July 2016 Surveillance Report

Inside this report:

Basics of Zika Virus and Sex

Transmission

- Zika can be passed through sex from a person who has Zika to his or her sex partners.
- Sex includes vaginal, anal, oral sex, and the sharing of sex toys.
- Only people with sex partners who live in or traveled to an area with Zika are at risk for getting Zika through sex.
- Zika can be passed through sex, even if the person does not have symptoms at the time.
    - It can be passed from a person with Zika before their symptoms start, while they have symptoms, and after their symptoms end.
    - Though not well documented, the virus may also be passed by a person who carries the virus but never develops symptoms.
- Studies are underway to find out how long Zika stays in the semen and vaginal fluids of people who have Zika, and how long it can be passed to sex partners. We know that Zika can remain in semen longer than in other body fluids, including vaginal fluids, urine, and blood.

Prevention Basics

- Condoms and other barriers* can reduce the chance of getting Zika from sex.
    - Barriers that prevent passing Zika through sex include male and female condoms and dental dams.
    - Dental dams are latex or polyurethane sheets used between the mouth and vagina or anus during oral sex.
- To be effective, condoms should be used from start to finish, every time during vaginal, anal, and oral sex.
- Not sharing sex toys can also reduce the risk of spreading Zika to sex partners.
- Not having sex eliminates the risk of getting Zika from sex.

*For the purposes of this webpage, all barriers will be referred to as condoms.

Source: CDC

Staff Events/News

HIV Outreach attended events at Land O' Lakes Jail, Juvenile Detention Center in San Antonio, Farm Worker Outreach in Dade City, and Wilson Academy in Land O' Lakes.

Epidemiologist Jennie Pell is now Certified in Infection Control.

Florida Arbovirus Surveillance

Andrea Bingham, PhD, MSPH, Shaiasia Itwaru-Womack, 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 parasitic mosquito-borne disease is also included. During the period of July 24-30, 2016 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. One sentinel chicken tested positive for antibodies to WNV this week in Bay County. In 2016, positive samples from 52 sentinel chickens, one horse, and two mosquito pools have been received from ten 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, one positive sample from sentinel chickens has been received from one county.

EEEV activity: No human cases of EEEV infection were reported this week. Three horses with EEEV infection was reported this week in Highlands, and Osceola Counties. No sentinel chickens tested positive for antibodies to EEEV this week. In 2016, positive samples from 51 sentinel chickens and 16 horses have been received from 16 counties.

International Travel-Associated Dengue Fever Cases: Two new cases of dengue fever were reported this week in persons that had international travel. In 2016, 33 travel-associated cases have been reported.

Dengue Fever Cases Acquired in Florida: No cases of locally acquired dengue fever were reported this week. In 2016, one case of locally acquired dengue fever has been reported.

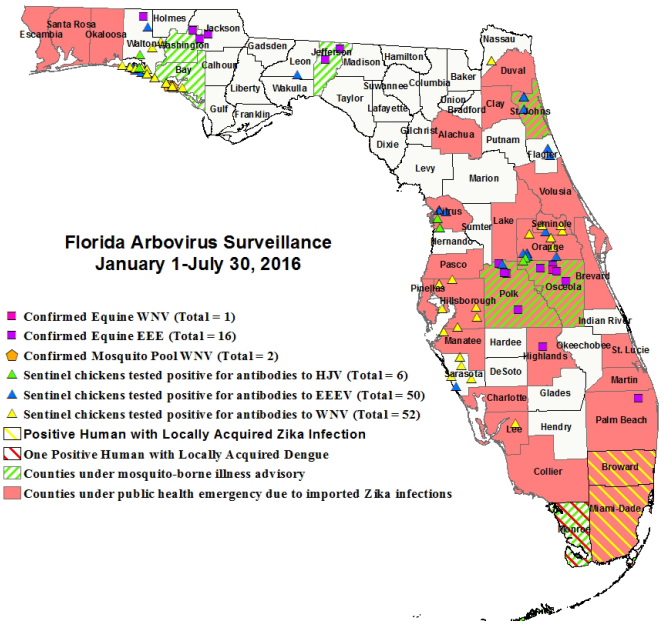
International Travel-Associated Chikungunya Fever Cases: One case of chikungunya fever was reported this week in a person that had international travel. In 2016, six travel-associated cases have been reported.

