



EPI WATCH

Monthly Epidemiology Newsletter

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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

St. Petersburg, FL 33701

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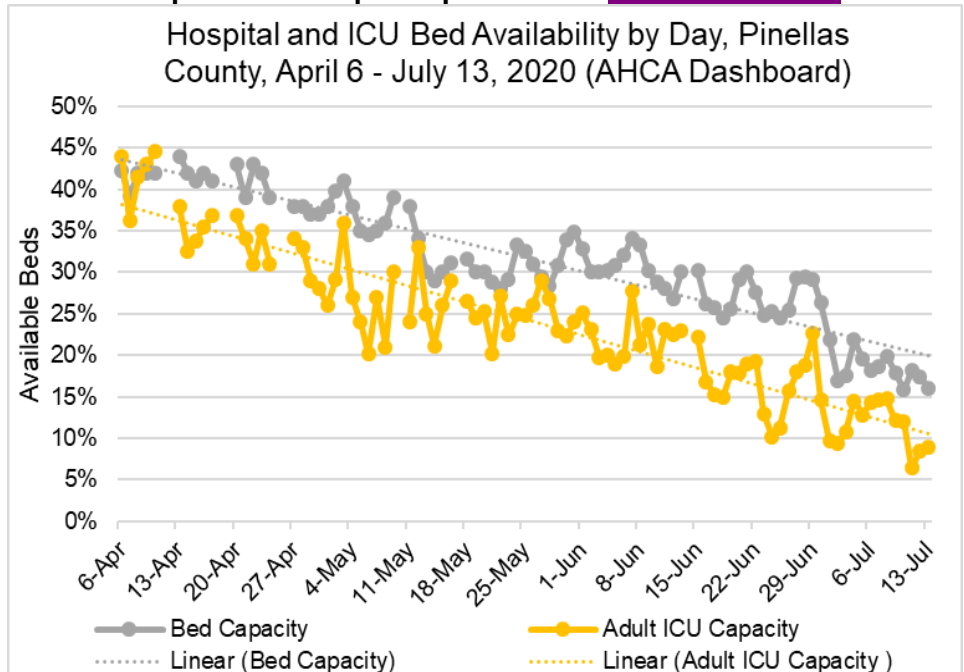
COVID-19 Update

On July 10, Pinellas County surpassed 10,000 confirmed and probable cases of COVID-19. As cases continue to climb locally and nationally, the Florida Department of Health (DOH) has expanded efforts of contact tracing and testing. In addition to state efforts, the Florida Department of Health in Pinellas County continues to investigate while improving surveillance to share with the community.

Figure 1 (on page 3) depicts the distribution of COVID-19 cases throughout Pinellas County from March 11 through July 10. Note that there appear to be multiple “hot spots” in south St. Petersburg and parts of Clearwater. This figure does not account for differing population densities throughout the county; however, it does aid DOH in understanding the disease burden spatially. In addition to geospatial information, we continue to monitor case demographics, testing trends, syndromic data, and hospital data managed by the Agency for Healthcare Administration [ACHA]. In recent weeks, total bed and ICU bed capacity continues to decline in Pinellas County. As of July 13, only 9% of adult ICU beds are available.¹

Please visit the [Florida DOH: COVID-19](#) for daily reports

For information on social distancing, masking, or other steps you can take to prevent the spread please visit [CDC: Prevention](#)



1. Agency for Healthcare Administration. (2020). Hospital Beds Census and Staffed Availability as Reported in ESS. Retrieved from https://bi.acha.myflorida.com/t/ABICC/views/Public/HospitalBedsHospital?%3AshowAppBanner=false&%3Adisplay_count=n&%3AshowwVizHome=n&%3Aorigin=viz_share_line_k&%3AisGuestRedirectFromVizportal=y&%3Aembed=y

Arboviral Infections

Arboviral infections are any diseases transmitted to humans through infected arthropods including mosquitoes and ticks. Common examples of arboviral infections in Florida include West Nile Virus, Eastern Equine Encephalitis virus, and Dengue virus. Dengue is caused by four viruses (DEN-1, DEN-2, DEN-3, DEN-4) and are related to agents responsible for West Nile infection and yellow fever.¹

As of July 18, 17 confirmed and probable cases of Dengue fever have been identified to be locally acquired in Florida. In response, the Florida Department of Health has increased surveillance and mosquito control to limit the infection spread.

Four out of five persons remain asymptomatic after infection, however, flu-like illness, muscle pains, fever, and rash may develop within 14 days after being bit by an infected *Aedes aegypti* mosquito. Person to person infection has not been noted.

To limit the potential for exposure persons are recommended to wear appropriate clothing when outside, maintain intact windows and screens, use mosquito repellants, and destroy mosquito breeding habitats by dumping standing water.

