

# EPI INVESTIGATOR

The Alachua County Health Department

Winter QUARTER 2006



*“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:

#### Director

Tom Belcuore, MS  
Tom\_Belcuore@doh.state.fl.us  
(352) 334-7902

#### Environmental Health

Director Paul Myers, MS  
(352) 334-7931

#### Disease Control

Emily Wilson, MPH  
(352) 334-7971  
Fax:(352) 955-6464  
Or (352) 334-8818

#### HIV/AIDS Surveillance

Rick Trachsel  
(352) 334-7968  
Patti Carnuccio  
(352) 334-7967

#### Lead Poisoning

(352) 334-8827

#### Sexually Transmitted Disease

George Gibbs, MPH  
(352) 334-7900 ext 3471 or 3470  
Fax: (352) 334-8818

#### Tuberculosis

Gail Beard, RN  
(352) 334-7988



www.alachuacountyhealth.org



## Changes at the Health Department

By: Emily Wilson, MPH

Human Services Program Administrator

Big changes have happened in the Epidemiology and Disease Control section at our health department. There is a new section at the Alachua County Health Department called the **Disease Control Unit**. There is even new staff.

November 3<sup>rd</sup>, 2006 was the first day on the job for Emily Wilson as an Alachua

County Health Department Human Services Program Administrator. This marked the beginning of a new section at the Health Department that included TB, STD, Hepatitis programs and Epidemiology. The new team, the Disease Control Unit, will be located all together in the area formerly known as the TB

clinic and STD section. It will be the EpiCenter!

I will be leaving Epidemiology at the end of December to start a new County Employee Wellness Program. Thank you for the 4.5 years of cooperation to improve Alachua County's health. Jerne Shapiro-Epi Chick

## Rule Changes for Reportable Diseases These Changes Affect YOU!

By: Jerne Shapiro, MPH

Epidemiologist

The Department of Health has completed an extensive rewrite of the rule that governs diseases reporting (Chapter 64D-3 Florida Administrative Code).

Some noteworthy changes include:

### 1) Revised reporting time frames:

Suspect Immediately: Report upon initial suspicion (24hrs/7days a wk)

Immediately: Report immediately upon confirmed diagnosis (24hrs/7days a wk)

Next Business Day: Report next business day upon confirmed diagnosis

### 2) New Diseases/Conditions added to the List of Reportable Diseases

- HIV exposed infants or newborns and conjunctivitis in neonates  $\leq 14$  days old
- HPV cancer associated strains, abnormal cervical cytologies/histologies, novel influenza strains, influenza associated pediatric mortality, SARS, California serogroup viruses, Hep D, E, G, Varicella, Varicella mortality, epidemic typhus fever, and cancer (including benign and borderline intracranial and central nervous system tumors).

### 3) Required routine testing during pregnancy for Chlamydia, Gonorrhea, Hep B, HIV and Syphilis with an opt-out approach. Emergency departments may refer pregnant women with no record of prenatal care to their county health department.

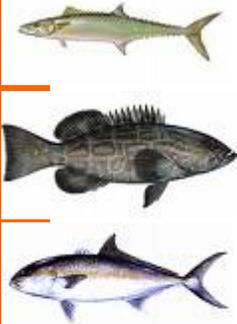
The Alachua County Health Department will be mailing a packet that includes: a summary of the new rule, the new list of reportable diseases, new reporting form, and new rabies exposure form. The new rule went into effect on November 20, 2006.

If you can't wait for information packet please check the following website for more detailed information. [http://www.doh.state.fl.us/disease\\_ctrl/epi/topics/surv.htm](http://www.doh.state.fl.us/disease_ctrl/epi/topics/surv.htm)

## Difficulties in Diagnosing Ciguatera Poisonings

By: Karen Dominguez, Epi – Intern

And Taj Azarian, Epi - Intern



Did you know The CDC estimates that only 2-10% of Ciguatera cases are actually reported in the United States?

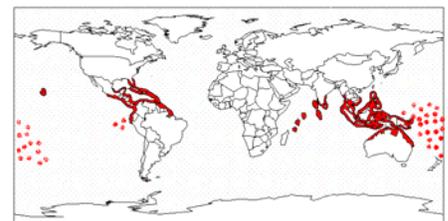
Ciguatera is reportable by symptoms only. There is no lab test to confirm the case.