Chikungunya Fever Cases Acquired in Florida: No cases of locally acquired chikungunya fever were reported this week. In 2016, no cases of locally acquired chikungunya fever have been reported.

International Travel-Associated Zika Fever Cases: Thirty cases of Zika fever were reported this week in persons that had international travel. In 2016, 357 travel-associated cases have been reported.

Zika Fever Cases: Fourteen cases of Zika fever were reported this week in persons that had no international travel. In 2016, 14 local cases have been reported.

Advisories/Alerts: Bay, Jefferson, Monroe, Polk, Osceola, St. Johns, and Washington Counties are currently under mosquito-borne illness advisory. Twenty-eight counties are currently under a declared public health emergency due to the identification of travel-associated Zika infections: Alachua, Brevard, Broward, Charlotte, Citrus, Clay, Collier, Duval, Escambia, Highlands, Hillsborough, Lake, Lee, Manatee, Martin, Miami-Dade, Okaloosa, Okeechobee, Orange, Osceola, Palm Beach, Pasco, Pinellas, Polk, St. Johns, St. Lucie, Santa Rosa, Seminole, and Volusia Counties.



At this time, the Department of Health believes active transmissions of the Zika virus is occurring in one small area in Miami-Dade County, just north of downtown. The exact location is within the boundaries of the following area: NW 5th Avenue to the west, US 1 to the east, NW/NE 38th Street to the north and NW/NE 20thStreet to the south. This area is about one square mile and a map of the area along with public health recommendations can be seen at: http://www.floridahealth.gov/newsroom/2016/08/080116-zika-update.html

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 Pacific Islands related to Zika virus transmission and an 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. Additional information on travel health notices can be found at the following link: http://wwwnc.cdc.gov/travel/notices.

Epidemiology Disease Summary

	July		YTD	
	2016	2015	2016	2015
CNS Diseases and Bacteremias				
Creutzfeldt-Jacob Disease (CJD)	-	-	-	1
Haemophilus influenzae	-	-	6	1
Legionellosis	-	1	6	3
Listeriosis	-	-	-	1
Meningitis, Bacterial or Mycotic	-	1	2	2
Meningococcal Disease	-	-	-	-
S. aureus Infection, Intermediate Resistance to Vancomycin (VISA)	-	-	1	-
Strep pneumoniae Invasive Disease, Drug-Resistant	-	-	2	1
Strep pneumoniae Invasive Disease, Drug-Susceptible	1	-	13	4
Enteric Infections				
Campylobacteriosis	9	9	48	62
Cholera (Vibrio cholerae Type O1)	-	-	-	-
Cryptosporidiosis	1	1	7	7
Cyclosporiasis	2	-	3	-
Escherichia coli Shiga Toxin-Producing (STEC)	1	-	10	4
Giardiasis	2	4	10	13
Hemolytic Uremic Syndrome (HUS)	-	-	-	1
Salmonellosis	12	18	50	71
Shigellosis	-	1	5	4
Typhoid Fever	-	-	-	-
Vibriosis	1	-	1	2
Vaccine Preventable Diseases				
Measles	-	-	-	-
Mumps	-	-	-	1
Pertussis	3	1	8	13
Varicella	-	-	4	16
Vector Borne, Zoonoses				
Chikungunya Fever	-	-	-	-
Ehrlichiosis/Anaplasmosis	-	-	-	1
Lyme Disease	1	2	3	2
Malaria	-	-	-	-
Rabies, Animal	-	-	2	1
Rabies, Possible Exposure	13	12	94	121
Rocky Mountain Spotted Fever and Rickettsiosis	-	-	-	-
West Nile Virus Neuroinvasive Disease	-	-	-	-
Zika Fever	2	-	7	-
Viral Hepatitis				
Hepatitis A	-	2	2	4
Hepatitis B, Acute	7	9	54	39
Hepatitis B, Chronic	6	11	60	56
Hepatitis B, Surface Antigen in Pregnant Women	1	3	4	7
Hepatitis C, Acute	-	-	12	2
Hepatitis C, Chronic	108	87	701	524
Other				
Carbon Monoxide Poisoning	1	-	5	2
Influenza-Associated Pediatric Mortality	-	-	-	-
Lead Poisoning	3	5	18	21
Mercury Poisoning	-	-	1	-
Pesticide-Related Illness and Injury	-	-	1	-
Total	174	167	1140	987

