



# EPI WATCH

Monthly Epidemiology and Preparedness Newsletter

January 2016

### Florida Department of Health in Pinellas County

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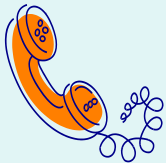
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*For more information, or to add your e-mail address to the distribution list, please contact the Editor.*

### Division of Disease Control and Health Protection



#### Disease Reporting

To report diseases and clusters of illness:

Phone: (727) 824-6932  
Fax: (727) 820-4270  
(excluding HIV/AIDS)

To Report HIV/AIDS by mail:

Surveillance Room 3-138  
205 Dr. MLK Jr St. N  
St. Petersburg, FL 33701

Animal Bite Reporting:  
Phone: (727) 524-4410  
x7665

## 2016 Florida HPV Campaign “Be HPV Free”

### You have the Power To Prevent Cancer!

Human Papillomavirus (HPV) is so common that almost everyone will be infected with HPV at some point in their lives; however, most people will never know they have been infected. Currently nearly 79 million Americans are carriers of HPV. For many, the infection will clear up on its own; for others, this can lead to cancer and other diseases. In the U.S., HPV causes 26,000 cases of cancer each year in both men and women. Among women, 12,000 of these cancer cases are cervical in nature and lead to about 4,000 deaths annually. Additionally, there are 9,000 cancer cases in men, many of whom do not survive.

Florida has one of the highest cervical cancer rates in the country; over 90% of which are known to be caused by HPV. Despite this trend, Florida’s HPV vaccination rates are among the lowest in the country with only 29% completion rate for girls and 18% completion rate for boys. To improve these rates, prevent cancer, and save lives, the Department of Health in Pinellas (DOH-Pinellas) is proud to partner with the 2016 Florida Immunization Campaign **#BeHPVFreeFL**.

In an effort to make Florida HPV Free, the partners of Florida’s Leading Immunization Network of Coalitions (FL LINC) is launching a statewide, four-month campaign to increase knowledge and usage of the HPV vaccine. The campaign includes:

- **January Kickoff:** “Someone You Love” viewing and panel discussion (January 28th in New Port Richey)
- **February HPV Summit:** February 11-12 at Hilton Bayfront in downtown St. Petersburg
- **February-March:** Statewide webinars, workshops and community events
- **April Finale:** Simultaneous statewide events, film screenings, radio, TV and print advertisement to wrap up the campaign during World Immunization Week (April 24-30)

The goal of the **#BeHPVFreeFL** campaign is to bring together Medical Providers, Educators, Community Advocates and HPV-associated Cancer Survivors to review and discuss the implementation of evidence-based practices in the prevention and treatments of HPV related diseases. This campaign will work to improve the rates of HPV vaccination and reduce the incidence and mortality rates of HPV-related diseases.

Online registration for the HPV summit is available at: <http://www.stellaredsolutions.org/#!/fl-immunization-summit/io6hv>.

For more information on the **#BeHPVFreeFL** campaign, email: [PITCHNews@outlook.com](mailto:PITCHNews@outlook.com)



# Zika Virus

Zika virus disease (Zika) is caused by a virus spread through *Aedes* species mosquito bites. *Aedes* mosquitos also spread dengue and chikungunya viruses. Zika has been detected in parts of Africa, Southeast Asia, and the Pacific Islands. In May 2015, Brazil reported the first outbreak of Zika Virus in the Americas. More recently, a locally acquired case was reported in Puerto Rico. Zika virus is not currently found in the United States; however, cases of Zika have been previously reported in returning travelers.

The symptoms of Zika are similar to those of dengue and chikungunya. The most common symptoms include fever, rash, joint pain, or conjunctivitis. Other symptoms include muscle pain, headache, pain behind the eyes, and vomiting. The illness is usually mild with symptoms lasting a few days to a week. There is currently no treatment for Zika, but the symptoms can be treated. During the first week of infection, Zika Virus can be found in the blood and passed from an infected person to another mosquito through mosquito bites. An infected mosquito can then spread the virus to other people.

Diagnostic testing is available. During the first week after onset of symptoms, Zika virus disease can often be diagnosed by performing reverse transcriptase-polymerase chain reaction (RT-PCR) on serum. Virus-specific IgM and neutralizing antibodies typically develop toward the end of the first week; however, cross-reaction with related flaviviruses is possible and may be difficult to discern. To facilitate testing, healthcare providers should contact their local health department.

No vaccine exists to prevent Zika virus disease. Protecting yourself from mosquito bites is key. Anyone traveling to a region of the world where Zika virus is found is at risk.