Ciguatera fish poisoning is a reportable disease caused by consuming fish with the presence of toxins elaborated by the dinoflagellate *Gambierdiscus toxicus* and algae growing on underwater reefs. Fish eating the algae become toxic, and the effect is magnified through the food chain, resulting in predatory fish being the most toxic. This occurs worldwide in tropical areas, with approximately 50,000 cases of ciguatera reported per year. The poisoning produces gastrointestinal and neurological symptoms including diarrhea, vomiting, abdominal cramps, numbness, paresthesia, metallic taste and paradoxical temperature sensation (hot/cold inversion). Symptoms normally occur within one hour after eating the toxic fish, and up to one day later and may persist for weeks. Currently no cure is available for ciguatera however, intravenous administration of mannitol has recently been found to abbreviate the clinical sequelae of ciguatera fish poisoning. Ciguatoxin and other similar toxins are heat stable and lipid soluble. This

makes them unabated by gastric acid or cooking methods. The odor, color, and taste of the fish are unaffected by the presence of the toxin. “High risk” large predatory fish commonly known to include ciguatoxins are barracuda, black and yellowfin grouper, blackfin snapper, cubera snapper, dog snapper, greater amberjack, king mackerel, hogfish, and horse-eye jack, among several others. In 2003, Florida had 7 reported cases of Ciguatera fish poisoning. The last epidemic of Ciguatera in Florida was in 1991 with twenty cases.

Ref: Florida Charts  
Heymann, D. (ed) Control of Communicable Diseases Manual. 18<sup>th</sup> ed. 2004.

[www.cdc.gov/nceh/ciguatera/](http://www.cdc.gov/nceh/ciguatera/)



Current Distribution of Ciguatera

## ACHD Biomedical Waste Exchange

By: Karen Dominguez

Epi – Intern

For \$3.00 patients can exchange their sharps containers.



The Alachua County Health Department has a biomedical waste exchange program that offers sharps disposal. There is a \$3 charge for new containers to offset the cost of the container and its disposal. Improper disposal of sharps threatens the safety of our community because they can clog sewer lift stations, end up at recycling centers, puncture solid waste containers, and place workers at risk during collection and at the landfill since needles may be contaminated. Exchange sites include: the Alachua County Health De-

partment in Gainesville, Alachua, High Springs, Hawthorne, and Newberry; Fire Station #12, 16, 19, 21, & Central Warehouse; Target pharmacy, and Gresham’s home infusion. Please let your patients who are in need of this service know of the facilities that offer this program. Questions call 352-334-7930.



