

**April 2018** 

Volume 19, Issue 4

### This Month in Public Health

April is National STD Awareness Month, a time set aside by public health and clinical professionals to encourage education, protection, and testing. Many STDs are curable, and all are treatable. Help your clients and patients take control and get informed!

# A Message from the Editor:

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Dear esteemed colleagues,

It has been wonderful being the editor of and a contributor to Epi Monthly over the last three and half years. Sadly, however, my time with the Florida Department of Health in Miami-Dade County has come to a close. I leave the newsletter in the capable hands of Danielle Fernandez, an outbreak epidemiologist on the Epi team. To everyone who has contributed to Epi Monthly during my time at the Health Department, I send my thanks and a fond farewell.

Emily Moore, MPH

### STD Awareness Month

Alyssa Falise, MSPH

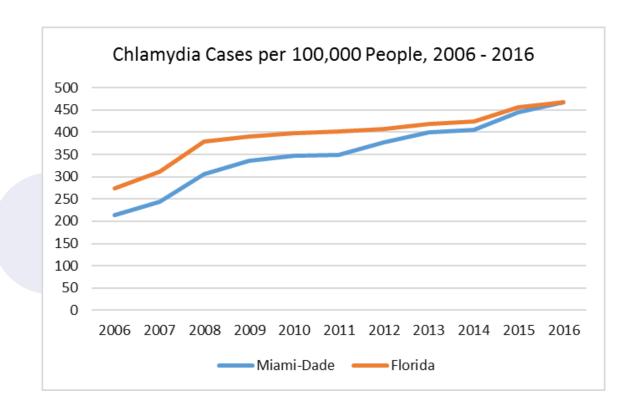
Each year, the Centers for Disease Control and Prevention (CDC) recognizes April as Sexually Transmitted Disease (STD) Awareness Month. In the United States, STDs are being reported at an all-time high, with the national prevalence increasing over the last three years<sup>1</sup>. In recognition of STD Awareness Month, we will discuss the signs and symptoms, transmission, methods of diagnoses, treatments, best prevention strategies, and the epidemiology of chlamydia, gonorrhea, and syphilis.

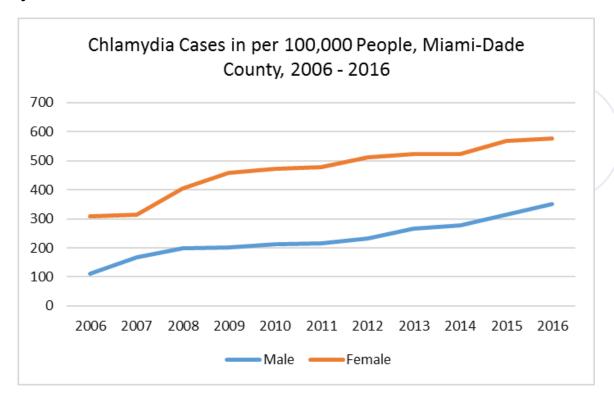
Signs and Symptoms					
Chlamydia <sup>2</sup>	Gonorrhea <sup>3</sup>	Syphilis⁴			
Generally asymptomatic	Generally asymptomatic	Primary Stage:			
		One or more sores			
Abnormal discharge from	Abnormal discharge from	Secondary Stage:			
penis, vagina, or anus	penis or vagina	Skin rash			
Burning sensation while	Burning sensation while	Mucous membrane lesions			
urinating	urinating	Fever			
Swollen testicles	Swollen testicles	Swollen lymph glands			
Rectal discharge / bleeding	Vaginal bleeding between	Sore throat			
	periods	Headache			
	Anal itching	Weight loss			
	Rectal discharge / bleeding	Fatigue			
		Latent Stage:			
		Asymptomatic			
		Tertiary Stage:			
		Blindness			
		Weakness / numbness			
		Trouble walking			
		Memory problems			
	\	Loss of bladder control			
		Small bumps on skin, bones, or			
		internal organs			

