

EPI INVESTIGATOR

Florida Department of Health - Alachua
Summer 2019



“Improving Public Health in Our Community Through Cooperation”

Alachua County Health Department
(352) 334-7900

To report a disease, phone or fax the appropriate office below:

Administrator
Paul Myers, MS
(352) 334-8892

Environmental Health
Director Anthony Dennis
(352) 334-7931

HIV/AIDS
Richard Willis, Surveillance
(352) 334-7968
Fax (352) 334-8867

Martha Buffington, Ryan White
(352) 334-7967

Epidemiology/Hepatitis
Nadia Kovacevich, MPH
(352) 225-4181
Fax (352) 955-6464
If you would like to receive the Epi InvestiGator by email or fax, please contact us at the following email address:
DOHAlachuaUpdates@flhealth.gov, or phone: (352) 225-4181

Immunizations
Michael Smith, RN
(352) 334-8827
Fax: (352) 334-7943

Sexually Transmitted Disease
Larissa Cantlin-Plemmons
(352) 334-7900 ext. 3434
Fax: (352) 334-8818

Tuberculosis
Geneva Saulsberry, RN, BSN
(352) 225-4188
Fax(352) 955-6464

After Hours:
(352) 334-7900

Editor
Sheila Griffis

Vaccine Information Statements

Submitted by: Michael Smith,, RN, BSN
Community Health Nursing Consultant
FDOH-Alachua

Does your facility have the most current Vaccine Information Statements available to provide to your client? VISs contain the most up to date information on all vaccines administered and are required to be given to each vaccine recipient/recipient’s parent or guardian prior to the vaccination. This process is mandated by the **National Childhood Vaccine Injury Act [NCVIA]**. These statements are published by the *Centers for Disease Control and Prevention* providing the recipient with helpful, informative material regarding:

- Why get vaccinated?
- Who should get the vaccine and when?
- What are the risks from the vaccine?
- What if there is a serious reaction?
- The National Vaccine Injury Compensation Program
- How can I learn more?

Below is the most recent list of current VISs available as of 7/3/19. VISs are not only written in English, but many other common languages. If your office/facility does not have the most current VIS, they can be located online at two websites:

1. www.cdc.gov/vaccines/pubs
2. www.immunize.org/vis/

Vaccine	Date
Chicken Pox (Varicella)	02/12/18
DTaP	08/24/18
Flu	08/07/15
Hepatitis A	07/20/16
Hepatitis B	10/12/18
HiB	04/02/15
HPV(9)	12/02/16
Meningococcal(MCV4)	08/24/18
Meningococcal (B)	08/09/16
MMR	02/12/18
MMRV	02/12/18
Multi-Vaccine	11/05/15
PCV 13	11/05/15
PPSV 23	04/24/15
Polio	07/20/16
Rabies	10/06/09
Rotovirus	02/23/18
Shingles	02/12/18
Td	04/11/17
TDaP	02/24/15
Japanese Encephalitis	01/24/14
Typhoid	05/29/12
Yellow Fever	03/30/11



TB and Diabetes

Submitted by: Geneva Saulsberry, RN, BSN
CHN Consultant
FDOH-Alachua

Diabetes is a chronic (long-lasting) disease that affects how the body turns food into energy.

Tuberculosis (TB) is a serious health threat, especially for people living with diabetes. Two TB-related conditions exist: [latent TB infection](#) and [TB disease](#). People with latent TB infection are not sick because the body is able to fight the bacteria to stop them from growing. People with TB disease are sick and have active TB because the body cannot stop the bacteria from growing. People living with diabetes who are also infected with TB are more likely to develop TB disease and become sick with TB.

Someone with untreated [latent TB infection](#) and diabetes is **more** likely to develop [TB disease](#) than someone without diabetes. Without proper treatment, diabetes and TB can increase health complications.

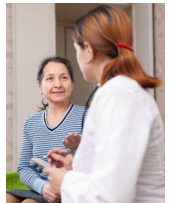
- In 2018, **9,029** new TB cases were reported in the United States.
- In 2017, **20% of persons with TB** in the United States also had diabetes, as reported to the National TB Surveillance System.
- **30.3 million** U.S. adults have diabetes.
- In the last **20 years**, the number of adults diagnosed with diabetes has more than **tripled**.

Treatment

Untreated [latent TB infection](#) can progress to [TB disease](#). TB disease, without treatment, can progress from sickness to death.

Fortunately, [treatment](#) options are available for people with diabetes who also have either latent TB infection or TB disease. If a person is diagnosed with TB infection, further testing is required to rule out TB disease. People with either latent TB infection or TB disease can be effectively treated.

Retrieved from <https://www.cdc.gov/tb/topic/basics/tb-and-diabetes.html>



STD UPDATE

Submitted by: Gay Koehler-Sides, MPH, CPH
Human Services Program Manager
FDOH-Alachua

Too few HIV-positive gay/bisexual men in Florida were tested for STDs in the past year.

Gonorrhea*

54%

*At any anatomical site

Chlamydia*

53%

*At any anatomical site

Syphilis

72%

Hepatitis C

44%

What can health facilities do?

