



# EPI WATCH

Monthly Epidemiology and Preparedness Newsletter

January 2015

Florida Department of Health in Pinellas County  
205 Dr. M.L King Street N.  
St. Petersburg, FL 33701  
(727) 824-6900  
[www.PinellasHealth.com](http://www.PinellasHealth.com)

Division of Disease Control and Health Protection  
8751 Ulmerton Road  
Largo, FL 33771  
(727) 524-4410

Director  
Claude Dharamraj, MD,  
MPH, FAAP  
[claude.dharamraj@flhealth.gov](mailto:claude.dharamraj@flhealth.gov)

Editor  
JoAnne Lamb, MPH  
[joanne.lamb@flhealth.gov](mailto:joanne.lamb@flhealth.gov)

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

## Disease Reporting

To report diseases and clusters of illness (other than TB/STD/HIV/AIDS)  
Phone: (727) 507-4346  
Fax: (727) 507-4347



For TB, STD or HIV/AIDS Reporting  
Phone: (727) 824-6932

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

## Multistate Outbreak of Listeriosis Linked to Commercially Produced, Prepackaged Caramel Apples

On December 19, 2014, the Centers for Disease Control and Prevention (CDC) announced that they were investigating a multistate outbreak of listeriosis linked to commercially produced, prepackaged caramel apples. As of January 10, 2015, 32 people in 11 states have become ill. Thirty one people have been hospitalized. Seven deaths were reported and listeriosis has been identified as a contributing factor in at least three of the deaths. Ten illnesses occurred in pregnant women or a newborn infant and there was one fetal loss.



Source: [www.cdc.gov](http://www.cdc.gov)

The illnesses have occurred in New Mexico (6), Missouri (5), Minnesota (4), Texas (4), Arizona (4), Wisconsin (3), California (2), North Carolina (1), Nevada (1), Utah (1), and Washington (1). The public health agency of Canada has identified two cases of listeriosis of the same strain as the cases in the United States. No illnesses related to outbreak have been reported in Florida. Of the 28 cases who have been interviewed, 25 (89%) reported eating commercially produced prepackaged caramel apples before becoming ill.

The CDC has determined that the strain of listeriosis in the infected patients is indistinguishable from whole apples collected along the distribution chain of Bidart Bros. in California. **Consumers should not eat any Granny Smith or Gala Apples produced by Bidart Bros. and retailers should not sell or serve them.** Consumers should contact their retailer to determine whether their apples came from Bidart Bros. If the source of the apples is unable to be determined, the apples should be discarded.

**Consumers should not eat commercially produced prepackaged caramel apples that were recalled or made with Bidart Bros. apples and retailers should not serve or sell them.** Recalls have been issued by Happy Apples, California Snack Foods, and Merb's Candies. Consumers should contact their retailer to determine whether their caramel apples were made with Bidart Bros. apples. If the source of the apples is unable to be determined, the caramel apples should be discarded.

## What is Listeriosis?

Listeriosis is an infection caused by ingestion of food contaminated with the bacterium *Listeria monocytogenes*. The illness is often serious and primarily affects infants, pregnant women, older adults, and persons with compromised immune systems. Patients without these risk factors may experience acute febrile gastroenteritis. In pregnant women, infections during pregnancy can lead to miscarriage, still-birth, premature delivery, or life-threatening infections in newborns. According to the Centers for Disease Control and Prevention (CDC), almost everyone diagnosed with listeriosis has an invasive infection, meaning that the bacteria have spread beyond the gastrointestinal tract. In immunocompromised persons and older adults, septicemia and meningitis are the most common symptoms. Antibiotics are used to treat listeriosis infections. Even with prompt treatment, the infection can result in death, usually in older adults or persons with underlying medical conditions.