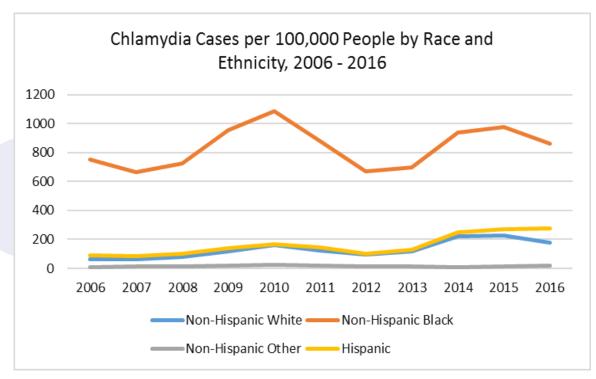
Chlamydia, gonorrhea, and syphilis are three STDs that spread through unprotected vaginal, anal, or oral sex with an infected partner. Pregnant mothers can also spread the infections to their babies during childbirth. Laboratory testing mainly consists of urine, vaginal, throat, and rectal samples; sample collection type depends on the type of unprotected sex that was had. These STDs can be treated through prescribed antibiotics.<sup>2,3,4</sup> If a gonorrhea infected individual has completed their treatment but is still experiencing symptoms, they should seek further medical attention as the prevalence of drug-resistant strains are increasing.<sup>3</sup> Leaving STDs untreated can lead to serious and permanent medical complications. Untreated chlamydia can

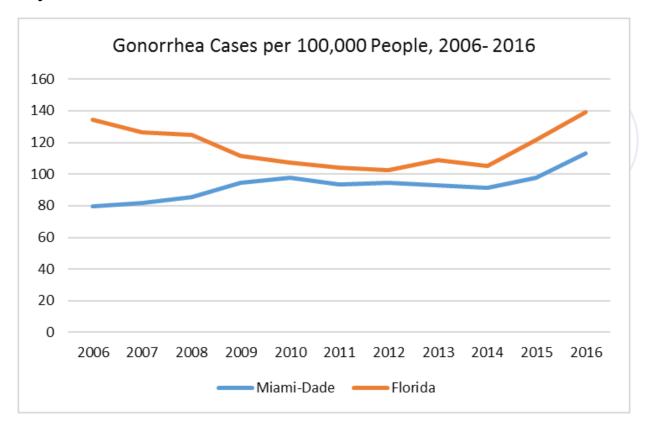
lead to damage in a women's reproductive system, making conception difficult.<sup>2</sup> Gonorrhea can result in pelvic inflammatory disease in women, which can lead to blocked fallopian tubes, ectopic pregnancies, infertility, and chronic pain. Men with gonorrhea may experience epidiymitis (inflammation of the epididymis) or sterility.<sup>3</sup> If syphilis invades the nervous system, people may experience altered behaviors, paralysis, sensory deficits, or dementia. For those in the tertiary stage of a syphilis infection, people will experience serious damage to the internal organs and results may be fatal.<sup>4</sup> To prevent the spread of these STDs, people should abstain from sex, stay monogamous with a partner that's been tested and confirmed negative for STDs, or use latex condoms each time they have sex.<sup>2,3,4</sup>

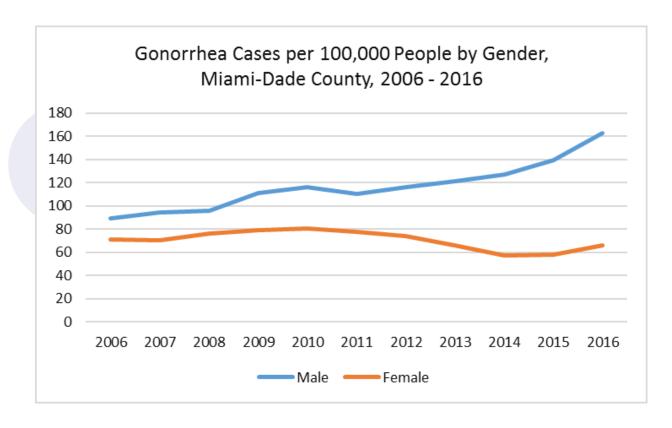
See the figures below to learn more about the incidence and demographics of chlamydia, gonorrhea, and syphilis in Miami-Dade County.

