



Epidemiology Monthly Surveillance Report

Florida Department of Health in Orange County

Locally Acquired Measles Cases Identified in Florida; Additional Measles Cases Also Reported

St. Lucie County:

On April 15th, the Florida Department of Health in St. Lucie County confirmed a local case of measles in an unvaccinated six-year-old child. On April 24th the Florida Department of Health confirmed a second case of locally acquired measles in St. Lucie County. The case investigations are ongoing, which include enhanced surveillance activities, contact tracing and monitoring, and active case finding.

Indian River County:

On April 18th, The Florida Department of Health in Indian River County reported 2 confirmed measles cases. Both cases are unvaccinated adults. The first case was internationally acquired, with the second case locally acquired in the same household.

On April 21st, The Florida Department of Health confirmed a third case of measles in an unvaccinated adolescent in Indian River County.

Investigations are ongoing in this county, which include enhanced surveillance activities, contact tracing and monitoring, and active case finding.

As of April 27th, there are 5 cases between these 2 counties.

Letter to Florida Health Care Providers:

In a [letter dated April 16th](#), Anna Marie Likos, MD, MPH, State Epidemiologist and Director, Division of Disease Control and Health Protection, urges colleagues to remain vigilant and to review what is known about measles, including signs and symptoms, and to:

“Identify, Isolate, and Inform”. The letter also includes the reporting procedure, a reminder regarding vaccination, laboratory testing guidelines, and a “Measles Practical Guide”.

Please call the Epidemiology Program at Florida Department of Health in Orange County (407-858-1420) if you have any questions, or to notify us of suspect cases.

[Florida Department of Health Measles](#) [CDC Measles](#)

[CDC: Provider Resources for Vaccine Conversations with Parents](#)

[CDC: Vaccines Do Not Cause Autism](#)

March, 2015

Volume 6, Issue 3

Points of Interest:

- Influenza activity is now at “Local”
- Measles Cases identified in Florida
- Confirmed Ebola Cases: March case count decreases from February

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Respiratory Disease Surveillance

Pertussis Surveillance

Florida

⇒ From January through March, there have been 84 cases of pertussis reported.

Orange County

⇒ 4 cases of pertussis have been reported among Orange County residents from January through March.

Age Group	Cases	
	Jan-Mar 2014	Jan-Mar 2015
Orange Co.		
00-04	5	3
05-19	2	0
20-34	0	1
35-54	0	0
55-74	0	0
75+	0	0
Unknown	0	0

Pertussis Cases in Orange County

Influenza Surveillance

National

⇒ For week 13 (March 29th-April 4th) the percentage of patients presenting with ILI in outpatient settings decreased to 1.8%, which is below the national baseline of 2.0%. ILI was above the baseline for 18 consecutive weeks this season. With flu activity persisting in some regions, overall, the flu season is winding down. Influenza B viruses are the predominant viruses currently reported.

⇒ Since December, highly pathogenic avian influenza H5N2 has been confirmed in commercial and backyard flocks in multiple states (excluding Florida). [USDA Animal and Plant Health Inspection Service](#)

Florida (for week 13: March 29th – April 4th)

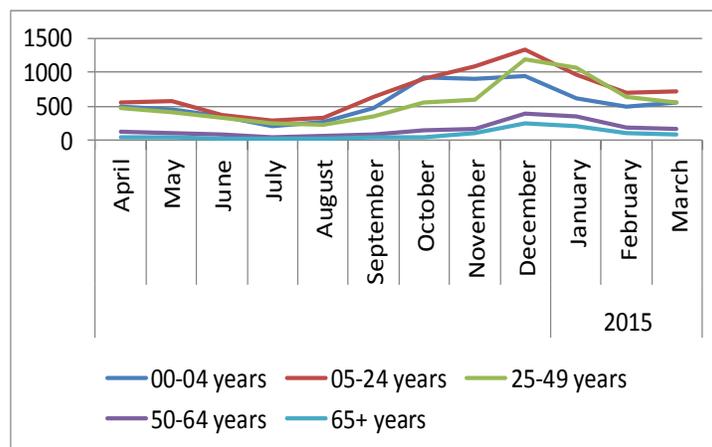
⇒ Statewide, flu activity is at “Local”. There is now low activity around the state.