*The investigation is ongoing at this time. Listeriosis should be reported by phone immediately to your local health department 24 hours a day.*

For more information on listeriosis and the recent outbreak, please visit the Centers for Disease Control and Prevention's website: <http://www.cdc.gov/listeria>

# Pinellas County and Florida HIV/AIDS Data Trends - 2014

In Pinellas County, preliminary year end numbers for 2014 show a 50% increase in new HIV cases reported compared to 2013, and a 26% increase in new AIDS cases reported. Newly reported HIV cases do not imply they are all newly diagnosed cases. A combination of factors may have contributed to the increase in cases, including:

- ◆ Higher testing rates in the community due to increased awareness of HIV.
- ◆ Improved compliance in case reporting by laboratories and/or providers.
- ◆ A decrease in public engagement in safe sexual practices.
- ◆ A change in the CDC HIV case definition for reporting became effective in 2014, allowing an undetectable HIV viral load test with proof of antiretroviral medication use to report a case. This captures individuals with well-controlled HIV who may have had their confirmatory test done prior to it becoming reportable, in another state, or anonymously.
- ◆ Retrospective chart reviews at local hospitals and infectious disease offices were conducted during 2014, reviewing charts from 2012-2013 for missed reporting of HIV or AIDS cases. Chart reviews can be particularly helpful in discovering opportunistic infections diagnosed by hospitals providers, causing a reportable change of a case from HIV to AIDS.

Statewide data from January-September 2014, showed a 6% increase in newly reported HIV infections in Florida, and a 14% decrease in new AIDS cases reported when compared to the same time period in 2013. For newly diagnosed HIV infections during this time period, the proportion of whites and Hispanics has increased and the proportion of blacks has decreased when compared to the previous year. An increase in newly diagnosed HIV infection was seen in white and Hispanic females and all races for males. Among newly diagnosed males, the risk groups who saw the largest increase were men who have sex with men (MSM) and are injection drug users (IDU). A decrease among heterosexual males was also observed.

**For more information on HIV/AIDS Surveillance in Pinellas County, please visit our website:** <http://pinellas.floridahealth.gov/programs-and-services/infectious-disease-services/hiv-aids/index.html>.

Photo source: [www.aids.gov](http://www.aids.gov)



## 2014 Ebola Outbreak in West Africa - Update

Update as of January 15, 2015

- Over 20,000 confirmed, probable, and suspected cases of Ebola Virus Disease (EVD) have been reported in Guinea, Liberia and Sierra Leone (see table), with more than 8000 deaths (deaths are under-reported). Sierra Leone remains the worst-affected country to date.
- According to the latest World Health Organization (WHO) Situation Report, Guinea, Liberia and Sierra Leone report that more than 90% of registered contacts are monitored, though the number of contacts traced per EVD case remains lower than expected in many districts. Continued contact tracing will be essential to decrease transmission.
- No new cases have been reported in Mali since November 24, 2014. All identified contacts connected with both the initial case and the outbreak in Bamako have now completed 21-day follow-up.
- On December 29, 2014, the WHO was notified by the National IHR Focal Point for the United Kingdom of a laboratory-confirmed case of Ebola. This is the first Ebola case to be detected on United Kingdom soil. The case is a female healthcare worker who has returned from volunteering at an Ebola treatment center in Sierra Leone.
- Two imported cases, including one death, and two locally acquired cases in healthcare workers were reported in the United States in 2014. **There are currently no active cases of Ebola in the United States.**
- **No FDA-approved vaccine or specific treatment (e.g., antiviral drug) is available for Ebola.** Symptoms of Ebola and complications are treated as they appear. Experimental vaccines and treatments for Ebola are under development, but they have not yet been fully tested for safety or effectiveness.
- Several investigational drugs as well as plasma from recovered Ebola patients have been used to treat patients with Ebola during the current outbreak, but no controlled clinical trials have been conducted to date.

**Case Counts for Countries with Widespread EVD Transmission\***

Country	Total Cases	Laboratory-Confirmed Cases	Total Deaths
Guinea	2806	2514	1814
Liberia	8331	3127	3538
Sierra Leone	10124	7786	3062
<b>Total</b>	<b>21261</b>	<b>13427</b>	<b>8414</b>

\* Case counts updated in conjunction with the World Health Organization updates and are based on information reported by the Ministries of Health. Updated January 14, 2015.

