

Epidemiology Monthly Surveillance Report

Florida Department of Health in Orange County

Hepatitis A Orange County Updates

The non-travel associated, locally acquired, person-to-person outbreak of hepatitis A continues to grow in Orange County and in certain areas of Florida. Since May of 2018, Orange County has been experiencing a sharp increase in these cases of hepatitis A. This year, the Florida Department of Health in Orange County (DOH-Orange) has investigated 75 laboratory-confirmed, non-travel-associated hepatitis A cases—66% of whom are male, 88% non-Hispanic, and 85% white. This represents a >5000% increase over the prior 5year average of 1.4 cases per year. Risk factors, where known, are 24% men who have sex with men (MSM), 63% drug users, 35% homeless, and 44% coinfected with hepatitis B or C. Of those investigated, DOH-Orange successfully interviewed 80%.

Statewide, Florida's cases are beginning to mirror national trends as local and state health departments across the country have worked closely with the Centers for Disease Control and Prevention (CDC) to respond to similar outbreaks since March 2017. Between 2012 – 2016, an average of 120 hepatitis A cases were reported to the Florida Department of Health (DOH) annually. In 2017, 276 hepatitis A cases were reported to DOH. As of December 3, 2018, 414 hepatitis A cases have been reported to DOH. Several Florida counties, including Orange County, are experiencing increases in hepatitis A among drug users, homeless persons, men who have sex with men, and other persons who have contact with infected persons.

Hepatitis A is a vaccine-preventable, communicable disease of the liver caused by the hepatitis A virus (HAV). Hepatitis A is an acute infection usually with abrupt symptom onset of fever, malaise, anorexia, nausea, and abdominal pain. Jaundice, dark-colored urine, or light- colored stools might be present at onset or might follow constitutional symptoms within a few days. It can range from a mild illness lasting a few weeks to a severe illness lasting several months. Infection results in lifelong immunity, which can be demonstrated by detecting anti-HAV antibody in serum. Hepatitis A is transmitted by ingesting the virus from objects, food, or drinks contaminated by small, undetected amounts of stool from an infected person. Hepatitis A can also spread from close personal contact with an infected person such as through sex or caring for someone who is ill. The hepatitis A virus is able to survive outside the body for months. High temperatures, such as boiling or cooking food or liquids for at least 1 minute at 185°F (85°C), kill the virus.

The best way to prevent hepatitis A is through vaccination with the hepatitis A vaccine. A single dose is highly effective in preventing hepatitis A virus infection and a second dose of vaccine results in long-term protection. Practicing good hand hygiene – including thoroughly washing hands after using the bathroom, changing diapers, and before preparing or eating food – plays an important role in preventing the spread of hepatitis A. Click here for the hepatitis A health advisory issued by the Florida Department of Health encouraging vaccinations.

Resources:

Florida Department of Health Hepatitis CDC Hep

CDC Hepatitis A

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Influenza Surveillance (data from Florida Flu Review)

Florida

- In week 47, influenza and ILI activity increased statewide. Influenza activity is expected to increase further as the season progresses.
- No new influenza-associated pediatric deaths were reported in week 47. Two influenza-associated pediatric deaths have been confirmed since the start of the 2018-19 influenza season.
- People who have not yet been vaccinated for the 2018-19 season should do so as soon as possible. Influenza vaccines are safe and are the best protection from influenza and its potentially severe complications.

Orange County

- No new influenza-like illness outbreaks were reported in Orange County for November 2018.
- There was an uptick in influenza activity for week 47 in Orange County.



Influenza-like Illness from Emergency Department Visits in Orange County, 2013 to 2018



Florida Department of Health InfluenzaCDC: Influenza (Health Professionals)CDC: Weekly US Influenza Surveillance ReportCenter for Disease Control and Prevention Weekly Influenza Activity Report



Gastrointestinal Illness Surveillance

Select Reportable Enteric Diseases in Orange County, Florida, July 2016 to November 2018



Gastrointestinal Illness Points of Interest:

- Enteric reportable disease cases were normal for the month of November.
- In November, 27 foodborne illness complaints were investigated by DOH Orange County from various sources such as direct reporting, online reporting, social media, Department of Health, and crowd-sourced web-based reporting.



Arboviral Surveillance

International

- There is a Level 2 (Alert) Travel Health Notice from the CDC for multiple countries in Africa, the Caribbean, Central and South America, Southeast Asia, and Pacific Islands related to Zika virus transmission and an association with poor pregnancy outcomes. Pregnant women should consider postponing travel to these areas.
- There is also a Level 2 Travel Health Notice for Brazil and a Level 1 Travel Health Notice in Nigeria related to the transmission of yellow fever virus.