⇒ Flu and ILI activity continue to decline.

⇒ No flu or ILI outbreaks were reported in week 13.

⇒ As with national trends, Flu B viruses are currently the most common. (data from [Florida Flu Review](#))

ESSENCE Emergency Department Visits of Influenza-like Illness by Age Group, Orange County, Florida, 2014-2015



Influenza Surveillance continued

Orange County

⇒ Orange County is reporting “mild” influenza activity for week 13 (March 29—April 4)

Percentage of Emergency Department visits classified as “ILI” in Orange County:
(data: ESSENCE)

Week	% ILI
13 (3/29-4/4)	2.66
12 (3/22-3/28)	2.72
11 (3/15-3/21)	3.39
10 (3/8-3/14)	3.49
9 (3/1-3/7)	3.58

Influenza Resources:

[Florida Department of Health Weekly Influenza Activity Report](#)

[Center for Disease Control and Prevention Weekly Influenza Activity Report](#)

Special Surveillance: Ebola

National

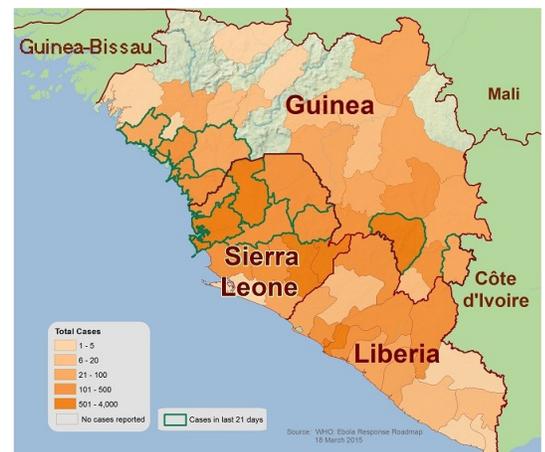
- ⇒ The American healthcare worker admitted to the NIH Clinical Center in Bethesda, Maryland on March 13 with Ebola virus disease was discharged on April 9th.
- ⇒ Ebola continues to represent a very low risk to the general public in the United States.
- ⇒ **Physicians should immediately call the local health department if a patient fits the criteria of an Ebola Patient Under Investigation** (Patient Screening Tool below).

International

Updated April 16, 2015:

Countries impacted include Guinea, Sierra Leone, and Liberia.

- ⇒ Case Count: **25,831**
- ⇒ Deaths: **10,699**
- ⇒ Laboratory Confirmed Cases: **14,841**
- ⇒ During the week 4/6/15 through 4/12/15, WHO reports there were 37 new confirmed cases from the affected countries: Guinea– 28, Sierra Leone– 9. There were no new cases reported in Liberia.



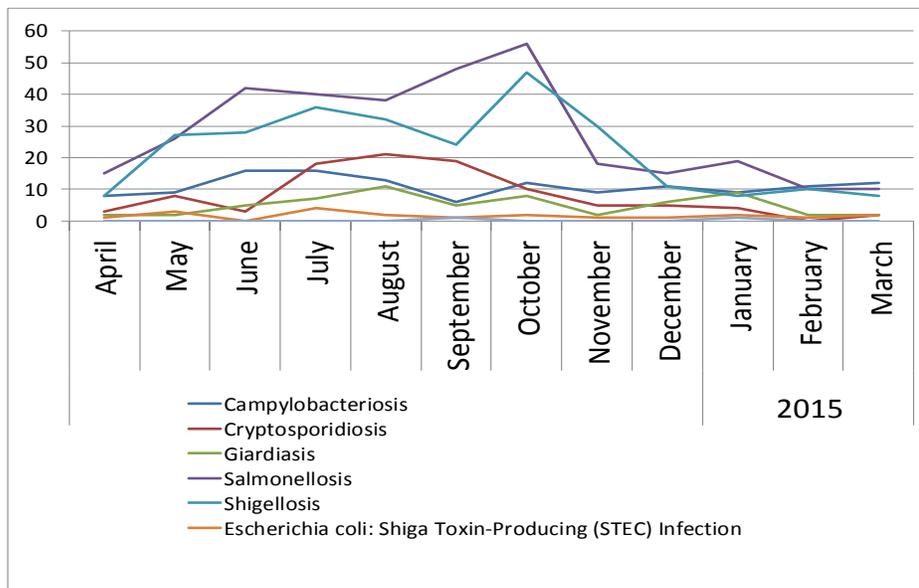
(Map Courtesy CDC)

