

April, 2016

Sumter County Quarterly Epidemiology Report

Volume 2, Issue 3

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Disease Summary

In the first quarter of 2016 Sumter County Epidemiology investigated and or recorded 102 individual reportable diseases along with investigating four gastrointestinal (GI) and one influenza outbreak, in a correctional facility.

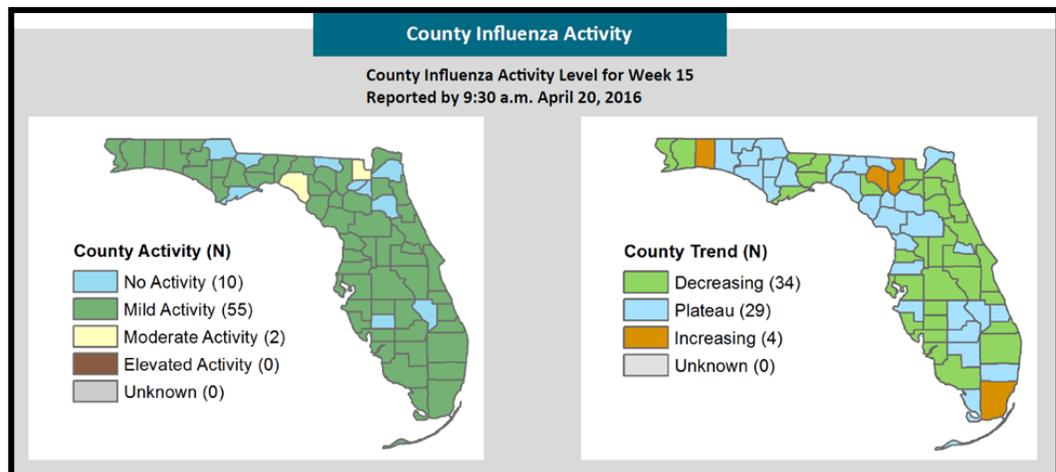
Flu Season

According to the Florida Department of Health's "Flu Review" reports of influenza and influenza-like illness (ILI) are on the decline both state and nationwide. Florida's 2015-2016 influenza season peaked between weeks 7 and 11, with the influenza A 2009 (H1N1) being the predominately circulating strain. The CDC recommends

Notably, all four GI outbreaks were caused by norovirus GII (more on norovirus found on pg 2). Locations of outbreaks ranged from restaurants to medical facilities. Other notable investigations include one case of imported hepatitis A, and two cases of shiga-toxin producing *E. coli*.

influenza vaccination as long as there is still virus circulating, so while it is late in the influenza season and activity is on the decline, it is not too late to be vaccinated.

For more information about influenza visit www.floridahealth.gov/floridaflu



Food Recalls

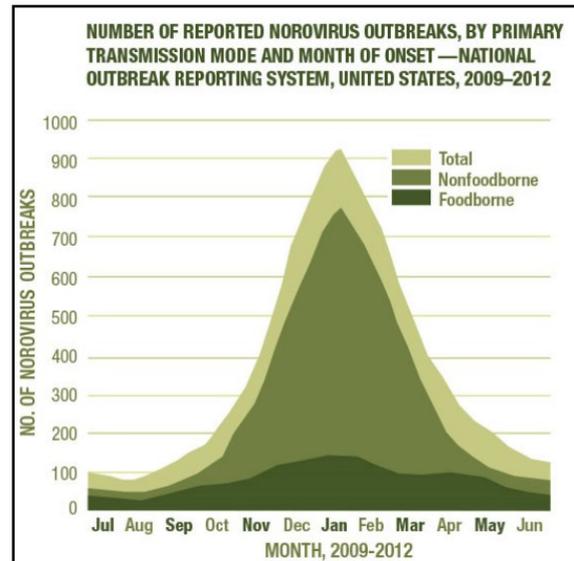
In the last 30 days the following food recalls were issued. More information can be found at, <http://www.floridahealth.gov/>

Brand Names	Food	Date of Recall	Health Risk
OLMA-XXI	Norven Herrin in Oil	4/14/16	Listeria
Alimentos Congelados, S.A	Frozen Broccoli Cuts	4/1/16	Listeria
Gerber	GERBER Organic 2nd Food Pouches	3/24/16	Package defect
Tri-Union Seafoods LLC	Canned Chuck Light Tuna	3/17/16	Unknown
Texas Star Nut & Food Company	Pistachio nuts	3/14/2015	Salmonella

Norovirus

In the past sixty days nearly 25 norovirus outbreaks, affecting over 200 individuals, have been reported across Florida. This includes 3 outbreaks in Sumter County alone. October through April of each year tends to be peak season for norovirus activity. It is important to remember that prompt identification of cases along with sound infection control procedures are crucial steps in prevention and control of norovirus outbreaks.

Under F.A.C. 64D-3 all outbreaks are reportable to the Florida Department of health. Reporting not only helps with disease surveillance, the Florida Department of Health can assist with sample collection, patient interviews, product trace-back, and diagnostic testing.



