



Florida Department of Health in Broward County

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EPI EXAMINER

A Monthly Epidemiology Report

August, 2017

INSIDE THIS REPORT

Disease Summary.....1	Merlin Reportable Disease Surveillance....4
Food Recalls.....1	Syndromic Surveillance.....5
Letter to Health Care Providers.....2-3	Influenza Surveillance.....6

Disease Summary:

In August, a total of 496 cases of various diseases were reported to the Florida Department of Health in Broward County (DOH-Broward). Among them, there were forty cases of campylobacteriosis, eighty-eight cases of salmonellosis, four cases of bacterial or mycotic meningitis, five cases of hepatitis A, one case of possible herpes B virus exposure, five cases of Lyme disease, twenty-one cases of possible rabies exposure, four cases of carbon monoxide poisoning, five cases of pertussis, seven cases of varicella (chickenpox) and one case of vibriosis (other *Vibrio* species). These were higher than the averages of the same month in the previous five years.

Food Recalls:

There were three food recalls reported in Florida for the month of August 2017.

Brand Name	Food	Recall Date	Health Risk
The AMPT Life, LLC	AMPT Coffee	8/1/2017	Undeclared Active Pharmaceutical Ingredients & Milk
Amrita Health Foods	Protein Bars	8/2/2017	Listeria
Expresco Foods Inc.	Chicken Skewer Products	8/23/2017	Listeria

All data are provisional.

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Rick Scott
Governor

Celeste Philip, MD, MPH
State Surgeon General and Secretary

Vision: To be the Healthiest State in the Nation

August 18, 2017

Dear Health Care Provider:

The Florida Department of Health in Broward County (DOH-Broward) continues to work with partners including physicians, hospitals and community based organizations to decrease rates of Syphilis and eliminate Congenital Syphilis in Broward County. To accomplish this, we need your assistance in routinely screening patients for HIV and Sexually Transmitted Disease(STDs), reporting positive test results, ensuring timely treatment, encouraging clients to cooperate with DOH-Broward partner services and ensuring pregnant women are screened as required by Florida Statute.

Screening tests can accurately detect Syphilis infections in pregnant women. Untreated Syphilis during pregnancy leads to Congenital Syphilis which can be manifested by stillbirth, neonatal death, bone deformities, and neurological impairments. The universal screening of pregnant women for the detection of Syphilis and prompt and complete treatment significantly decreases the proportion of infants with these clinical manifestations.

Chapter 64D-3.042, *Florida Administrative Code* requires that healthcare providers conduct routine HIV and STD testing, which shall include, at a minimum, Chlamydia, Hepatitis B, Gonorrhea, Syphilis, and HIV for all pregnant women at the initial examination related to her current pregnancy and again at 28 to 32 weeks. Women who appear at delivery; or within 30 days post- partum with no record of prenatal care; or prenatal care with no record of testing; or prenatal care with no record of testing after the 27th week, shall be considered at a high risk and shall be tested for Hepatitis B surface antigen, HIV and Syphilis prior to discharge. Chapter 64D-3.029, *Florida Administrative Code* requires physicians to immediately report Syphilis in a pregnant woman or neonate to the Florida Department of Health. **The phone number for confidential reporting is 954-467-4700 ext. 3311 and the fax number is 954-467-5919.**

The Centers for Disease Control and Prevention (CDC) has outlined the appropriate screening and treatment for STDs including Syphilis in pregnancy <https://www.cdc.gov/std/tg2015/tg-2015-print.pdf>. To prevent Congenital Syphilis, it is critical that treatment of an infected mother be completed at least 30 days prior to delivery. Because treatment can take up to 3 weeks, pregnant women who enter prenatal care late, should be immediately screened. **The Florida Department of Health in Broward County is available 24/7 for consultation regarding Syphilis in a pregnant woman or newborn at 954-829-3341.**

We strongly encourage you to integrate the following recommendations into your clinical practice for all of your patients:

- Perform Syphilis serologic testing on anyone with signs or symptoms of Syphilis. These commonly include genital/oral ulceration and rash involving the palms of the hands or soles of the feet.
- Consider presumptive therapy in any patient presenting to your practice setting with classic features of Primary or Secondary Syphilis. Up to 30% of patients with Primary Syphilis may have negative serological tests up to one week after the onset of the lesion. Treat these patients presumptively.
- Perform Syphilis serologic screening on all men who have sex with men at least annually and consider more frequent screening (every 3 - 6 months) in individuals with high risk behaviors.
- Perform Syphilis serologic screening on anyone requesting an HIV test and anyone being tested/screened for other STDs.
- Perform an HIV test on any clients with a new Syphilis diagnosis when their current HIV status is unknown, including individuals with negative HIV test results received greater than 3 months prior to diagnosis of Syphilis.
- Encourage patients with Primary, Secondary, or Early Latent Syphilis to notify their sex partners and encourage those partners to seek testing and treatment. DOH- Broward, through our contracted provider, offers free STD testing and treatment at the Broward Wellness Center (954-522-3132).
- The timely reporting of STDs is required by Chapter 64D-3.029, *Florida Administrative Code*. If you make a diagnosis of Syphilis or if you suspect a case of Syphilis in a pregnant woman, please report it immediately by calling 954-467-4700 Ext. 3311 or faxing to 954-467-5919. A copy of the Florida Confidential Report of Sexually Transmitted Diseases is attached for your use.

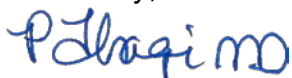
For your convenience, the links to the Centers for Disease Control and Prevention downloadable I-phone or Android CDC treatment guidelines app are provided below.

STD Treatment (Tx) Guide(<https://www.cdc.gov/std/tg2015/default.htm>)

The STD Treatment (Tx) Guide app is an easy-to-use reference that helps health care providers identify and treat patients for STDs. STD Tx Guide combines information from the STD Treatment Guidelines as well as MMWR updates, and features a streamlined interface so providers can access treatment and diagnostic information. The free app is available for Apple and Android devices. Download from the [App store](#) and [GooglePlay](#) today!

We appreciate the invaluable role you play in protecting, promoting and improving the health of all of the people of Broward County.

Sincerely,



Paula M. Thaqui, M.D., M.P.H.
Director

Table 1 . Provisional Cases* of Selected Notifiable Disease, Broward County, Florida, August 2017

	BROWARD COUNTY					FLORIDA				
	August		Mean†	Cumulative (YTD)		August		Mean†	Cumulative (YTD)	
	2017	2016		2017	2016	2017	2016		2017	2016
A. Enteric Infections										
Campylobacteriosis	40	7	19	181	95	440	402	323.8	2965	2466
Cryptosporidiosis	2	2	5.6	24	11	75	67	153.6	310	324
Cyclosporiasis	1	0	1.2	4	1	56	5	6.6	104	32
E.Coli, Shiga Toxin-Producing Infection**	5	6	4.8	51	39	74	67	50.8	466	404
Giardiasis, Acute	10	6	10	64	55	99	114	115.6	707	776
Listeriosis	2	0	1	6	3	7	4	5.8	33	23
Salmonellosis	88	81	59.8	394	320	712	793	743.6	3659	3576
Shigellosis	10	11	13.4	79	91	188	91	145.4	903	582
B. CNS Diseases & Bacteremias										
Meningitis, Bacterial or Mycotic	4	3	1	8	7	14	12	11	81	77
Streptococcus Pneumoniae Invasive Disease, < 6 years old:										
Drug Resistant	1	0	0.2	4	2	2	4	1.6	24	19
C. Viral Hepatitis										
Hepatitis A	5	1	1	27	4	29	15	11.4	178	79
Hepatitis B, Acute	3	5	1.4	40	29	68	69	38.8	501	450
Hepatitis B, Pregnant Women	6	6	3.4	69	44	48	29	35.2	335	285
Hepatitis C, Acute	3	4	1	15	18	39	31	20.8	243	215
D. Vector Borne, Zoonoses										
Dengue Fever	1	1	2	1	10	2	8	13.2	15	46
Herpes B Virus, Possible Exposure	1	0	0	4	0	4	0	0.6	14	0
Lyme Disease	5	0	0.2	17	13	63	39	33.8	230	132
Malaria	1	0	0.6	4	6	7	11	6.8	41	42
Rabies, Possible Exposure	21	9	3	122	67	326	294	270.8	2239	2161
Zika Virus Disease and Infection, Non-Congenital	4	50	10	36	109	37	286	57.2	264	648
E. Others										
Carbon Monoxide Poisoning	4	0	0.4	11	6	18	15	15	147	167
Lead Poisoning	1	4	2.4	36	26	94	71	65.6	767	538
Legionellosis	4	3	3.4	30	13	53	37	31.8	299	192
Pertussis	5	0	1	18	8	45	38	55.8	274	239
Varicella (Chickenpox)	7	3	2	71	41	41	48	42	447	530
Vibriosis (Other Vibrio Species)	1	0	0	1	1	8	4	1.8	38	10