**If you have recently traveled and believe you have become infected with Zika Virus, follow up with a healthcare provider. For more information on Zika, please visit <http://www.cdc.gov/zika/prevention/index.html>.**



## 2014-2015 Ebola Outbreak in West Africa - Update

*as of January 15, 2016*

- A new confirmed case of Ebola was identified in Sierra Leone on January 15, 2016. The origin of the case is being investigated, and contacts are being identified to prevent further transmission. Sierra Leone was declared free of Ebola virus transmission on November 7 and entered a 90-day period of enhanced surveillance.
- On January 14, 2016, WHO declared Liberia free of Ebola virus transmission after 42 days had passed since the last confirmed patient with Ebola tested laboratory-negative twice. Liberia was previously declared free of transmission in May 2015, but small clusters were identified.
- As of December 29, 2015, enhanced entry screening and monitoring have changed for travelers entering the United States from Guinea. These travelers will continue to enter the United States through one of the designated U.S. airports conducting enhanced entry screening. However, CDC no longer recommends active monitoring for travelers arriving in the United States from Guinea. Subsequently, Florida Department of Health is no longer actively monitoring low risk travelers returning from the impacted countries in West Africa.

**Information collected from the Centers of Disease Control and Prevention (CDC) and regularly updated World Health Organization (WHO) Reports. More information can be found here:**

**<http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/index.html>**

# Selected Reportable Diseases in Pinellas County

Disease	Pinellas		YTD Total			Pinellas County Annual Totals		
	December 2015	December 2014	Pinellas 2015	Pinellas 3 YR Avg. (2012-2014)	Florida 2015	2014	2013	2012
<b>A. Vaccine Preventable</b>								
Measles				0	5			
Mumps				0	11			
Pertussis	1		17	15	343	19	17	10
Varicella	2	9	38	23	743	35	19	16
<b>B. CNS Diseases &amp; Bacteremias</b>								
Creutzfeldt-Jakob Disease (CJD)			3	1	28			2
Meningitis (Bacterial, Cryptococcal, Mycotic)	1		6	5	123	4	5	6
Meningococcal Disease			1	0	24		1	
<b>C. Enteric Infections</b>								
Campylobacteriosis	4	12	104	75	2129	103	63	59
Cryptosporidiosis	3	6	49	96	858	240	19	29
Cyclosporiasis			3	3	32		5	1
<i>E. coli</i> Shiga Toxin (+)			2	7	121	6	7	8
Giardiasis	3	5	30	36	1045	42	34	32
Hemolytic Uremic Syndrome (HUS)				0	5		1	
Listeriosis			2	2	42			5
Salmonellosis	16	15	196	207	5947	216	203	203
Shigellosis	4	1	174	15	1739	21	5	18
<b>D. Viral Hepatitis</b>								
Hepatitis A			4	4	123	2	6	4
Hepatitis B: Pregnant Woman +HBsAg	3	3	37	18	482	21	17	16
Hepatitis B, Acute	5	9	57	33	518	44	39	16
Hepatitis C, Acute	4	2	32	41	205	19	17	5
<b>E. Rabies &amp; Other Infections</b>								
Animal Rabies		2	1	1	84	2		
Rabies, possible exposure	11	13	114	195	3412	190	193	201
Chikungunya Fever			2	3	121	10		
Dengue			3	2	82	1	2	3
Eastern Equine Encephalitis				0				
Lyme Disease		1	6	6	187	5	8	6
Malaria		1	2	2	40	3	1	2
St. Louis Encephalitis				0				
West Nile Virus			1	0	12			
<b>F. Others</b>								
AIDS**	9	12	121	132	2482	148	118	130
HIV**	28	17	256	208	5720	263	185	177
Chlamydia	337	351	4103	3856	n/a	3853	4141	3812
Gonorrhea	133	144	1415	1296	n/a	1295	1424	1029
Hansen's Disease				0	28			
Lead Poisoning: Children < 6 years:		1	4	5	151	8	4	2
Legionellosis	2		18	12	306	13	10	13
Mercury Poisoning			1	1	27	2		
Syphilis, Total	20	14	271	147	n/a	186	114	141
Syphilis, Infectious (Primary and Secondary)	7	6	146	63	n/a	75	52	61
Syphilis, Early Latent	12	4	75	48	n/a	61	37	47
Syphilis, Congenital			3	0	n/a			
Syphilis, Late Syphilis (Late Latent; Neurosyphilis )	1	4	47	36	n/a	50	25	33
Tuberculosis	1	4	14	24	n/a	25	30	17
<i>Vibrio</i> Infections	3	1	11	10	196	10	11	10

n/a = not available at this time. Blank cells indicate no cases reported. Reportable diseases include confirmed and probable cases only. All case counts are provisional. Data is collected from the Merlin Reportable Disease database, surveillance systems maintained at the Florida Department of Health in Pinellas County, and Florida CHARTS <http://www.floridacharts.com/charts/default.aspx>.

\*STD data in PRISM is continually updated. Please note, data from the previous month takes up to an additional month or more to be correctly updated.

\*\*Current HIV Infection data 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. Newly reported HIV Infection cases do not imply they are all newly diagnosed cases. For a more detailed explanation on changes in reporting and changes in trends, please contact the Bureau of HIV/AIDS, Data Analysis Section.