



EPI WATCH

Monthly Epidemiology Newsletter

205 Dr. MLK Jr. St. N
St. Petersburg, FL 33701
(727) 824-6900

Director

Ulyee Choe, DO

Editor

Rachel Ilic, MPH, CPH, CIC
Rachel.Ilic@FLHealth.gov

Division of Disease Control and Health Protection

Disease Reporting

To report diseases and
clusters of illness:
Phone: (727) 824-6932
Fax: (727) 484-3865
(excluding HIV/AIDS)

To report HIV/AIDS by
mail:
Surveillance Room 3-138
205 Dr. MLK Jr St. N

Find us on Facebook

www.facebook.com/HealthyPinellas

Follow us on Twitter

@HealthyPinellas

2022–2023 Influenza Season Review

By Renee Veleva

During the 2022-2023 influenza season, Pinellas County saw moderate to severe levels of influenza activity that compared to pre-COVID-19 levels. The season began in early October which was earlier than previous seasons. Activity levels reached its peak in November and December.

According to the CDC¹, nationally, this season saw the highest severity among children and adolescents. The rate for influenza-associated medical visits and hospitalization were higher than previous seasons for children under 5 years old and children and adolescents aged 5-17 years. These visits co-circulated with other respiratory viruses such as SARS-CoV-2 and RSV which put a strain on healthcare systems. Among the children and adolescents who were hospitalized, the influenza vaccination coverage was lower compared to previous seasons. Only 1 out of 3 children and adolescents who were hospitalized were vaccinated.

The influenza (flu) vaccine prevents millions of illnesses and influenza-related doctor's visits each year. The 2023–2024 influenza season began on October 1. It's important to protect yourself and others from influenza by getting the flu vaccine. The CDC recommends that individuals aged 6 months or older receive the flu vaccine.

For more information on the flu vaccine, please visit [Flu Vaccination: What Everyone Should Know | CDC](#)

Reference:

¹[High Influenza Incidence and Disease Severity Among Children and Adolescents Aged 18 Years – United States, 2022–23 Season | MMWR](#)

Children and teens had high rates of flu hospitalizations during 2022-23*

→ **2 out of 3 hospitalized children and teens were not vaccinated**

Clinicians:
Talk to caregivers about the benefits of a flu vaccine

*Compared to the 2016-17 through 2021-22 flu seasons
bit.ly/mm7241a2
OCTOBER 13, 2023

HAN 499: Limited Availability of Nirsevimab in the United States—Interim CDC Recommendations to Protect Infants from Respiratory Syncytial Virus (RSV) during the 2023-2024 Respiratory Virus Season

Summary:

The Centers for Disease Control and Prevention (CDC) is issuing this Health Alert Network (HAN) Health Advisory to provide options for clinicians to protect infants from respiratory syncytial virus (RSV) in the context of limited supply of nirsevimab, a long-acting monoclonal antibody immunization product recommended for preventing RSV-associated lower respiratory tract disease in infants.

CDC recommends prioritizing available nirsevimab 100mg doses for infants at the high risk for severe RSV disease: young infants (age <6 months) and infants with underlying conditions that place them at highest risk for severe RSV disease. Recommendations for using 50mg doses remain unchanged at this time.

Recommendations for Healthcare Providers:

These interim recommendations apply to healthcare settings with limited nirsevimab availability during the 2023–2024 RSV season. Interim recommendations are subject to change as new evidence becomes available.

Recommendations can be found here: <https://emergency.cdc.gov/han/2023/han00499.asp>

Recommendations for the Public:

1. Families should be aware of [everyday preventive measures to limit the spread of RSV](#) and other respiratory illnesses, including washing hands, covering coughs and sneezes, cleaning frequently touched surfaces, and staying home when sick.
2. Expectant parents should talk with their healthcare provider about receiving the RSV vaccine (Abrysvo, Pfizer) during pregnancy to protect their infant from severe RSV. CDC recommends that all infants are protected against RSV through either vaccination of the mother with RSV vaccine during pregnancy or giving the infant nirsevimab after birth.
3. Parents should talk with their healthcare provider about whether nirsevimab is available for their infant.