STD Morbidity Statistics

- Chlamydia = 98
- Gonorrhea = 27
- Syphilis = 4
- HIV = 3

You can get syphilis by direct contact with a syphilis sore during vaginal, anal, or oral sex. Sores can be found on the penis, vagina, anus, in the rectum, or on the lips and in the mouth. Syphilis can also be spread from an infected mother to her unborn baby.

HIV Outreach Statistics

- 14 individuals were tested for HIV
- 0 individuals were tested for Syphilis
- 3 rapid Hepatitis tests performed
- Data for number of individuals testing positive for HIV and AIDS not available

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) 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 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

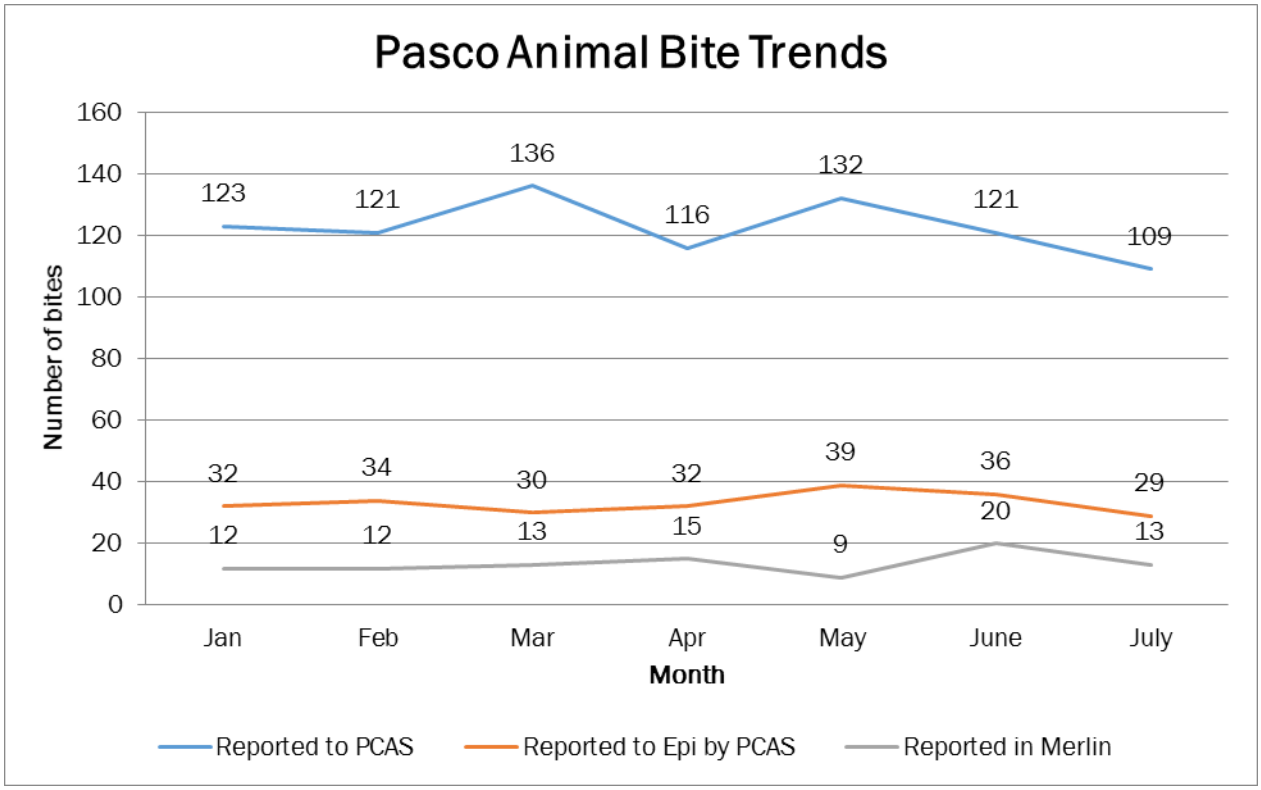
- 26 rapid HIV tests performed (0 – positive)
- 10 Hepatitis tests performed (7 – positive)
- 10 RPR tests performed (2 – positive)
- 4 Gonorrhea/Chlamydia tests performed (0 – positive)
- 26 individuals were HIV post-test counseled