Ebola Resources:

Patient Screening Tool: [Florida Department of Health](#) [Florida Department of Health EVD Resources](#)
 Centers for Disease Control and Prevention: [Ebola Information and Guidance](#)
 World Health Organization: [Global Alert and Response Situation Reports](#)

Gastrointestinal Illness Surveillance

Select Reportable Enteric Diseases in Orange County, Florida, April, 2014 to March, 2015



Gastrointestinal Illness Points of Interest:

- ⇒ In March, Campylobacter and Cryptosporidiosis cases increased slightly, while Salmonellosis and Giardiasis case numbers did not change. Shigellosis cases decreased slightly. July had the highest case numbers for STEC (4), over the past 12 months and 2 cases of STEC were reported in March.
- ⇒ During March, 18 foodborne illness complaints were reported to the Florida Department of Health in Orange County for investigation.
- ⇒ No lab-confirmed Norovirus foodborne outbreaks were reported in March in Orange County.

Gastrointestinal Illness Resources:

[Florida Online Foodborne Illness Complaint Form - Public Use](#)

[Florida Food and Waterborne Disease Program](#)

[Florida Food Recall Searchable Database](#)

[Florida Department of Health - Norovirus Resources](#)

[CDC: A-Z Index for Foodborne Illness](#)

[CDC: Healthy Water](#)

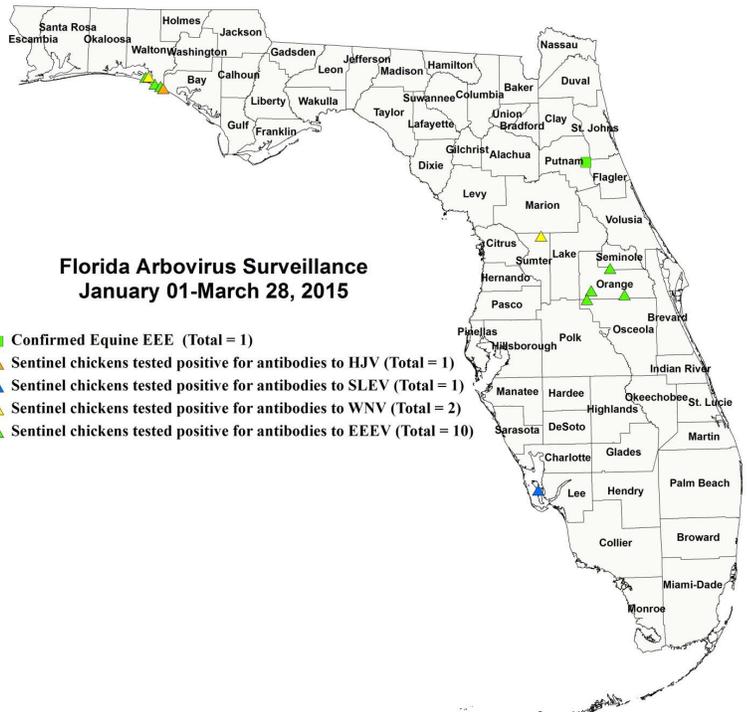


Arboviral Surveillance

January 1– March 28, 2015

Florida

- ⇒ For week 12 (March 22-28), no counties were under a mosquito-borne illness advisory or alert.
- ⇒ Two cases of imported dengue fever (international travel-associated) were reported in March. with onset in 2015 have been reported in Florida. There have been seven travel-associated cases reported in 2015.
- ⇒ One case of imported Chikungunya has been reported in March. Sixteen cases of imported Chikungunya have been reported in Florida with onset in 2015.
- ⇒ No cases of locally acquired dengue fever or chikungunya have been reported YTD
- ⇒ Nine cases of international travel-associated



Orange County

- ⇒ No locally-acquired cases of Dengue or Chikungunya reported.
- ⇒ One case of imported Chikungunya (international travel history two weeks prior to symptom onset) has been reported in February. There were no new cases reported in March.
- ⇒ No cases of imported Dengue were reported in 2015.