For More Information:

Additional Information for the Public:

[Symptoms and Care of RSV \(Respiratory Syncytial Virus\) | CDC](#)

[Preventing RSV \(Respiratory Syncytial Virus\) | CDC](#)

[RSV Vaccination: What Parents Should Know | CDC](#)

[RSV Vaccination for Pregnant People | CDC](#)

[Frequently Asked Questions About RSV Vaccine for Children 19 Months and Younger | CDC](#)

[Protect yourself from COVID-19, Flu, and RSV | CDC](#)

[RSV National Trends – NREVSS | CDC](#)

[RSV \(Respiratory Syncytial Virus\) Preventive Antibody Immunization Information Statement | CDC](#)

Additional Information for Healthcare Providers:

[For Healthcare Professionals: RSV \(Respiratory Syncytial Virus\) | CDC](#)

[Healthcare Providers: RSV Vaccination for Pregnant People | CDC](#)

[Healthcare Providers: RSV Immunization for Children 19 Months and Younger | CDC](#)

[ACIP and AAP Recommendations for Nirsevimab | Red Book Online | American Academy of Pediatrics](#)

[Updated Guidance for Palivizumab Prophylaxis Among Infants and Young Children at Increased Risk of](#)

[Hospitalization for Respiratory Syncytial Virus Infection | Pediatrics | American Academy of Pediatrics](#)

Select Reportable Diseases in Pinellas County

Disease	Pinellas		YTD Total		Pinellas County Annual Totals		
	Sep 2023	Sep 2022	Pinellas 2023	Florida 2023	2022	2021	2020
A. Vaccine Preventable							
Coronavirus 2019	2703	3594	21120	490703	119224	103356	44852
Measles	0	0	0	2	0	0	0
Mpox	0	49	4	56	162	0	0
Mumps	0	0	0	13	0	1	1
Pertussis	0	1	1	57	2	1	8
Varicella	2	0	21	468	24	25	18
B. CNS Diseases & Bacteremias							
Creutzfeldt-Jakob Disease (CJD)	0	0	1	30	3	1	0
Meningitis (Bacterial, Cryptococcal, Mycotic)	1	0	4	90	12	5	5
Meningococcal Disease	0	0	2	30	2	1	2
C. Enteric Infections							
Campylobacteriosis	24	18	172	3572	208	213	247
Cryptosporidiosis	4	6	26	496	38	28	38
Cyclosporiasis	1	0	11	331	21	9	9
<i>E. coli</i> Shiga Toxin (+)	3	2	27	819	28	16	10
Giardiasis	4	4	24	973	34	29	28
Hemolytic Uremic Syndrome (HUS)	2	0	2	5	0	0	0
Listeriosis	0	0	2	32	3	3	2
Salmonellosis	26	16	125	4912	174	182	200
Shigellosis	1	3	41	959	37	37	19
D. Viral Hepatitis							
Hepatitis A	0	0	1	86	20	6	3
Hepatitis B: Pregnant Woman +HBsAg	2	3	14	379	20	10	18
Hepatitis B, Acute	1	4	24	510	33	51	40
Hepatitis C, Acute	5	3	76	961	120	91	117
E. Vectorborne/Zoonoses							
Animal Rabies	0	0	1	48	0	0	0
Rabies, possible exposure	24	8	142	4822	151	135	118
Chikungunya Fever	0	0	0	5	0	0	0
Dengue fever	0	2	2	402	7	0	1
Eastern Equine Encephalitis	0	0	0	2	0	0	0
Lyme Disease	5	1	17	218	11	7	11
Malaria	0	3	4	49	4	2	2
West Nile Virus	0	0	0	9	0	0	0
Zika Virus Disease	0	0	0	1	0	0	0
F. Others							
Hansen's Disease	0	0	1	19	0	0	0
Legionellosis	1	3	11	331	38	36	33
Mercury Poisoning	0	0	0	17	0	2	1
Tuberculosis	1	1	2	283	22	21	24
<i>Vibrio</i> Infections	2	2	12	286	13	12	18
G. Sexually Transmitted Infections							
	Pinellas		YTD Total		Pinellas County Annual Totals		
	Sep 2023	Sep 2022	Pinellas 2023	Pinellas 2022	2022	2021	2020
Chlamydia	186	331	2808	2743	4027	4090	3956
Gonorrhea	79	131	1132	1257	1734	1883	1634
Syphilis, Total	4	70	438	526	879	634	479
Syphilis, Infectious (Primary and Secondary)	3	35	236	265	336	274	212
Syphilis, Early Latent	1	25	135	222	269	239	166
Syphilis, Late Syphilis (Late Latent; Neurosyphilis)	0	10	68	104	5	7	5
Syphilis, Congenital	0	0	3	5	269	114	96

*YTD up to September 30, 2023. n/a = not available at this time