Florida

- Forty-seven cases of **dengue** associated with international travel have been reported year to date.
- Four cases of **chikungunya** have been reported year to date in persons that had international travel.
- One human case of **West Nile virus** infection was reported this week in Washington County. In 2018, WNV positive samples of were reported from 29 humans, three blood donors, 13 horses, one zebra, one red-shouldered hawk, 5 crows, 29 mosquito pools, and 744 sentinel chickens were reported from 39 counties.
- Positive samples of **Eastern equine encephalitis** were reported in three humans, 52 horses, one mule, one donkey, one owl, 2 emus, 5 emu flocks, 3 mosquito pools, and 147 sentinel chickens from thirty-three counties in 2018.
- Charlotte, Clay, Columbia, Gadsden, Lake, Leon, Manatee, Marion, Martin,, Miami-Dade, Okeechobee, Orange, Putnam, Sarasota, St. Johns, Suwannee, Taylor, Volusia, Walton, and Washington counties are currently under a mosquito-borne illness advisory. Bay, Duval, Leon, Levy, and Nassau counties are currently under a mosquito-borne illness alert. No other

WNV Positive Equine (Total = 2) WNV Positive Chickens (Total = 11) One Positive Human with Locally Acquired WNV Under Mosquito-borne Illness Aleris

Orange County

- No locally acquired cases of Zika virus, West Nile virus, dengue virus, chikungunya virus, St. Louis encephalitis virus, or Eastern equine encephalitis virus have been identified in Orange County in 2018.
- Eleven cases of **Zika fever** have been reported year to date in individuals with travel history to a country or area experiencing Zika virus activity.
- We are no longer offering free Zika testing at DOH-Orange for insured pregnant women. Testing for Zika may be ordered through commercial labs. Please notify DOH-Orange of symptomatic patients with a history of travel. Please refer to the following <u>letter</u> regarding updates on Zika virus testing at BPHL.

Arboviral Resources:

Weekly Florida Arboviral Activity Report (Released on Mondays)

Orange County Mosquito Control

Additional Resources:

<u>Florida Department of Health Zika</u>

Florida Department of Health Mosquito-Borne and Other Insect-Borne Diseases Information

Florida Department of Health Mosquito-Borne Disease Education Materials

Outbreaks in Orange County

- In November 2018, the following outbreaks were investigated:
 - Two gastrointestinal outbreaks in a restaurant a setting
 - One gastrointestinal outbreak in a long term care facility
 - One respiratory outbreak in a hotel setting
 - One respiratory outbreak in a long term care facility

Number of Outbreaks Reported in Orange County, FL, by Month from 2013-2018



*** All Data In This Surveillance Report are Preliminary ***



Reminder: Outbreaks of any disease, any case, cluster of cases, or exposure to an infectious or non-infectious disease, condition, or agent found in the general community or any defined setting (e.g., hospital, school, or other institution) not listed <u>here</u> of urgent public health significance should be reported.

For more information on reporting, please follow this link.: Reportable Disease Form