Courtesy of the CDC

Zika Virus

Background:

Zika fever, a dengue-like illness caused by a mosquito-borne flavivirus, has been identified in numerous countries in



Central and South America, American Samoa, Mexico, Puerto Rico, the U.S. Virgin Islands, and other Caribbean islands (areas with active local Zika virus can be found here: www.cdc.gov/zika/geo/index.html). Outbreaks have previously been reported in Africa, Southeast Asia, and the Pacific Islands. The Ministry of Health of Brazil has reported an increase in the number of babies born with microcephaly and other poor pregnancy outcomes in areas experiencing Zika virus outbreaks. Further, the CDC now reports a causal link between Zika virus infection during pregnancy and birth defects, such as microcephaly.

Transmission:

Transmission occurs through the bite of an infected mosquito. Perinatal, in utero, sexual and transfusion transmission have also been reported. Suspect cases should be advised to avoid mosquito bites while ill to prevent infection of local mosquitoes. Potentially infected men with pregnant partners should either abstain from sex (i.e., vaginal intercourse, anal intercourse, or fellatio) or use condoms during intercourse for the duration of the pregnancy.

Incubation period:

Incubation period is approximately 2 to 14 days.

Clinical Presentation:

Only about 1 in 5 people infected with Zika virus are symptomatic. Signs and symptoms of Zika fever may include:

- Acute fever (often low grade)
- Conjunctivitis
- Retro-orbital pain
- Maculopapular rash
- Myalgia
- Vomiting

Infection with other arboviral diseases should not be ruled out in suspect and or confirmed Zika patients (e.g. dengue, chikungunya).

It is recommended that both symptomatic and asymptomatic pregnant women, with a history of recent travel to Zika impacted counties, be screened for infection.

Zika fever is now reportable **upon immediate suspicion** (previously next business day).

Please Contact FDOH Sumter Epi with Questions or disease reports at:

PHONE: 352-569-3115

FAX: 352-512-6555

Florida Department of Health in Sumter County

Reportable Disease Count Year to Date 2016



Disease Category	Cumulative (YTD)			Cumulative (YTD)	
	2016	2015	Expected	2016	2015
A. Vaccine Preventable Diseases					
Pertussis	-	-	0	96	84
Varicella	-	-	0	243	219
B. CNS Diseases & Bacteremias					
H. Influenzae	1	1	1	77	46
Strep Pneumoniae, Invasive, Drug Resistant	-	1	0	74	47
Strep Pneumoniae, Invasive, Susceptible	1	1	0	152	99
C. Enteric Infections					
Campylobacteriosis	5	2	3	803	753
Cryptosporidiosis	2	2	2	119	141
Escherichia Coli Shiga Toxin +	2	1	2	151	90
Giardiasis	1	1	1	238	227
Salmonellosis	4	4	5	928	778
D. Viral Hepatitis					
Hepatitis A	1	-	0	24	22
Hepatitis B, Acute	-	-	1	129	104
Hepatitis B, Chronic	4	5	5	1262	1350
Hepatitis C, Acute	1	1	1	61	38
Hepatitis C, Chronic	79	66	60	6352	5988
E. Vector Borne, Zoonoses					
Rabid Animals	-	-	0	13	20
Lyme Disease	1	-	1	64	16
Dengue Fever	-	-	0	30	9
Chikungunya	-	-	0	6	55
Zika Fever	-	-	-	92	-
F. Others					
Creutzfeldt - Jakob Disease (CJD)	-	-	1	2	11
Legionellosis	-	-	0	68	69

EPI Quiz Question



What type of laboratory testing is recommended by the CDC for the diagnosis of Lyme disease?



(Answer on pg 4.)



Ixodes scapularis "Deer Tick",

Courtesy of the CDC



(Click here to learn more)



MISSION :

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

VISION :

To be the *Healthiest State* in the Nation

VALUES (ICARE) :

- I**nnovation: We search for creative solutions and manage resources wisely.
- C**ollaboration: We use teamwork to achieve common goals & solve problems.
- A**ccountability: We perform with integrity & respect.
- R**esponsiveness: We achieve our mission by serving our customers & engaging our partners.
- E**xcellence: We promote quality outcomes through learning & continuous performance improvement.



Epi Quiz Answer



What type of laboratory testing is recommended by the CDC for the diagnosis of Lyme disease?

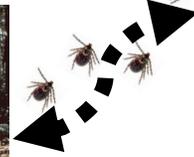
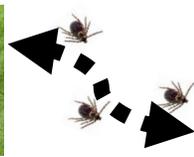
EIA/IFA with Reflex to Immunoblot

Currently the CDC recommends using a two-tier testing approach when it comes to Lyme disease diagnosis. This two-step testing approach, which can be done using the same blood sample, helps to decrease the number of false positives received.

Step one consists of a test called an EIA (enzyme immunoassay) or an IFA (indirect immunofluorescence assay).

A negative EIA/IFA means no further testing is recommended. If the EIA/IFA is positive or indeterminate/equivocal, the second step of the two-tier testing should be performed.

The **second step** consists of an immunoblot, most commonly a Western blot test. The immunoblot test can detect both IgM and IgG Lyme antibodies. Both the EIA/IFA results and the immunoblot results must be positive for a result to be considered positive. Adjacent is a testing algorithm developed by the CDC to help practitioners better understand the two-tiered testing process.



Two-Tiered Testing for Lyme Disease