* Confirmed, Probable, Suspect and Unknown Cases based on date of report as reported in Merlin.

† Mean of the number of cases of the same month in the previous five years.

** Includes E. coli O157:H7; shiga-toxin positive, serogroup non-O157; and shiga-toxin positive, not serogrouped.

Highlighted diseases/conditions are higher than expected for the current month in Broward.

The Merlin system is Florida's state repository of reportable disease case reports, including automated notification of staff about individual cases of high priority diseases. Data are extracted using event date which is usually the date of onset of illness, and when that is unknown, event date may be date of lab report, or date of diagnosis.

The Electronic Surveillance System for the Early Notification of Community Based Epidemics (ESSENCE) was developed by Johns Hopkins University and Walter Reed Army Institute of Research. It is a syndromic surveillance tool used to monitor potential bioterrorism threats and reportable diseases. Chief complaint data is transmitted daily to the ESSENCE system from participating hospital emergency rooms. DOH-Broward monitors a total of 17 reporting hospitals in Broward County. ESSENCE groups the chief complaint data into twelve syndrome groups, including: botulism-like, exposure, fever, gastrointestinal (GI), hemorrhagic, influenza-like-illness (ILI), neurological, rash, respiratory, shock/coma, injury, and other. ESSENCE creates automatic warnings or alerts for the monitoring of the twelve syndrome groups by comparing statistical differences in observed and predicted disease based on a 28-day average. Specialized queries have also been developed to monitor Florida state reportable diseases in Broward County. When an observed value is statistically higher at the $p < .05$ level, a yellow warning flag is generated.

Figure 1. ESSENCE Daily Emergency Department Visits, Broward, August 2017

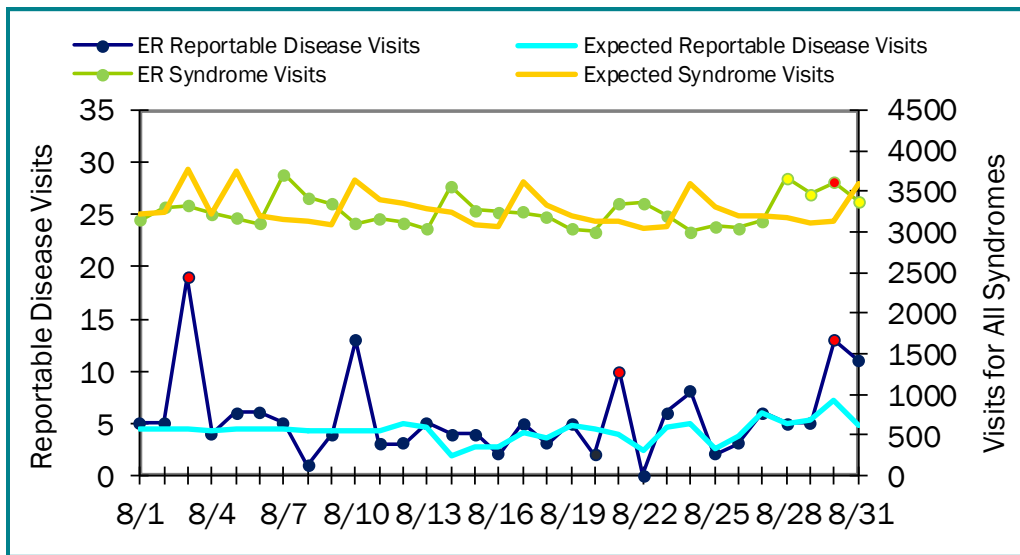


Figure 5. There are zero warnings and three alerts for E.R reportable disease visits; and three warnings and one alert for E.R syndromic visits.