The following updates were collected from the CDC website. Additional information can be found here: <http://www.cdc.gov/vhf/ebola/outbreaks/2014-west-africa/index.html>. WHO Situation Reports can be found here: <http://www.who.int/csr/disease/ebola/situation-reports/archive/en/>.

# Selected Reportable Diseases in Pinellas County

Disease	Pinellas	Total		Pinellas County Annual Totals		
	December 2014	Pinellas 2014	Florida 2014	2013	2012	2011
<b>A. Vaccine Preventable</b>						
Measles						
Mumps			1			
Pertussis		19	732	17	10	10
Varicella	9	35	574	19	16	21
<b>B. CNS Diseases &amp; Bacteremias</b>						
Creutzfeldt-Jakob Disease (CJD)			26		2	3
Meningitis (Bacterial, Cryptococcal, Mycotic)		4	134	5	6	7
Meningococcal Disease			50	1		
<b>C. Enteric Infections</b>						
Campylobacteriosis	11	109	2204	63	59	83
Cryptosporidiosis	6	240	1907	19	29	19
Cyclosporiasis			33	5	1	2
<i>E. coli</i> Shiga Toxin (+)		6	171	7	8	2
Giardiasis	3	42	1169	34	32	27
Hemolytic Uremic Syndrome (HUS)			7	1		
Listeriosis			45		5	3
Salmonellosis	14	216	6029	203	203	225
Shigellosis	1	21	2402	5	18	93
<b>D. Viral Hepatitis</b>						
Hepatitis A		2	107	6	4	5
Hepatitis B: Pregnant Woman +HBsAg	2	23	517	17	16	29
Hepatitis B, Acute	9	44	419	39	16	10
Hepatitis C, Acute	2	19	179	17	5	13
<b>E. Vector Borne, Zoonoses</b>						
Animal Rabies	2	2	95			2
Rabies, possible exposure	11	190	3042	193	201	217
Chikungunya Fever		10	444			
Dengue		1	96	2	3	1
Eastern Equine Encephalitis			1			
Lyme Disease	1	5	144	8	6	9
Malaria	1	3	53	1	2	1
St. Louis Encephalitis			2			
West Nile Virus			21			
<b>F. Others</b>						
AIDS**	12	149	n/a	118	130	123
HIV**	17	278	n/a	185	177	189
Chlamydia	351	3854	n/a	4141	3812	3863
Gonorrhea	144	1295	n/a	1424	1029	1034
Hansen's Disease			8			
Lead Poisoning: Children < 6 years:	1	8	165	4	2	4
Legionellosis		13	281	10	13	13
Mercury Poisoning		2	14			2
Syphilis, Total	14	186	n/a	114	141	132
Syphilis, Infectious (Primary and Secondary)	6	75	n/a	52	61	66
Syphilis, Early Latent	4	61	n/a	37	47	35
Syphilis, Congenital			n/a			1
Syphilis, Late Syphilis (Late Latent; Neurosyphilis)	4	50	n/a	25	33	30
Tuberculosis	4	25	n/a	30	17	9
<i>Vibrio</i> Infections	1	10	165	11	10	11

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. CDC case definitions for HIV and AIDS, as of September 2014, were now accepted into the updated version of eHARS. This means that prior to September HIV cases that were not considered "reportable" due to an undetectable HIV viral load can now be reported as an HIV case if Surveillance staff can determine if the patient is being treated on ARVs (antiretrovirals) and, therefore, they have a "clinical diagnosis". This could result in an artificial increase in HIV case reporting in the upcoming months. In addition, children from ages 6-12 years that are diagnosed with HIV can now be reported as "AIDS" with a CD4 absolute count <200, children from 1-5 years old can be diagnosed AIDS with a CD4 test <500 and children <1 years old can be diagnosed with AIDS with a CD4 test <750. This may affect our YTD comparison between years for the upcoming year. For a more detailed explanation on changes in reporting and changes in trends, please contact the Bureau of HIV/AIDS, Data Analysis Section.