For more information, please visit [Florida Health: Dengue](#)

For resources on preventing mosquito bites, please visit [CDC: Prevention](#)

1. FDOH (June 2,2020). Dengue Fever. Retrieved from <http://www.floridahealth.gov/diseases-and-conditions/dengue>



Please note that the highlighted country indicates the Democratic Republic of Congo (DRC)



End of Ebola Outbreak in Eastern DRC

On June 25, the Democratic Republic of Congo's [DRC] Ministry of Health together with the U.S. Centers for Disease Control and the World Health Organization announced the end of the Ebola outbreak that began in August 2018 in the region.

Known as the Kivu Ebola outbreak, named after the Kivu region of eastern DRC, a total of 3,470 confirmed and probable cases were reported from August 1, 2018 to June 25, 2020 with a 65% crude case fatality rate (N=2,268).¹ This marks the tenth outbreak in the country and the second largest Ebola outbreak in history.²

The Ministry of Health in combination with external partners undertook a large scale infection control program including targeted education, contact tracing, isolating cases, and vaccinations.³

WHO guidance on determining the end of an outbreak state that two incubation periods must pass from last confirmed case; for Ebola that is 42 days. However, officials warn that the virus is not eradicated and could return through animal hosts or surrounding outbreaks. Ongoing robust surveillance will ensure timely response to new cases to limit the spread.

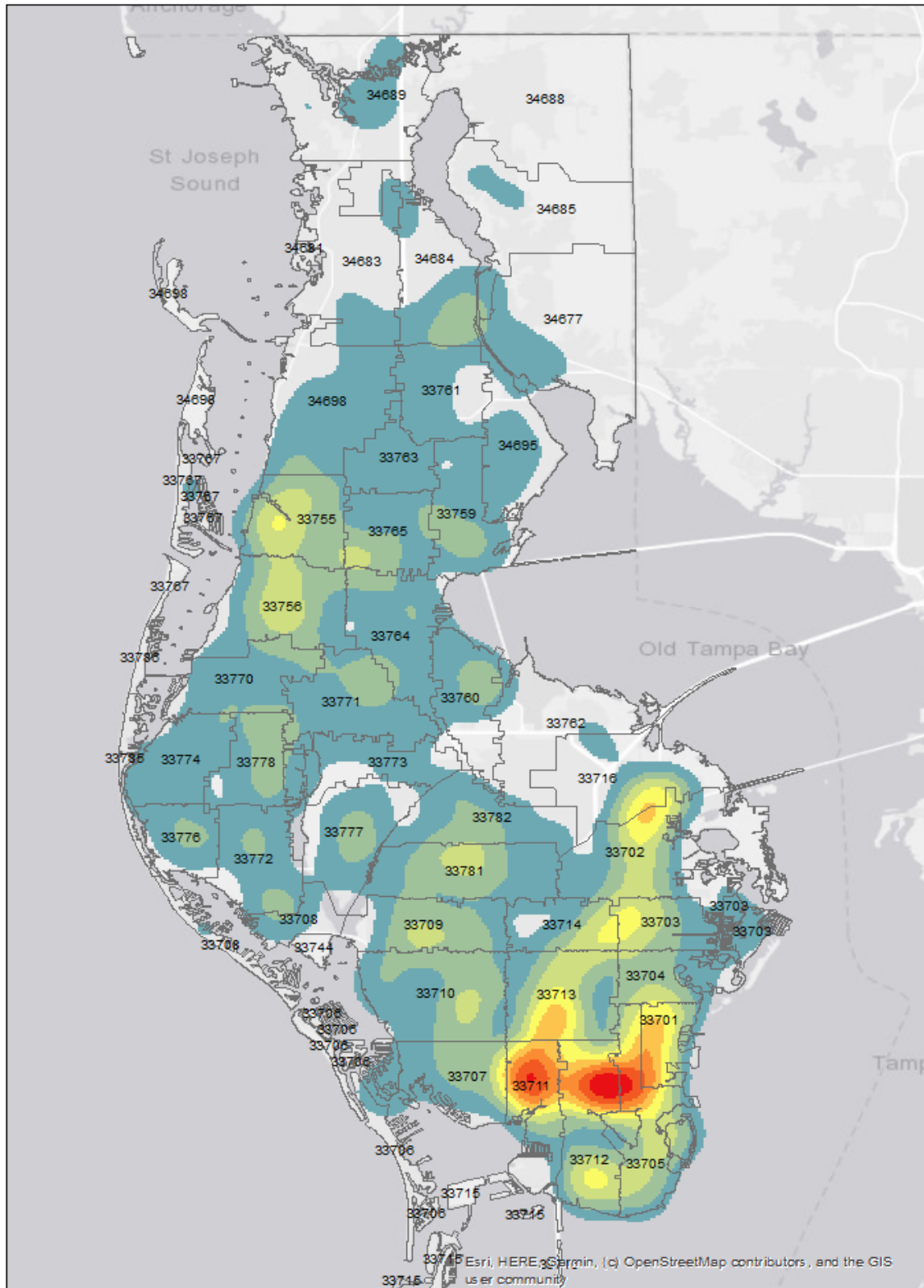
For more on the outbreak please visit the [WHO's EBOLA GIS Dashboard](#)