Disease		ORANGE				All Counties			
		nber	Cumulative (YTD)		November		Cumulative (YTD)		
	204.0	Median (2013 -	2040	Median (2013 -	2040	Median (2013 -	204.0	Median (2013 -	
	2018	201`7)	2018	2017)	2018	2017)	2018	2017)	
Amebic Infections (Balamuthia mandrillaris)	0	0	0	0	0	0	3	0	
Anaplasmosis - HGA (Anaplasma phagocytophilum)	0	0	2	0	0	0	19	8	
Arboviral Disease: Other	0	0	0	0	0	0	1	0	
Arsenic Poisoning	0	0	0	0	0	0	13	12	
Botulism: Infant	0	0	0	0	0	0	1	0	
Brucellosis	0	0	0	0	0	1	15	8	
California Serogroup Virus Neuroinvasive Disease	0	0	0	0	0	0	3	0	
	17	g	200	115	333	269	4492	3301	
Carbon Monoxide Poisoning	0	0	6	13	14	18	233	242	
	0	0	1	0	2	2	200	0	
	0	0	1	0	3	2	0	9	
	0	0	0	0	0	0	0	3	
	0	0	3	2	5	3	74	48	
Creutzfeldt-Jakob Disease (CJD)	0	0	0	1	1	2	18	24	
Cryptosporidiosis	3	2	28	38	58	54	574	558	
Cyclosporiasis	0	0	8	2	1	0	79	36	
Dengue Fever	0	0	2	4	20	6	65	73	
Dengue Fever: Severe	0	0	0	0	1	0	4	0	
Eastern Equine Encephalitis Neuroinvasive Disease	0	0	0	0	0	0	3	1	
Ehrlichiosis - HME (Ehrlichia chaffeensis)	0	0	1	0	5	1	45	22	
Escherichia coli: Shiga Toxin-Producing (STEC) Infection	5	1	63	18	48	38	837	477	
Elavivirus Disease and Infection	0	0	0	0	1	0	3	0	
Giardiasis: Acuto	3	3	55	63	80	81	1042	1021	
Giardiasis. Acute	2	1	22	17	22	16	200	247	
	2	1	22	17	23	10	300	247	
Hansen's Disease (Leprosy)	0	0	0	0	0		21	17	
Hemolytic Uremic Syndrome (HUS)	0	0	0	1	0	1	9	1	
Hepatitis A	22	0	87	4	105	14	452	124	
Hepatitis B: Acute	4	0	34	16	61	43	740	483	
Hepatitis B: Chronic	28	36	457	404	407	383	4887	4586	
Hepatitis B: Perinatal	0	0	0	0	0	0	3	1	
Hepatitis B: Surface Antigen in Pregnant Women	2	2	26	52	17	35	357	452	
Hepatitis C: Acute	0	1	15	7	14	19	380	211	
Henatitis C: Chronic	181	111	1722	1149	1683	1976	21287	23165	
Henatitis C: Perinatal	0	0	1	0	1	0	18	0	
Henatitis D	0	0	1	0	0	0	10	1	
	0	0	0	0	0	1	-	F	
	0	0	0	0	0	1	5	5	
Influenza-Associated Pediatric Mortality	0	0	0	1	1	0	9	6	
Lead Poisoning	3	4	129	28	154	56	4180	841	
Legionellosis	3	1	46	23	43	22	644	321	
Leptospirosis	0	0	0	0	0	0	7	2	
Listeriosis	0	0	4	2	4	3	53	44	
Lyme Disease	0	1	3	5	11	18	176	193	
Malaria	1	0	4	7	9	6	68	61	
Measles (Rubeola)	0	0	0	0	0	0	15	5	
Meningitis: Bacterial or Mycotic	0	0	3	1	10	8	103	113	
Meningococcal Disease	1	0	4	2	1	5	24	23	
Mercury Poisoning	0	0	0	0	0	3	36	18	
Mumps	0	0	9	1	15	2	175	19	
Paratyphoid Fever (Salmonella Serotypes Paratyphi A B C)	0	0	0	0	0	0	1	6	
Pertussis	0	2	11	26	24	20	313	332	
Posticide Polated Illness and Injuny Acute	0	0	4	0	27	20	50	60	
O Equar: Aquita (Cavialla humatii)	0	0		0	0	0	20	2	
Q Fevel. Acule (Coxella bulletii)	0	5	64	70	0	0	2	2100	
Induico. Fucionide Expusule Disin Tavin Deigening	4	0	04	10	201	211	3710	3100	
	0	0	0	0	0	0	4	1	
Rocky injountain Spotted Fever and Spotted Fever Rickettsiosis	0	0	0	1	6	2	4/	25	
	0	0	0	0	0	0	0	1	
Salmonellosis	23	29	363	316	639	625	6639	5936	
Scombroid Poisoning	1	0	1	0	7	0	33	0	
Shigellosis	17	12	126	98	150	105	1403	1243	
Staphylococcus aureus Infection: Intermediate Resistance to Vancomycin (VISA)	0	0	0	0	0	0	2	4	
Strep pneumoniae Invasive Disease: Drug-Resistant	3	2	25	18	9	19	225	234	
Strep pneumoniae Invasive Disease: Drug-Susceptible	1	1	22	19	23	24	360	382	
Tetanus	0	0	0	0	0	0	0	3	
Tularemia (Francisella tularensis)	0	0	0	0	0	0	3	1	
Typhoid Feyer (Salmonella Serotype Typhi)	0	0	13	1	12	0	147	14	
Varicella (Chickenpox)	3	2	40	19	91	57	782	617	
Vibriosis (Grimontia hollisae)	0	0	0	0	1	0	6	2	
Vibriosis (Other Vibrio Species)	0	0	1	0	7	3	64		
	0	0	1	0	2	3	74	60	
Vibriasis (Vibria chalarsa Tura Nan O1)	0	0	3	2	3	4	1	10	
Vibriosis (Vibrio Cholerae Type Non-OT)	0	0	0	0		0	4	13	
	0	U	0	U	1	U	12	11	
VIDRIOSIS (VIDRIO MIMICUS)	0	0	0	0	0	0	0	8	
Vibriosis (Vibrio parahaemolyticus)	0	0	1	1	1	2	48	44	
Vibriosis (Vibrio vulnificus)	0	0	0	1	5	3	46	46	
West Nile Virus Neuroinvasive Disease	0	0	0	0	7	1	32	6	
West Nile Virus Non-Neuroinvasive Disease	0	0	0	0	0	0	9	2	
Zika Virus Disease and Infection- Non-Congenital	1	0	32	0	16	0	177	0	
	328	225	3643	2556	4417	4232	55606	49050	