Warning - Yellow data point
Alert - Red data point

Table 2. ESSENCE Chief Complaint Alerts and Warnings for Reportable Disease and Chief Complaint Syndromes, August 2017

Disease	Alert Dates	Warning Dates	Syndrome	Alert Dates	Warning Dates
All Reportable Disease Query	9, 20	None	Botulism-like Illness	None	None
Vaccine Preventable Diseases ¹	31	30	Exposure	None	None
Hepatitis A and B	None	None	Fever	7	8, 9, 21, 23
Meningitis (may not be bacterial)	None	21, 23	Gastrointestinal Illness	15	17, 19
Varicella (chicken pox)	28, 29, 30	None	Hemorrhagic Illness	None	None
Vector Borne Diseases	None	None	Influenza-like Illness (ILI)	None	9, 10, 11
Chikungunya	None	29	Injury	None	None
Dengue	None	None	Neurological	None	None
Encephalitis	None	None	Rash	30	7, 23, 29, 31
Malaria	None	None	Respiratory	None	9, 11
Zika Infection	None	None	Shock/Coma	None	15
Gastrointestinal Illnesses	3, 21, 30	None	Other Illness	18, 31	16, 21
General Enterics ²	1, 11, 12, 14, 16	2, 9, 10, 13, 15, 17, 18, 19, 20			
Vomit and Diarrhea	30	29, 31			

¹ Varicella, Measles, Mumps, Rubella, Diphtheria, Tetanus, Pertussis, Polio

² Cryptosporidium, cyclospora, shigellosis, shigella, salmonellosis, salmonella, ciguatera, campylobacteriosis, cholera, E. coli, and vibrio

During the month of August, influenza and influenza-like illness (ILI) activity continued to circulate at low levels nationally. Statewide activity has remained low, ILI activity is expected to increase over the coming weeks as we head into the fall months.. Florida reported local ILI with the peak of the season to have passed in week 8. There were no positive influenza tests detected by the Bureau of Public Health Laboratories in recent weeks in Broward County. Broward influenza activity peaked in week 52 and remains sporadic.