- ✓ Follow CDC screening recommendations
- ✓ Monitor STD testing performance
- ✓ Use clinical reminders
- ✓ Use nurse-led programs
- ✓ Use self-swabbing
- ✓ Use opt-out testing
- ✓ Emphasize sexual health over disease

 MEDICALMONITORINGPROJECT

Additional Resources for Sexually Transmitted Disease Healthcare:

Sexually Transmitted Diseases Treatment Guidelines:

<https://www.cdc.gov/std/tg2015/screening-recommendations.htm>

University of Washington STD Prevention Training Center Resources:

<http://uwptc.org/>

FLORIDA REPORTABLE DISEASES *Alachua County 2 year activity*

Disease Activity	2019	2018	2018	Disease Activity	2019	2018	2018
	Jan-Jun	Jan-Jun	Jan-Dec		Jan-Jun	Jan-Jun	Jan-Dec
AIDS	**	**	**	Meningitis, bacterial or mycotic	0	2	2
Anaplasmosis, HGA(<i>Anaplasma Phag</i>)	0	0	0	Meningococcal disease	0	0	0
Anthrax	0	0	0	Mercury poisoning	0	0	0
Botulism	0	0	0	Mumps	29	0	2
Brucellosis	0	0	0	Neurotoxic shellfish poisoning	0	0	0
Campylobacteriosis	25	18	46	Pertussis	1	1	4
Carbon Monoxide Poisoning	0	0	0	Pesticide-related Illness and injury, acute	0	0	0
Chikungunya fever	0	0	0	Plague	0	0	0
Chlamydia	1266	1172	2476	Psittacosis (ornithosis)	0	0	0
Ciguatera	0	0	0	Q Fever	0	0	0
Creutzfeldt-Jakob Disease (CJD)	0	0	0	Rabies, animal or human	3	2	7
Cryptosporidiosis	1	0	2	Rabies, possible exposure	22	44	85
Cyclosporiasis	2	0	4	Rocky Mountain spotted fever			
Dengue	0	0	0	and other spotted fever rickettsioses	0	0	0
Diphtheria	0	0	0	Rubella	0	0	0
Ehrlichiosis, HME (<i>Ehrlichia chafeensis</i>)	1	1	6	Salmonellosis Typhi Infection	1	3	6
Ehrlichiosis/anaplasmosis	0	0	0	Salmonellosis	37	26	64
<i>Escherichia coli</i> infection, Shiga toxin-producing	10	4	9	Saxitoxin poisoning (paralytic shellfish poisoning)	0	0	0
Giardiasis (acute)	5	3	10	Severe acute respiratory disease syndrome associated with coronavirus infection	0	0	0
Gonorrhea	340	372	816	Shigellosis	5	4	10
<i>Haemophilus influenzae</i> , invasive disease in children <=5 years old	0*	2*	2*	Smallpox	0	0	0
Hansen's Disease (Leprosy)	0	0	0	Staphylococcal enterotoxin B poisoning	0	0	0
Hantavirus infection	0	0	0	<i>Staphylococcus aureus</i> infection (VISA, VRSA)	0	0	0
Hemolytic uremic syndrome (HUS)	0	0	0	<i>Streptococcus pneumoniae</i> invasive disease in children (drug resistant) <= 6 years	1*	0*	0*
Hepatitis A	5	1	2	<i>Streptococcus pneumoniae</i> invasive disease In children (susceptible) <= 6 years old	0*	0*	0*
Hepatitis B Acute	5	1	1	Syphilis	32	24	54
Hepatitis B Chronic	22	18	32	Syphilis in pregnant women & neonates	0	0	0
Hepatitis B surface antigen in pregnant women or children <2 years old	2	0	1	Tetanus	0	0	0
Hepatitis C Acute	2	4	5	Trichinellosis (trichinosis)	0	0	0
Hepatitis C Chronic	152	111	242	Tuberculosis (TB)	2	1	2
Herpes B Virus, Possible Exposure	0	0	0	Typhoid fever (<i>Salmonella</i> serotype Typhi)	0	0	0
Herpes simplex virus (HSV) in infants	0	0	0	Typhus fever, epidemic	0	0	0
HIV	**	**	**	Varicella (chickenpox)	3	2	5
Influenza A, novel or pandemic strains	0	0	0	<i>Vibrio (other Vibrio Species)</i>	8	0	1
Lead Poisoning	2	9	15	<i>Vibrio cholerae</i> type Non-01	0	0	0
Legionellosis	0	1	3	<i>Vibrio (Parahaemolyticus, other)</i>	0	0	0
Leptospirosis	1	0	0	<i>Vibrio fluvialis</i>	0	1	1
Listeriosis	0	0	0	<i>Vibrio vulnificus</i>	0	1	1
Lymphogranuloma Venereum (LGV)	0	0	0	Zika Virus Disease and Infection, Non Congenital	0	0	0
Malaria	0	0	0				
Measles	0	0	0				

The counts include suspect, probable, and confirmed cases reported in Alachua county residents (regardless of where infection was acquired) by date reported to the Department of Health. Counts are provisional and subject to change until their respective database closes.