Arboviral Resources:

[Weekly Florida Arboviral Activity Report \(Released on Mondays\)](#)

[Orange County Mosquito Control](#)

Chikungunya Resources

[Florida Department of Health Chikungunya Information](#)

[CDC Chikungunya Information](#)

[CDC Chikungunya MMWR](#)



Disease	ORANGE			
	March		Cumulative (YTD)	
	2015	Mean, 5 yr	2015	Mean, 5 yr
Brucellosis	0	0	0	0.2
Campylobacteriosis	12	6.4	37	22.6
Carbon Monoxide Poisoning	3	0.4	3	1.2
Chikungunya Fever	0	0	1	0
Cholera (Vibrio cholerae Type O1)	0	0	2	0
Ciguatera Fish Poisoning	0	0	1	0.2
Creutzfeldt-Jakob Disease (CJD)	0	0	0	0
Cryptosporidiosis	3	1.6	9	5.8
Cyclosporiasis	0	0	0	0.2
Dengue Fever	0	0.4	0	1.6
Escherichia coli: Shiga Toxin-Producing (STEC) Infection	1	1.4	5	3
Giardiasis: Acute	7	5.4	18	15
Haemophilus influenzae Invasive Disease	1	1.6	2	3.8
Hansen's Disease (Leprosy)	0	0	0	0
Hantavirus Infection: Non-Pulmonary Syndrome	0	0	0	0
Hantavirus Pulmonary Syndrome	0	0	0	0
Hemolytic Uremic Syndrome (HUS)	0	0	1	0.2
Hepatitis A	0	0.2	1	1.4
Hepatitis B: Acute	2	1	4	3.2
Hepatitis B: Chronic	63	33.8	149	88
Hepatitis B: Perinatal	0	0.2	0	0.2
Hepatitis B: Surface Antigen in Pregnant Women	8	4.4	23	14.2
Hepatitis C: Acute	2	1	2	3
Hepatitis C: Chronic	170	146	482	410.4
Hepatitis D	0	0	0	0
Hepatitis E	1	0.2	1	0.2
Hepatitis G	0	0.2	0	0.2
Influenza-Associated Pediatric Mortality	0	0	0	0.2
Lead Poisoning	4	1	7	9.2
Legionellosis	1	1.4	5	3
Listeriosis	0	0	0	0.6
Lyme Disease	1	0.4	1	0.8
Malaria	0	1.2	1	2.4
Measles (Rubeola)	0	0.2	0	1
Meningitis: Bacterial or Mycotic	0	1	0	2.8
Meningococcal Disease	0	0	0	0
Mercury Poisoning	0	0	0	0
Mumps	0	0	0	0
Pertussis	1	2.4	4	6
Pesticide-Related Illness and Injury: Acute	0	0.2	0	0.4
Rabies: Possible Exposure	9	7.8	23	24
Rocky Mountain Spotted Fever and Spotted Fever Rickettsiosis	0	0	0	0
Salmonellosis	11	11	41	41.6
Shigellosis	11	5.2	26	13.6
Strep pneumoniae Invasive Disease: Drug-Resistant	1	4.8	2	14.8
Strep pneumoniae Invasive Disease: Drug-Susceptible	6	3.4	9	10.4
Typhoid Fever (Salmonella Serotype Typhi)	0	0	0	0.4
Varicella (Chickenpox)	0	2.4	2	9.8
Vibriosis (Vibrio alginolyticus)	0	0	0	0
Vibriosis (Vibrio cholerae Type Non-O1)	0	0	0	0
Vibriosis (Vibrio parahaemolyticus)	0	0.2	0	0.2
Vibriosis (Vibrio vulnificus)	0	0	0	0
Total	318	249.6	862	722

Diseases with highest number of cases are highlighted in gray

Multistate Outbreak of Listeriosis Linked to Blue Bell Creameries Products: Company Voluntarily Expands Recalls

On Monday, April 20th, Blue Bell Creameries voluntarily expanded its recall to include all products made from all of its facilities. Florida is one of the states involved in the recall. As of April 21th, there have been no reported illnesses in Florida associated with this recall.

