



Epi Watch

A Monthly Epidemiology Newsletter



Division of Disease Control
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To report diseases or request information call:
(Mon-Fri, 8-5, Area code 727):

Epidemiology	824-6932
Hepatitis	824-6932
HIV/AIDS	824-6964
Immunizations	824-6936
STD	824-6911
Tuberculosis	824-6953
Non-business hours	824-6900

Epi Watch is a monthly newsletter produced and distributed by the Pinellas County Health Department Epidemiology Program.

SURVEILLANCE SUMMARY - 2004
DISEASE CONTROL DIVISION

The prevention and control of communicable diseases continues to be a top priority for the Pinellas County Health Department (PCHD). In 2004, the PCHD enhanced its public health preparedness activities, strengthened disease surveillance programs, and increased its epidemiologic and investigative capabilities.

Rates of enteric diseases, such as giardiasis, hepatitis A, salmonellosis, and shigellosis, decreased 37% in 2004. The rate decreases ranged from 16% for salmonellosis to 63% for shigellosis. The county rates were lower than the state rates. Hepatitis A cases have continued to decline with only 12 reported cases (1.26 cases per 100,000 people), 5 of which had a history of travel to endemic countries. Prompt reporting of cases from community partners and thorough investigation by the PCHD has helped to prevent more cases and outbreaks.

Rates of hepatitis B and C have increased slightly, possibly due to active case finding and increased reporting of cases. Approximately 2,500 hepatitis A and hepatitis B vaccines were administered in 2004 to high-risk individuals in the community in an attempt to reduce viral hepatitis activity.

The rate of pertussis decreased 38% in 2004, but remained greater than the state rate. The majority of cases were in the 10-19 age group, with single cases in age groups 1-4 and 50-59 years. Exposure to cases of pertussis in older children and adults, whose immunity to pertussis has waned, continues to be a significant risk factor for infants at high risk for pertussis complications.

During 2004, 10 cases (1.05 cases per 100,000 people) of *Vibrio* infections were reported compared to 8 (0.84 cases per 100,000 people) reported cases in 2003. Infections, all in adults over 40 years of age, were caused by *V. parahaemolyticus* in 3 of the cases and by *V. vulnificus* in 4 of the cases. Most of these infections were acquired via wounds associated with seawater exposure and raw oyster consumption.

Cases of tuberculosis decreased 36.4% in 2004, compared to 2003. There were 35 cases of tuberculosis reported in 2004, 20 less cases than in 2003. Chlamydia and gonorrhea rates continue to remain high. Although syphilis rates have declined, prevention and control programs continue to be a high priority as many of the cases represent repeat infections within the same group of high-risk individuals. The rate of HIV infections has dropped slightly. HIV prevention and control efforts have expanded and many outreach programs now include hepatitis and STD screenings as well as services such as glucose, cholesterol and blood pressure screenings.

The Syndromic Tracking and Reporting System (STARS), used to track specific syndromes in the county hospitals emergency departments, maintained a rate of approximately 20,000 entries per month throughout the year. Cooperation between the PCHD and the 10 participating hospitals provides information that may indicate an increase or outbreak of disease, or identify a bioterrorism event at the earliest possible stage. This valuable public health tool is undergoing an update by the Hillsborough County Health Department to automate the data input at the hospital level, eliminating the need for manual data entry. This will improve efficiency as well as increase the quality of the data received.

Influenza activity has been low throughout Pinellas County. While there were no laboratory confirmed cases reported in the beginning of the 2004-2005 season, 8 cases of Influenza A have been confirmed since December 21st. Vigilance is important as we move further into "flu season." Vaccination against influenza in January will still offer protection because the peak of the season does not generally occur until mid-February. The PCHD now offers influenza vaccine to high-risk individuals, including adults over the age of 50, at the St. Petersburg, Pinellas Park, and Clearwater Centers.

The PCHD would like to thank our community partners for continued support and assistance in disease reporting and surveillance activities and look forward to another successful year of collaborative efforts to promote, protect, and improve the health of residents and visitors of Pinellas County.

"The reason for collecting, analyzing, and disseminating information on a disease is to control that disease. Collection and analysis should not be allowed to consume resources if action does not follow." Foeger, W.H. et al. (1976). Int. J of Epidemiology, 5:29-37.

NA = Not Available

Selected Reportable Diseases in Pinellas County

Disease	2004 December	2004 Year-to-Date	2003 Year-to-Date	2003 Total
AIDS	51	284 – thru 12/2	179	179
Animal Bite, PEP Recommended	8	59	62	62
Animal Rabies		4	6	6
Arboviral Illness (Human):				
Dengue			1	1
Eastern Equine Encephalitis				
St. Louis Encephalitis				
West Nile Virus				
California/LaCrosse		1		
Anthrax				
Botulism				
Campylobacteriosis	3	46	47	47
Chlamydia	221	2,376	2,312	2,312
Creutzfeldt-Jakob disease (CJD)	1	2		
Cryptosporidiosis	2	7	3	3
Cyclosporiasis	1	1		
<i>E. coli</i> O157:H7		2	3	3
Giardiasis	2	28	39	39
Gonorrhea	121	1,346	1,305	1,305
<i>H. influenzae</i> :				
Meningitis				
Pneumonia		1		
Primary bacteremia		5	2	2
Epiglottitis		1		
Hepatitis, Acute Viral:				
A	2	12	18	18
B	8	48	44	44
C	1	14	11	11
Non-A, Non-B		5	2	2
Hepatitis B:				
Perinatal			1	1
Pregnant woman +HBsAg	1	26	36	36
HIV	30	270 – thru 12/2	278	278
Legionellosis	1	16	16	16
Listeriosis			3	3
Lyme Disease		4	6	6
Malaria		4	4	4
Meningitis:				
Group B Strep		1		
Listeria monocytogenes				
S. pneumoniae		1	1	1
Other bacterial		2	7	7
Meningococcal Disease	1	4	4	4
Mercury Poisoning		1	1	1
Mumps				
Pertussis	1	15	24	24
Plague (Bubonic & Pneumonic)				
Salmonellosis	14	170	203	203
Shigellosis	3	19	46	46
Smallpox				
Streptococcal Disease, Inv. Group A	1	8	4	4
<i>S. pneumoniae</i> , Inv. Disease (DR)	3	22	28	28
<i>S. pneumoniae</i> , Inv. Disease (NDR)	1	21	14	14
Syphilis: Total	5	91	126	126
Infectious (P and S)	4	34	49	49
Early Latent	1	36	39	39
Late Syphilis(Late Latent; Neurosyphilis)		21	38	38
Congenital				
Tuberculosis	1	35	55	55
<i>Vibrio</i> infections		10	13	13

Provisional cases reported by the Pinellas County Health Department. Blank cells indicate no cases reported.

For a complete list of reportable diseases and guidelines for reporting please visit:

http://www.myflorida.com/disease_ctrl/epi/surv/lor8_4.pdf

