



“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, CPH
(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

Human Infection with Avian Influenza

Submitted by: Nadia Kovacevich, MPH
Epidemiologist

Avian Influenza is commonly known as “bird flu” and has caused serious disease in poultry and wild birds on multiple continents. It is a rare disease of humans, but precautions should still be taken.

Humans can be infected with avian influenza virus subtypes A(H5N1), A(H7N9), and A(H9N2).

These infections are primarily acquired through direct contact with infected animals or their contaminated environment. The majority of human cases have been associated with direct or indirect contact with live or dead poultry.

Advice for Travelers to China (<https://wwwnc.cdc.gov/travel/notices/>)

- **Do not touch birds, pigs, or other animals.**

- Don't touch animals, whether they are alive or dead.
- Avoid live bird or poultry markets.
- Avoid other markets or farms with animals (wet markets).

- **Eat food that is fully cooked.**

- Eat meat and poultry that is fully cooked (not pink) and served hot.
- Eat hard-cooked eggs (not runny).
- Don't eat or drink dishes that include blood from any animal.
- Don't eat food from street vendors.

- **Practice hygiene and cleanliness.**

- Wash your hands often.
- If soap and water aren't available, clean your hands with hand sanitizer containing at least 60% alcohol.
- Don't touch your eyes, nose, or mouth. If you need to touch your face, make sure your hands are clean.
- Cover your mouth and nose with a tissue or your sleeve (not your hands) when coughing or sneezing.
- Try to avoid close contact, such as kissing, hugging, or sharing eating utensils or cups with people who are sick.

(Centers for Disease Control and Prevention, 2012)

References:

Centers for Disease Control and Prevention. (2012). Human infection with avian influenza A (H5N1) virus: Advice for travelers. Retrieved from <https://wwwnc.cdc.gov/travel/page/human-infection-avian-flu-h5n1-advice-for-travelers-current-situation>

World Health Organization. (2016). Avian and other zoonotic influenza. Retrieved from http://www.who.int/mediacentre/factsheets/avian_influenza/en/



TB in Specific Populations

Submitted By: Geneva Saulsberry, RN, BSN
Senior CHN Supervisor, ACHD

Disparities in tuberculosis (TB) persist among members of racial and ethnic minority populations.

In 2015, the majority (87%) of all reported TB cases in the United States (US) occurred in racial and ethnic minorities. Black, non-Hispanic persons, have a disproportionate share of TB in the United States.

In 2015, TB was reported in 1,995 black, non-Hispanic persons, nearly 21% of all persons reported with TB nationally. Also in 2015, the rate of TB in black, non-Hispanic persons was 5.0 cases per 100,000 population, which is over 8 times higher than the rate of TB in white, non-Hispanic persons (0.6 cases per 100,000 population).

The proportion of TB in black, non-Hispanic persons, is even greater if only US-born (African-American) blacks reported with TB are examined. In 2015, among US-born persons reported with TB, almost 36% were African Americans (black, non-Hispanic).

Some prevention challenges include: The duration of treatment for latent TB infection and TB disease is lengthy. Patients are often unable or reluctant to take medication for several months.

Socioeconomic factors impact health outcomes and are associated with poverty, including limited access to quality health care, unemployment, housing, and transportation. These factors can directly or indirectly increase the risk for TB disease and present barriers to treatment of this disease.

Language and cultural barriers, including health knowledge, stigma associated with the disease, values, and beliefs may also place certain populations at higher risk. Stigma may deter people from seeking medical care or follow up care.

TB remains a serious threat, especially for people who are infected with human immunodeficiency virus (HIV). People infected with HIV are more likely than uninfected people to get sick with other infections and diseases, including TB.

- Blacks have the most severe burden of HIV of all racial/ethnic groups in the United States. Compared with other races and ethnicities, Blacks account for a higher proportion of HIV infections at all stages of disease—from new infections to deaths.

In addition to HIV, other underlying medical conditions may increase the risk that latent TB infection will progress to TB disease.