Sampling undertaken by The Food and Drug Administration (FDA) at both the Broken Arrow, Oklahoma and the Sylacauga, Alabama plants resulted in the recovery of *Listeria monocytogenes*.

Blue Bell has also recovered *Listeria* from their Brenham, Texas plant as a result of an enhanced sampling program initiated by the company.

As of April 21st, the case count is 10, involving: Arizona (1), Kansas (5), Oklahoma (1), and Texas (3). Three deaths have been reported from Kansas.

CDC: [Multistate Outbreak Of Listeriosis Linked to Blue Bell Creameries](#) [Blue Bell](#) [FDA Outbreaks](#)

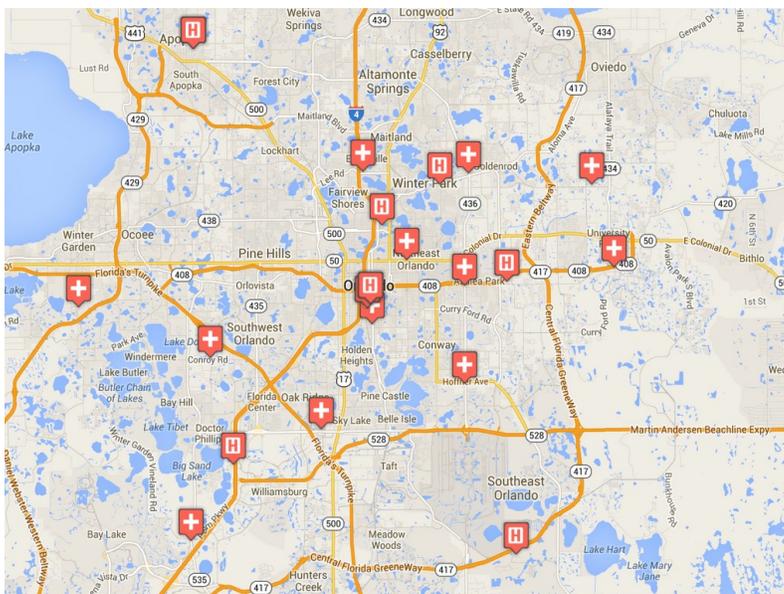
Other Disease Resources

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 links for surveillance information on these diseases in [Florida](#) and [Orange County](#).



Florida Department of Health: ESSENCE

-  Hospital linked to ESSENCE
-  Florida Hospital Centra Care Clinic linked to ESSENCE



Since 2007, the Florida Department of Health has operated the Early Notification of Community-based Epidemics (ESSENCE), 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 past seven 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 from ESSENCE. Florida currently has 186 emergency departments and 30 urgent care centers (Florida Hospital Centra Care) reporting to ESSENCE-FL for a total of 216 facilities.

Florida Department of Health in Orange

Epidemiology Program
6101 Lake Ellenor Drive
Orlando, Florida 32809

Phone: 407-858-1420
Fax: 407-858-5517
<http://orange.floridahealth.gov/>
www.ORCHD.mobi

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Issue Contributors
Sarah Matthews, MPH
Epidemiology Program Manager
Ben Klekamp, MSPH, CPH
Epidemiologist
Debra Mattas, BS
Epidemiologist
Jack Tracy, M Ed
Influenza Surveillance Coordinator
Toni Hudson, MSPH
Florida Epidemic Intelligence Service Fellow
Charlene McCarthy
Administrative Assistant

The Epidemiology Program conducts disease surveillance and investigates suspected occurrences of infectious diseases and conditions that are reported from physician's offices, hospitals, and laboratories.

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

Data is collected and examined to determine the existence of trends. 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 IS PROVISIONAL