Figure 2. ESSENCE ILI Visits, Broward, 2016-2017

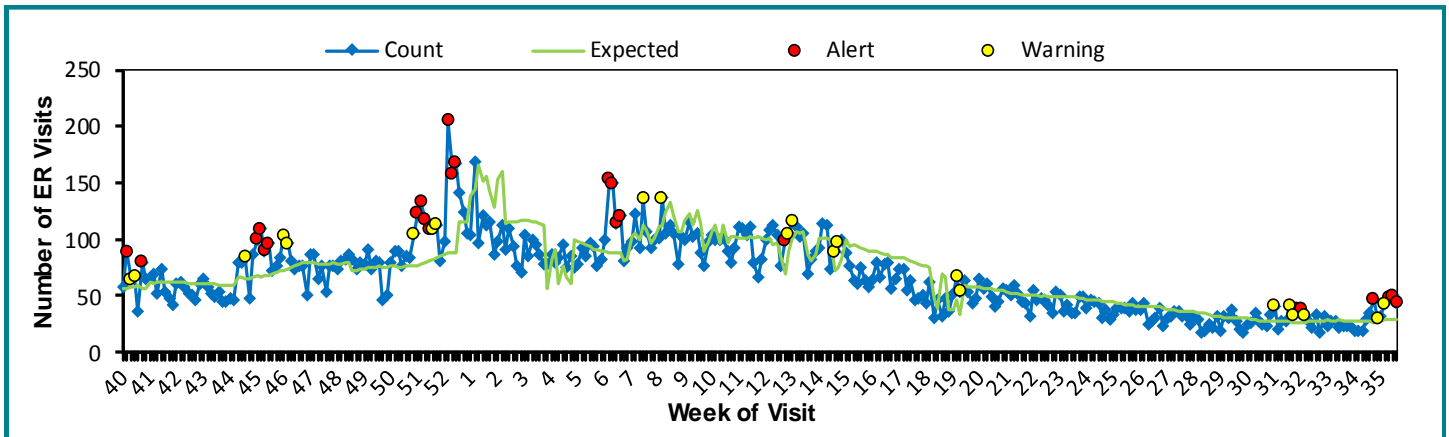


Figure 3. ESSENCE Reported ILI Visits, Broward, 2016-2017

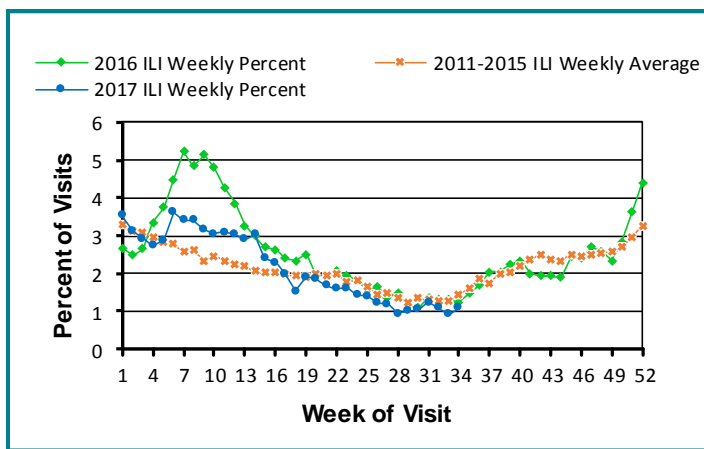
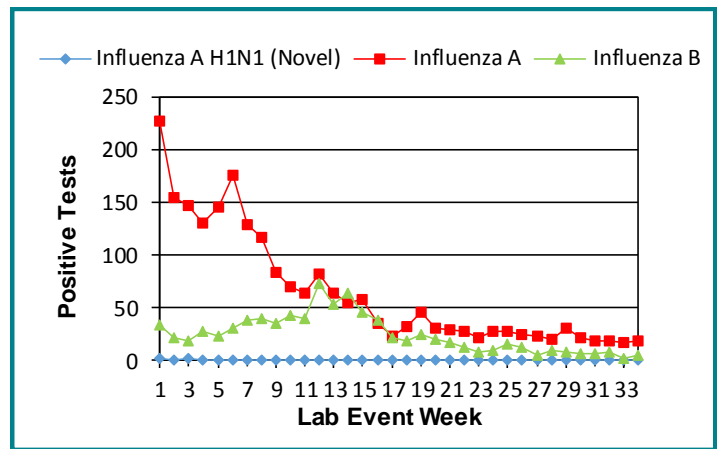


Figure 4. Merlin Reported Circulating Flu Types, Broward, 2017



Summary of Influenza and Respiratory Diseases Data

The number of visits to the emergency department for ILI was decreasing and was below the number of expected visits at this time for the month of August (week 31 to week 34) with three alerts and five warnings (Fig. 2). The percentage of emergency department visits due to ILI was decreasing, and was at lower levels when compared to the weekly average for the last five years (Fig. 3). According to Merlin Flu Lab Reports, the number of positive tests for Influenza A has decreased and was similar to the number of positive tests for Influenza B. Positive results for Influenza B were decreasing, compared to the month of July (Fig. 4).

Influenza Prevention Recommendations

Florida Department Health in Broward County recommends that everyone take precautions to prevent the spread of influenza. The flu is a contagious disease, caused by the influenza virus, and spreads to others when infected persons cough, sneeze or talk. Common symptoms of the flu include: fever (usually high), headache, extreme tiredness, cough, sore throat, runny or stuffy nose, muscle aches, nausea, vomiting, and diarrhea (more common among children than adults). Influenza vaccines have protected millions of people safely for decades. The CDC recommends an annual flu vaccine as the first and best way to protect against influenza. This recommendation is the same even during years when the vaccine composition (the viruses the vaccine protects against) remains unchanged from the previous season. Everyone 6 months and older is encouraged to get vaccinated against the flu even if they got vaccinated last season.

Other recommendations include:

- Wash your hands often with soap and water or an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose, or mouth.
- Stay home when you are sick, keep sick children home and check with a health care provider, as needed.
- Do not share eating utensils, drinking glasses, towels or other personal items.
- Avoid close contact with people who are sick, if possible.

