday through Friday). Media inquiries should be directed to Bil Goldfield at 818-874-4647.

Retailers which carry Dole products produced in its Springfield, OH plant (with the product code beginning with the letter "A" in the upper right-hand corner of the package) should check their store shelves and warehouse inventories to confirm that no withdrawn product is available for purchase by consumers. Dole Fresh Vegetables' customer service representatives have been contacting retailers, and are in the process of confirming that the withdrawn product has been removed from the supply chain.

Dole Fresh Vegetables is coordinating closely with regulatory officials.

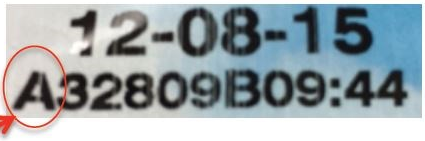
List of states included in the voluntary withdrawal:

Alabama, Connecticut, Florida, Georgia, Illinois, Indiana, Kentucky, Louisiana, Michigan, Massachusetts, Maryland, Minnesota, Missouri, Mississippi, North Carolina, New Jersey, New York, Ohio, Pennsylvania, South Carolina, Tennessee, Virginia, and Wisconsin.

List of provinces included in the voluntary withdrawal:

Ontario, New Brunswick, and Quebec

Example of product code from Springfield, OH plant



Florida Department of Health
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Check out our Quarterly Epi Newsletter published in January!

President Obama declares February as American Heart Month

President Obama continued his focus on improving the nation's health this week by declaring February as American Heart Month and kick starting the annual awareness campaign against the nation's No. 1 killer.

The tradition of American Heart Month began with President Lyndon Baines Johnson in 1964.

"Affecting people of all races and ethnicities, cardiovascular disease is the single leading cause of death for both men and women in the United States, responsible for one in three deaths in the United States each year," said the proclamation issued on Monday. "Heart disease must be addressed with urgency."

Obama said that while nearly half of all Americans have at least one major risk factor, many don't know it and others are slow to act upon warning signs.

"Every person can take steps to reduce the risk factors associated with heart disease in themselves and in those they care about," reads the proclamation. Such steps include "reducing alcohol intake, exercising regularly, maintaining a nutritious diet, living tobacco-free and staying aware of early warning signs."

While declaring American Heart Month, Obama touted healthcare initiatives that his administration has backed, including the Affordable Care Act, Million Hearts and First Lady Michelle Obama's *Let's Move!* campaign.

In the declaration, Obama also encouraged the nation to participate in National Wear Red Day on Friday to honor those who have died from heart disease, while raising awareness about the disease and the steps that can be taken to prevent it.

"During American Heart Month ... let us renew our efforts to raise awareness of this disease and its consequences, and let us recommit to building a healthier, heartier future for all," he concluded.

Source: American Heart Association

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…"