* Changes to case definitions can affect the number of cases reported.

**Data from the most recent calendar year 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. Statistics can be found at <http://www.flhealthcharts.com/charts/communicablediseases/default.aspx>

◆ REGULAR BUSINESS HOURS (8AM-5PM, M-F): **352-225-4181**

◆ After-hours and Holidays (24/7): **352-334-7900** (please listen to prompts to receive a callback).

The Epidemiology Program conducts disease surveillance and investigates suspected occurrences of infectious diseases and conditions that are reported from physician's offices, hospitals, and laboratories. Surveillance is primarily conducted through passive reporting from the medical community as required by Chapter 381, Florida Statutes. Data is collected and examined to determine the existence of trends. Our staff ensures that action is taken to prevent infectious disease outbreaks from occurring in Alachua County.

Severe Vaping-Associated Pulmonary Illness

Submitted By: Nadia Kovacevich, MPH
Devin Frison, MPH
DOH-Alachua Epidemiology

Recommendations for Health Care Providers:

1. Report cases of significant pulmonary illness of unclear etiology and a history of e-cigarette use or vaping to DOH-Alachua, 352-225-4181 or after-hours at 352-334-7900.
2. Ask patients presenting with pulmonary illness with an unclear etiology about the use of e-cigarette or vaping products or any inhalational method of drug use. Document the available details in the medical record.
3. For questions about treatment and clinical management of these patients, contact the Florida Poison Information Center Network (FPICN) at 1-800-222-1222.

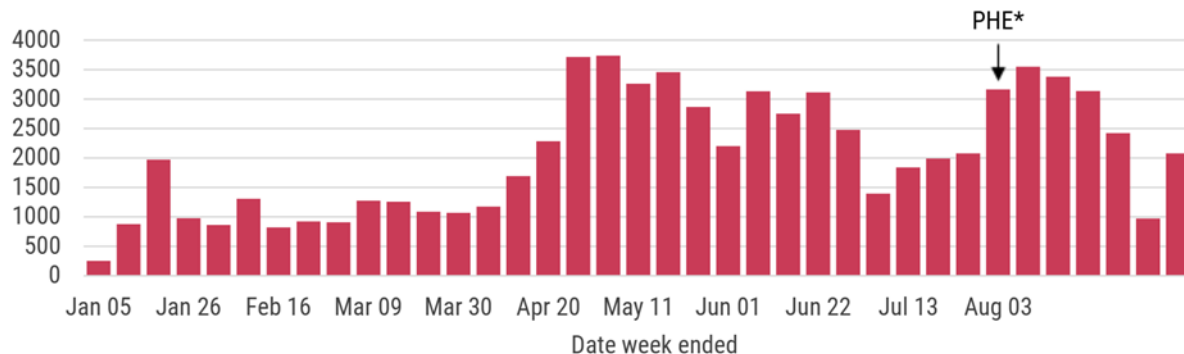
The Bureau of Tobacco Free Florida has a Team Up To Quit initiative to engage health care providers, encouraging them to use the “2As+R” (Ask, Advise, Refer) protocol and to refer patients to TobaccoFree Florida’s free, proven-effective cessation tools and services. Providers can use these tangible resources to refer their patients to Tobacco Free Florida, increasing their patients’ chances of successfully quitting tobacco or vaping. For more information, visit tobaccofreeflorida.com/healthcare.

Hepatitis A Outbreak Update

Submitted By: Nadia Kovacevich, MPH
Devin Frison, MPH
DOH-Alachua Epidemiology

Since January 2018 through September 14, 2019, there have been 3,088 cases reported, with the majority acquired in Florida. Cases likely acquired in Florida share several common risk factors including drug use (both injection and non-injection drugs), identifying as men who have sex with men, and experiencing homelessness (DOH, 2018). **Individuals with any of these risk factors should receive the hepatitis A vaccine, and providers are encouraged to actively offer the hepatitis A vaccine to individuals at risk. Vaccination is the best way to prevent hepatitis A infection.**

Additionally, practicing good hand hygiene, including thoroughly washing hands after using the bathroom, changing diapers, and before preparing or eating food plays an important role in preventing the spread of hepatitis A. Health care providers are reminded to immediately report all cases of hepatitis A to DOH-Alachua (352-225-4181) to ensure a prompt public health response to prevent disease among close contacts.



*Public health emergency (PHE) issued August 1, 2019

Resources:

For additional information, please see the health advisory issued by the Florida Department of Health in November 2018, available at: FloridaHealth.gov/about-the-department-of-health/about-us/sunshine-info/advisories/_documents/112818-fl-hav-advisory-11-26-lws-edits-all-accepted-eo-format-final.pdf

Updates: <http://www.floridahealth.gov/diseases-and-conditions/vaccine-preventable-disease/index.html>

References:

Florida Department of Health. (2018). Florida Department of Health Issues Hepatitis a Health Advisory—Encourages Vaccination. Retrieved from <http://www.floridahealth.gov/newsroom/2018/11/112818-hav-advisory-pr.html>



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