Tuberculosis/Refugee Statistics

- 3 TB cases
- 3 Suspect cases
- 15 LTBI clients
- 16 new (4 no shows) refugees
- 14 Follow up immunization visits

Animal Bites

- Pasco County Animal Services (PCAS) received 109 animal bites in July
- PCAS reported 29 of 109 (27%) cases to PCHD for follow-up
- 13 of 29 (45%) were reported in Merlin after meeting case definition
- DOH – Pasco sent 5 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.

Florida Health Alert Network Invitation

August 8, 2016

Dear Provider:

In June, we reached out to our providers to share information about the Florida Health Alert Network notification system called "Everbridge". Everbridge is a public health notification system that allows us to disseminate pertinent public health information regarding outbreaks or disease trends more efficiently than we have in the past.

Everbridge provides users with a wide range of methods to receive information on a variety of communication devices.

Since June, approximately 5% of Pasco County's healthcare community partner facilities have a team member who registered to receive urgent health notifications from DOH – Pasco through the Florida Health Alert Notification System.

We encourage your facility to consider the benefits of the Florida Health Alert Network notification system, and, to designate one key team member to receive these notifications. To register, please complete the information below and email this completed letter to: Deborah.Hensley@flhealth.gov

Thank you.

Deb Hensley, MPH, MHA

Epidemiology

Florida Department of Health – Pasco County

First Name		required
Last Name		required
Name of Facility/Practice		required
Street Address		required
Apt/Suite/Unit #		
City		required
Postal code (zip)		required
Work Phone		Provide at least one phone number
Extension		
Work Cell		Provide at least one phone number
Personal Cell		Provide at least one phone number
Home Phone		Provide at least one phone number
Work email		required
Work fax		

Florida Department of Health
Pasco County

13941 15th Street
Dade City, Florida 33525
Phone: 352-521-1450, option 2
Fax: 352-521-1435

Epidemiology Manager:
Garik Nicholson, MPH
Epidemiology Staff:
Armando Avellanet, DIS
Deb Hensley, MPH, MHA
Beri-Lynn Miller, RN
Jennie Pell, MPH, CPH, CIC
Zelda Young, DIS

Be sure to check out our quarterly Epi newsletter published in July!

Florida Department of Health-Pasco County to offer free HIV testing

The Florida Department of Health-Pasco County will be offering two free HIV and Hepatitis C testing events in August.

WHEN: Tuesday, August 23, 2016, from 4 pm to 7 pm

WHERE: Spirt of Life Church

4133 Thys Road, New Port Richey Fl. 34653

Free educational information and condoms for all that get tested

-AND-

WHEN: Friday August 26, 2016, from 9 am to 3 pm

WHERE: The Florida Department of Health-Pasco County

10841 Little Road, New Port Richey, Florida 34654

Educational information, condoms, incentives for all that get tested

For more information please call DOH-Pasco Prevention Team at 727- 619 - 0260

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…"