1. WHO. (June 4, 2020). Ebola Dashboard. Retrieved from <https://who.maps.arcgis.com/apps/opsdashboa rd/index.html#/e 70c3804f6044652b c37cce7 d8fcefc>

2. CDC. (June 25,2020). Press Release: CDC Marks the End of the 2018 Ebola Outbreak in Eastern Democratic Republic of Congo. Retrieved from <https://www.cdc.gov/media/releases/2 020/p0625-cdc-marks-end-2018-ebola-outbreak.html>

3. WHO. (June 24, 2020). Ebola virus disease Democratic Republic of Congo: external situation report 98/ 2020. Retrieved from <https://www.who.int/publications/i/item/10665-332654>

COVID-19 Cases identified between March 11 though July 10, Pinellas County Heatmap



This heatmap shows confirmed and probable COVID-19 cases reported up to July 10 in Pinellas County after removing nursing home, assisted living facility, or other long term care facility residents to allow the viewer to understand the spatial distribution in the County. Please note that warmer colors indicate increased case density.

Select Reportable Diseases in Pinellas County

Disease	Pinellas		YTD Total		Pinellas Annual Totals		
	June 2020	June 2019	Pinellas 2020	Florida 2020	2019	2018	2017
A. Vaccine Preventable							
Measles	0	0	0	1	1	7	0
Mumps	0	2	1	43	7	10	3
Pertussis	0	4	8	196	27	32	36
Varicella	0	2	12	237	33	67	24
B. CNS Diseases & Bacteremias							
Creutzfeldt-Jakob Disease (CJD)	0	1	0	9	3	1	2
Meningitis (Bacterial, Cryptococcal, Mycotic)	0	1	0	42	7	9	7
Meningococcal Disease	0	0	2	16	1	1	0
C. Enteric Infections							
Campylobacteriosis	18	25	114	1695	310	264	207
Cryptosporidiosis	2	6	14	150	64	34	40
Cyclosporiasis	0	1	1	13	28	4	6
<i>E. coli</i> Shiga Toxin (+)	1	0	5	236	24	15	22
Giardiasis	2	3	16	363	52	41	45
Hemolytic Uremic Syndrome (HUS)	0	0	0	2	1	0	0
Listeriosis	0	0	0	16	2	1	0
Salmonellosis	16	19	75	2090	201	233	279
Shigellosis	1	4	11	343	22	40	26
D. Viral Hepatitis							
Hepatitis A	1	36	3	678	377	113	1
Hepatitis B: Pregnant Woman	1	0	12	177	24	14	25
Hepatitis B, Acute	3	5	19	317	72	52	51
Hepatitis C, Acute	0	6	33	507	82	40	30
E. Vector Borne/ Zoonoses							
Animal Rabies	0	0	0	35	2	1	3
Rabies, possible exposure	6	14	58	1,745	128	130	140
Chikungunya Fever	0	0	0	3	0	0	0
Dengue	1	0	1	35	3	0	0
Eastern Equine Encephalitis	0	0	0	0	0	0	0
Lyme Disease	0	0	1	67	22	14	19
Malaria	0	0	1	13	5	3	0
West Nile Virus	0	0	0	19	0	0	0
Zika Virus Disease	0	0	0	1	3	2	5
F. Others							
Chlamydia	343	309	1,888	n/a	4588	4422	418
Gonorrhea	129	123	703	n/a	1537	1439	1574
Hansen's Disease	0	0	0	17	0	0	0
Legionellosis	2	3	15	415	43	37	28
Mercury Poisoning	0	0	0	6	1	1	1
Syphilis, Total	23	40	182	n/a	479	438	382
Syphilis, Primary and Secondary	14	20	83	n/a	213	190	160
Syphilis, Early Latent	6	14	62	n/a	191	158	128
Syphilis, Congenital	0	0	2	n/a	6	2	5
Syphilis, Late Syphilis	3	6	35	n/a	69	88	89
Tuberculosis	1	2	9	n/a	23	33	28
<i>Vibrio</i> Infections	3	1	6	73	18	6	11

*YTD up to July 1, 2020. n/a = not available at this time

Reportable diseases include confirmed and probable cases only. All case counts are current and 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 STARS is continually updated. Please note, data from the previous month takes up to an additional month or more to be correctly updated.