Although rates of TB in both blacks and whites have declined substantially over the past decade, the disparity remains. We must better target our efforts to prevent and control TB in this population. Addressing the TB disparity among African Americans and other US-born racial/ethnic groups is an important priority.

What is the CDC doing about this?

To achieve TB elimination, ongoing efforts are needed to address the persistent disparities that exist among racial and ethnic minorities in the United States.

CDC is working on projects designed to educate and raise awareness about TB in black communities. In one project, representatives from ten sites where disproportionate cases of TB disease are reported in blacks received training to enhance skills for engaging communities, develop strategies, and sustain partnerships for reducing TB rates.

Other CDC activities include a study to identify the socio-cultural, racial, and health system barriers specifically for blacks with or at risk for TB. The study's goals include the development and testing of interventions to eliminate racial and ethnic disparities in TB rates in blacks; and to make improvements in health-seeking behavior, contact investigations, culturally sensitive case management, and completion of treatment among black TB patients.

Retrieved directly from: Reported Tuberculosis in the United States, 2015 <https://www.cdc.gov/tb/statistics/reports/2015/default.htm> and https://www.cdc.gov/tb/publications/factsheets/speccpop/resources_tb_blacks.htm



Responding to Ongoing Impacts from Zika Virus

Submitted By: Nadia Kovacevich, MPH
Epidemiologist

The Centers for Disease Control and Prevention (CDC) has established the US Zika Pregnancy Registry.

The data collected will be used to update recommendations for clinical care, to plan for services for pregnant women and others impacted by Zika virus, and to improve prevention efforts of Zika virus transmission. More information about the registry may be found here: <https://www.cdc.gov/zika/reporting/about-registry.html>

Zika virus infection is a reportable disease in the State of Florida. Clinical information regarding pregnant women with Zika virus infection should be reported to DOH-Alachua. The Florida Department of Health submits reports to the US Zika Pregnancy Registry for our residents with the appropriately reported clinical information from our valued colleagues.

Clinician Guidance

Clinicians that suspect a patient has a Zika virus infection should:

- Test for dengue, chikungunya, and other viruses due to similar geographic spread of diseases and clinical presentation;
- Contact DOH-Alachua at 352-225-4181 to report the disease upon suspicion. We will be able to provide consultation for current laboratory testing recommendations.

Please contact DOH-Alachua to request Zika virus testing for patients without insurance. **Clinicians are still required to report suspected Zika fever cases to DOH-Alachua at the time testing is ordered, regardless of which lab performs the testing, to ensure appropriate mosquito control actions are taken.**

Additional Healthcare Resources:

<http://www.cdc.gov/zika/hc-providers/index.html>

<http://www.floridahealth.gov/diseases-and-conditions/zika-virus/index.html>

Latest DOH News Updates: <http://www.floridahealth.gov/newsroom/index.html>

FLORIDA REPORTABLE DISEASES *Alachua County 2 year activity*

Disease Activity	2016		2015		Disease Activity	Con'td.	2016		2015	
	Jan-Dec	Jan-Dec	Jan-Dec	Jan-Dec			Jan-Dec	Jan-Dec		
AIDS	19	32	Malaria	1	0					
Anthrax	0	0	Measles	0	0					
Arsenic Poisoning	0	0	Meningitis, bacterial or mycotic	4	1					
Botulism	0	0	Meningococcal disease	0	1					
Brucellosis	0	0	Mercury poisoning	0	0					
Campylobacteriosis	37	36	Mumps	1	0					
Carbon Monoxide Poisoning	0	0	Neurotoxic shellfish poisoning	0	0					
Chikungunya fever	0	2	Pertussis	1	18					
Chlamydia	2214	2182	Pesticide-related Illness and injury, acute	0	0					
Ciguatera	0	0	Plague	0	0					
Creutzfeldt-Jakob Disease (CJD)	0	0	Psittacosis (ornithosis)	0	0					
Cryptosporidiosis	11	19	Q Fever	0	0					
Cyclosporiasis	0	0	Rabies, animal or human	1	1					
Dengue	2	1	Rabies, possible exposure	65	62					
Diphtheria	0	0	Ricin toxin poisoning	0	0					
Ehrlichiosis/anaplasmosis	2	6	Rocky Mountain spotted fever							
<i>Escherichia coli</i> infection, Shiga toxin-producing	4	5	and other spotted fever rickettsioses	0	2					
Giardiasis (acute)	12	24	Rubella	0	0					
Gonorrhea	582	564	Salmonellosis	77	69					
<i>Haemophilus influenzae</i> , invasive disease in children <5 years old	1	5*	Saxitoxin poisoning (paralytic shellfish poisoning)	0	0					
Hansen's Disease (Leprosy)	1	0	Severe acute respiratory disease syndrome associated with coronavirus infection	0	0					
Hantavirus infection	0	0	Shigellosis	16	10					
Hemolytic uremic syndrome (HUS)	0	0	Smallpox	0	0					
Hepatitis A	0	0	Staphylococcal enterotoxin B poisoning	0	0					
Hepatitis B Acute	2	1	<i>Staphylococcus aureus</i> infection (VISA, VRSA)	0	0					
Hepatitis B Chronic	43	71	<i>Streptococcus pneumoniae</i> invasive disease in children (drug resistant) <6 years old	0	2*					
Hepatitis B surface antigen in pregnant women or children <2 years old	7	9	<i>Streptococcus pneumoniae</i> invasive disease in children (susceptible) <6 years old	0	4*					
Hepatitis C Acute	1	2	Syphilis	111	77					
Hepatitis C Chronic	371	264	Syphilis in pregnant women & neonates	0	0					
Herpes B Virus, Possible Exposure	0	1	Tetanus	0	0					
Herpes simplex virus (HSV) in infants	0	0	Trichinellosis (trichinosis)	0	0					
HIV	48	62	Tuberculosis (TB)	4	6					
Influenza A, novel or pandemic strains	0	0	Typhoid fever (Salmonella serotype Typhi)	0	1					
Lead Poisoning	2	3	Typhus fever, epidemic	0	0					
Legionellosis	2	0	Vaccinia disease	0	0					
Listeriosis	1	1	Varicella (chickenpox)	7	10					
Lyme Disease	4	1	<i>Vibrio cholerae</i> type 01	0	1					
Lymphogranuloma Venereum (LGV)	0	0	<i>Vibrio vulnificus</i>	1	0					
			West Nile virus disease	0	1					

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.

Submitted By: [Gay Koehler-Sides, MPH, CPH](#)

A Pill a Day Keeps HIV Away

We have a PrEP Clinic! Pre-exposure prophylaxis (PrEP) is a way to prevent high-risk HIV-negative individuals from becoming infected if exposed to HIV. Eligible clients take Truvada once a day, every day to prevent HIV infection. When taken as prescribed, PrEP has been shown to reduce the risk of HIV infection by up to 92%. PrEP is another tool in our toolbox to prevent HIV transmission; clients must still use condoms and other safe sex practices. The PrEP clinic at the Florida Department of Health in Alachua County is offered one day per week. Clients can call 352-334-7969 to find out if they are eligible for PrEP and to learn more information.

2016 Summary of Bite Reports/Tested in Alachua County

707 Total Bite Reports



← **188** bite reports on **CATS**
 Tested 28 with no positive results

441 bite reports on **DOGS**
 Tested 28 with no positive results →



A total of **127** animals were tested

5 tested positive (4 bats, 1 raccoon)

Bat -20 (tested 17 - **4 positive**)

Coyote - 1 (tested)

Deer - 4 (tested)

Donkey - 1 (tested)

Fox - 2

Goat - 1 (tested)

Guinea Pig - 1

Horse - 11 (tested 9)

Mouse - 1



Bat



Coyote



Guinea Pig

Opossum - 1

Panther - 26 (tested 26)

Raccoon - 20 (tested 16 - **1 positive**)

Rat - 2

Skunk - 1

Squirrel - 2

Sugar Glider - 1 (tested)

Tiger - 1 (tested)



Panther



Skunk Raccoon



Sugar Glider