Ongoing Ground Beef Recall

Its ground beef, again! The Food Safety and Inspection Service (FSIS) of the U.S. Department of Agriculture (USDA) has reissued an expansion of the October 4, 2018 ground beef recall due to an ongoing Salmonella Newport outbreak. The CDC and state public health officials are continuing to investigate illnesses associated with this widespread outbreak as USDA continues to identify additional product from other companies. On December 4, 2018, JBS Tolleson, Inc. recalled approximately 12, 093, 271 pounds of non-intact raw beef products, packaged from July 26 to September 7, 2018, that may be contaminated with Salmonella Newport.

Since the October 4 recall, epidemiologic investigation has identified 246 confirmed case-patients from 25 states with illness onset dates ranging from August 5 to October 16, 2018. No deaths have been reported and currently, no reported illnesses associated with this recall have been detected in Florida. The most common symptoms of salmonellosis are diarrhea, abdominal cramps, and fever within 12 to 72 hours after eating the contaminated product. The illness usually lasts 4 to 7 days.

Salmonella are prevalent and can be present in raw poultry and meat. Salmonella are not considered to be a contaminant in raw poultry and meat. In addition to discarding the product associated with this recall, consumers can protect themselves by ALWAYS cooking their raw meat to a safe internal temperature, which is measured by using a food thermometer. Adequate cooking kills the bacteria. Additionally, it is essential that everyone wash their hands after handling raw poultry or meat to avoid cross contamination. DOH-Orange recommends verifying that any ground beef products consumers may have in their household is not a part of the expanded ground beef recall. If products are identified, these should be thrown away or returned to the place of purchase.



USDA Recall Information

Other Disease Resources

In the structure of DOH-Orange, tuberculosis, sexually transmitted infections, and human immunodeficiency virus are housed in separate programs from the Epidemiology Program. We recognize the importance of these diseases for our community partners and for your convenience have provided a link for surveillance information on these diseases in Florida and Area 7 HIV & AIDS Program.

Resource: http://orange.floridahealth.gov/programs-and-services/index.html

Hospital linked to ESSENCE

Florida Hospital Centra Care Clinic linked to ESSENCE



Florida Department of Health: ESSENCE

Since 2007, the Florida Department of Health has operated the Electronic Surveillance System for the Early Notification of Communitybased Epidemics (ESSENCE-FL), a state-wide electronic bio-surveillance system. The initial scope of ESSENCE was to aid in rapidly detecting adverse health events in the community based on Emergency Department (ED) chief complaints. In the following years, ESSENCE capabilities have continually evolved to currently allow for rapid data analysis, mapping, and visualization across several data sources, including ED record data, Merlin reportable disease data, Florida Poison Information Network consultations, and Florida Office of Vital Statistics death records. The majority of the information presented in this report comes via ESSENCE. Florida currently has 228 emergency departments and 35 urgent care centers reporting to ESSENCE-FL for a total of 263 facilities.

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The Epidemiology Program conducts disease surveillance and investigates, controls, and prevents infectious diseases and conditions that are reported to DOH-Orange.

Surveillance is primarily conducted through passive reporting from the medical community as required by Chapter 381, Florida Statutes.

Data are collected and analyzed to track disease trend, and identify outbreaks and unusual occurrences for response and mitigation, to identify targets for prevention and reduction efforts.

In cooperation with the Office of Emergency Operations, the Epidemiology Program conducts syndromic and influenza-like-illness surveillance activities. Syndromic surveillance was added to the disease reporting process as an active method of determining activities in the community that could be early indicators of outbreaks and bioterrorism.

Our staff ensures that action is taken to prevent infectious disease outbreaks from occurring in Orange County communities and area attractions. Along with many public and private health groups, we work for the prevention of chronic and long-term diseases in Central Florida.

ALL DATA ARE PROVISIONAL