**FLORIDA REPORTABLE DISEASES** *Alachua County 2 year activity*

Disease Activity	(Jan– Dec)		2005 Cum	Disease Activity cont'd	(Jan– Dec)		2005 Cum
	2006	2005			2006	2005	
AIDS	57	34	38	Legionellosis	3	2	2
Animal Bites to Humans	20	38	39	Leptospirosis	0	0	0
Anthrax	0	0	0	Listeriosis	0	0	0
Botulism	0	0	0	Lyme Disease	1	0	0
Brucellosis	0	1	1	Lymphogranuloma Venereum	0	0	0
Campylobacteriosis	19	20	20	Malaria	1	1	1
Chancroid	0	0	0	Measles	0	0	0
<i>Chlamydia trachomatis</i>	1162	1026	1263	Melioidosis	0	0	0
Ciguatera	0	0	0	Meningitis (Bacterial & Mycotic)	6	3	3
Creutzfeldt-Jakob Disease (CJD)	1	0	0	Meningococcal ( <i>Neisseria Meningi-</i> <i>tidis</i> )	1	1	1
Cryptosporidiosis	13	1	1	Mercury Poisoning	0	0	0
Cyclosporiasis	0	13	13	Mumps	0	0	0
Dengue	2	1	1	Neurotoxic Shellfish Poisoning	0	0	0
Diphtheria	0	0	0	Pertussis	1	25	25
Ehrlichiosis, human	1	2	2	Pesticide-Related Illness or Injury	0	0	0
Encephalitis				Plague	0	0	0
Eastern Equine	0	0	0	Poliomyelitis	0	0	0
Non-arboviral	0	0	0	Psittacosis	0	0	0
Other arboviral	0	0	0	Q fever	0	0	0
St. Louis	0	0	0	Rabies Human	0	0	0
Venezuelan Equine	0	0	0	Rabies Animal	12	13	13
West Nile	0	0	0	Ricin Toxin	0	0	0
Western Equine	0	0	0	Rocky Mountain Spotted Fever	1	1	1
<i>E.coli</i> 0157:H7	0	0	0	Rubella	0	0	0
<i>E.coli</i> , Other (known sero)	1	0	0	Salmonellosis	84	97	100
Epsilon toxin of <i>Clostridium per-</i> <i>fringes</i>	0	0	0	Saxitoxin poisoning paralytic shellfish poisonings	0	0	0
Giardiasis (acute)	22	20	21	Shigellosis	27	7	11
Glanders	0	0	0	Smallpox	0	0	0
Gonorrhea	575	486	592	<i>Staphylococcus aureus</i> , <i>Vancomycin</i> <i>non-susceptible</i>	0	0	0
Granuloma Inguinale	0	0	0	<i>Staphylococcus</i> enterotoxin B	0	0	0
<i>Haemophilus influenzae</i> , inv dis- ease	1	2	2	Streptococcal Disease group A inva	4	0	0
Hansen's Disease (Leprosy)	0	0	0	<i>Streptococcal pneumoniae</i> invasive	20	33	33
Hantavirus infection	0	0	0	Syphilis	17	17	17
Hemolytic Uremic Syndrome	0	0	0	Tetanus	0	0	0
Hepatitis A	3	2	2	Toxoplasmosis (acute)	0	0	0
Hepatitis B	52	88	93	Trichinosis	0	0	0
Hepatitis C	319	422	441	Tuberculosis	6	10	10
Hepatitis non-A, Non B	0	0	0	Tularemia	0	0	0
Hepatitis, Other (including unspecified)	0	0	0	Typhoid Fever	0	0	0
Hepatitis B surface antigen + in preg- nant women or child < 24 months	12	6	6	Typhus Fever	0	0	0
Herpes Simplex Virus in < 6mo of age	0	1	2	Vaccinia Disease	0	0	0
HIV	31	26	31	<i>Vibrio</i> Infection	2	3	3
Human Papillomavirus (HPV) <12 yrs	0	1	1	<i>V. cholerae</i> Serogroup Type 01 and non-01	0	0	0
Lead Poisoning	1	2	2	Viral Hemorrhagic Fever	0	0	0
				Yellow Fever	0	0	0

**Any disease outbreak** (e.g., in the community, hospital, or other institution; or foodborne or waterborne)

**Any grouping or clustering** of patients having similar diseases, symptoms or syndromes that may indicate the presence of a disease outbreak



## Hepatitis Screening at the Alachua County Jail

By: Roger A. Dolz  
Health Services Representative

The Alachua County Health Department in conjunction with the Alachua County Jail is providing Hepatitis screening and vaccination to the inmate population. After screening, vaccinations are offered to those who need them and are over the age of 18. It's been proven that inmates who participate in health related programs while incarcerated have lower recidivism rates and are more likely to maintain health conscious behavior (MMRW, January 29, 2003, Vol. 52 (55-1). CDC has shown that inmates have a disproportionately greater burden of infectious disease than the non-incarcerated population. Screening and vaccination will benefit the community through reduced disease transmission and the cost of medical care. More than 95% of incarcerated men and women will

return to their communities. The average stay in the Alachua County Jail is 21 days. From May to August of 2006 the Alachua County Health Department screened 154 inmates for Hepatitis and results uncovered 26 cases of Hepatitis C. Fifty Hepatitis B and 56 Hepatitis A vaccines were administered. After incarceration positive Hepatitis C clients will be assessed on an individual basis by the Alachua County Health Department Hepatitis program for possible admission into the Hepatitis C pilot program.

**16.8% of the inmates screened at the ACJ tested positive for Hep C**

JS/06



**Alachua County Health Department**

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