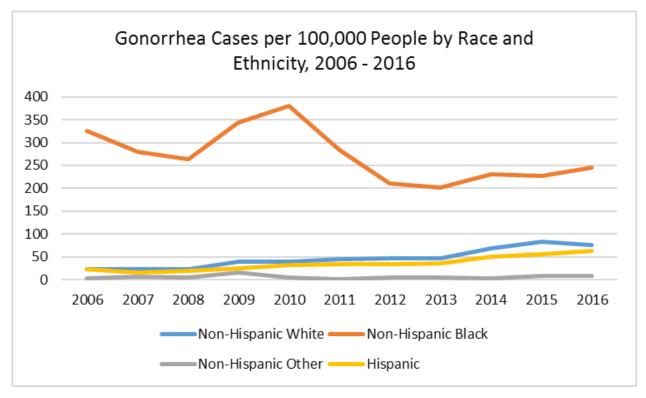


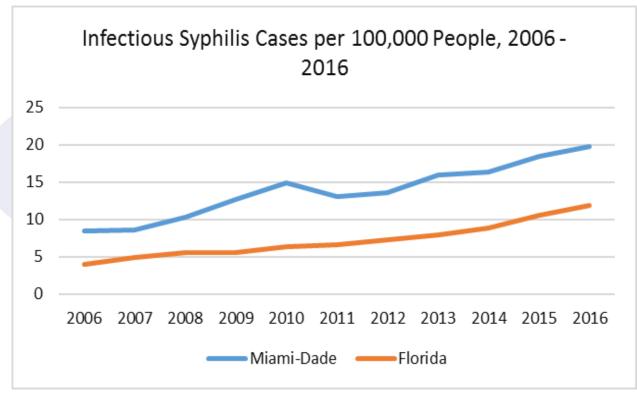


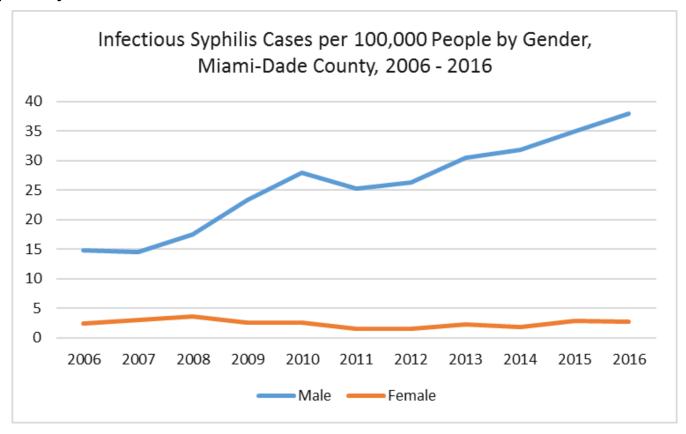


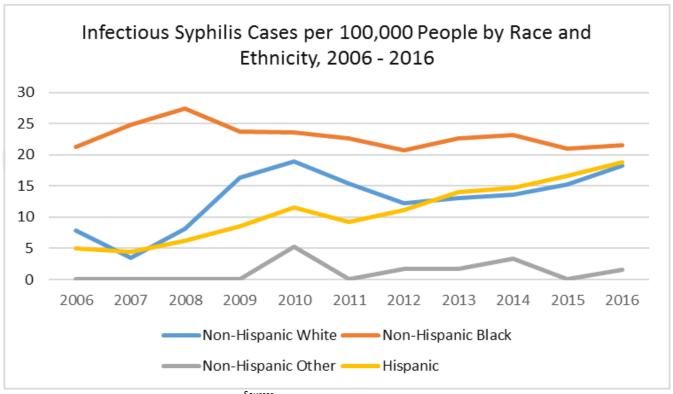






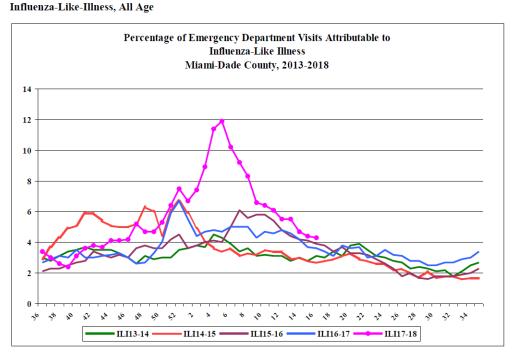






Sources

- I. https://www.cdc.gov/std/sam/index.htm
- 2. https://www.cdc.gov/std/chlamydia/stdfact-chlamydia.htm
- https://www.cdc.gov/std/gonorrhea/stdfact-gonorrhea.htm
- 4. https://www.cdc.gov/std/syphilis/stdfact-syphilis.htm



During this period, there were 31,143 ED visits; among them 1,346 (4.3%) were ILI. At the same week of last year, 3.6% of ED visits were ILI.

#### TO REPORT ANY DISEASE AND FOR INFORMATION CALL: **Epidemiology, Disease Control** & Immunization Services

Childhood Lead Poisoning	
Prevention Program	305-470-6877
Hepatitis	305-470-5536
Immunizations or outbreaks	305-470-5660
HIV/AIDS Program	305-470-6999
STD Program	305-575-5430
Tuberculosis Program	305- 575-5415
Immunization Service	305-470-5660
To make an appointment	786-845-0550

#### PARTICIPATE IN INFLUENZA SENTINEL PROVIDER **SURVEILLANCE**

#### Florida Department of Health in Miami-Dade County NEEDS Influenza Sentinel Providers!

Sentinel providers are key to the success of the Florida Department of Health's Influenza Surveillance System. Data reported by sentinel providers gives a picture of the influenza virus and ILI activity in the U.S. and Florida which can be used to guide prevention and control activities, vaccine strain selection, and patient care.

- Providers of any specialty, in any type of practice, are eligible to be sentinel providers.
- Most providers report that it takes less than 30 minutes a week to compile and report data on the total number of patients seen and the number of patients seen with influenza-like illness.
- Sentinel providers can submit specimens from a subset of patients to the state laboratory for virus isolation free of charge.

For more information, please contact

Lakisha Thomas at 305-470-5660.

#### **About the Epi Monthly Report**

The Epi Monthly Report is a publication of the Florida Department of Health in Miami-Dade County: Epidemiology, Disease Control & Immunization Services. The publication serves a primary audience of physicians, nurses, and public health professionals. Articles published in the Epi Monthly Report may focus on quantitative research and analysis, program updates, field investigations, or provider education. For more information or to submit an article, please contact Emily Moore at (305) 470-6918.



## Miami-Dade County Monthly Report Select Reportable Disease/Conditions March 2018

Diseases/Conditions	2018 Current Month	2018 Year to Date	2017 Year to Date	2016 Year to Date
HIV/AIDS				
AIDS*	38	117	116	155
HIV	151	375	348	366
STD	•	•	••	••
Infectious Syphilis*	31	99	90	93
Chlamydia*	1112	3199	2994	2859
Gonorrhea*  TB	350	1001	691	627
Tuberculosis**	12	26	15	21
Epidemiology, Disease Control &				
Immunization Services				
Epidemiology				
Campylobacteriosis	73	177	141	134
Chikungunya Fever	0	0	0	0
Ciguatera Poisoning	4	8	2	0
Cryptosporidiosis	5	7	1	5
Cyclosporiasis	0	0	0	0
Dengue Fever	0	1	1	6
Escherichia coli, Shiga Toxin-Producing	7	23	14	2
Encephalitis, West Nile Virus	0	0	0	0
Giardiasis, Acute	32	42	24	43
Influenza Novel Strain	0	0	0	0
Influenza, Pediatric Death	1	1	0	0
Legionellosis	4	9	9	1
Leptospirosis	0	0	0	0
Listeriosis	0	1	3	0
Lyme disease	0	0	1	0
Malaria	0	4	2	0
Meningitis (except aseptic)	1	4	1	0
Meningococcal Disease	0	0	3	0
Salmonella serotype Typhy (Typhoid Fever)	0	1	0	0
Salmonellosis	37	99	105	101
Shigellosis	28	69	19	22
Streptococcus pneumoniae, Drug Resistant	4	16	4	1
Vibriosis	0	0	2	0
Vibriosis West Nile Fever	0	0	0	0
Immunization Preventable Diseases	· ·	U	U	U
Measles	0	0	0	0
Mumps	3	4	0	2
Pertussis	1	6	9	6
Rubella	0	0	0	0
Tetanus	0	0	0	0
Varicella	4	9	14	26
Hepatitis				
Hepatitis A	1	4	21	4
Hepatitis B (Acute)	0	7	6	1
Healthy Homes				
Lead Poisoning	6	10	20	23
*Data is provisional at the county level and is subject to	adit abaaka bu atata a	and fodoral aganaid	20	

<sup>\*</sup>Data is provisional at the county level and is subject to edit checks by state and federal agencies.

<sup>\*\*</sup> Data on tuberculosis are provisional at the county level.