



Epi Monthly

This Month in Public Health

- March marks [National Nutrition Month](#), a health observance initiated in 1973 by members of the American Dietetic Association (now the Academy of Nutrition and Dietetics) as a way to deliver nutrition education messages to the public while promoting the profession of dietetics. The Florida Department of Health in Miami-Dade County (DOH Miami-Dade) has adopted the theme, “Good Food Good Mood,” for this year’s celebration and challenges you to eat a variety of healthy foods to improve your overall wellbeing.
- National Poison Prevention Week was commemorated March 17 - 23. The American Association of Poison Control Centers (AAPCC) uses this month to promote poison prevention tips and the free emergency services provide by poison control centers nationwide. [Florida’s Poison Control Centers](#) can be reached 24 hours a day, 365 days a year and offer poison prevention and confidential management information by specially trained physicians, nurses, pharmacists, physician assistants, toxicology fellows, and board-certified toxicologists with expertise in the latest, in-depth poison assessment and prevention techniques.
- World TB Day was celebrated March 24. The Centers for Disease Control and Prevention and partners around the world use this day to educate the public about the impact of TB around the world. This year’s theme is “[It’s Time](#).” For more information on TB and how DOH Miami-Dade has incorporated “It’s Time” into our work, please see the feature on [page 2](#).

In this Issue

This Month in Public Health	1
It’s Time. DOH Miami-Dade Recognizes <i>World TB Day</i>	2
<i>Candida auris</i>: An Emerging Global Health Threat	3
EDC-IS Influenza Respiratory Illness Surveillance Report	5
Selected Reportable Diseases/Conditions for February 2019	6
What’s New at DOH Miami-Dade	7
Did You Know? 2019 County Health Rankings	7

Poison Help
1-800-222-1222

Click here for a short video on the services provided by AAPCC.

Florida Department of Health in Miami-Dade County
Epidemiology, Disease Control, and Immunization Services
8175 NW 12th Street, Suite 316
Miami, FL 33126
Phone: 305-470-5660
Fax: 305-470-5533
eFax: 786-732-8714



In the Community

It's Time. DOH Miami-Dade Recognizes World TB Day

The Florida Department of Health in Miami-Dade County recognized World Tuberculosis (TB) Day, celebrated on March 24th, the date in 1882 when Dr. Robert Koch announced his discovery of *Mycobacterium tuberculosis*, the bacillus that causes tuberculosis. World TB Day is an annual observance used to increase public awareness about the impact of TB around the world, share success stories in TB prevention and control, and highlight the challenges that hinder our progress toward the elimination of the disease.

The Centers for Disease Control and Prevention (CDC) commemorated World TB Day 2019 with the theme, "It's Time":

It's time to test and treat latent TB infection.

It's time we strengthen TB education and awareness among health care providers.

It's time to speak up.

It's time to end stigma.

The DOH Miami-Dade World TB Day efforts are aimed to raise awareness regarding tuberculosis, ending stigmas, increasing testing and treatment efforts, as well as recognizing the achievements in TB prevention and control. Throughout the month of March, DOH Miami-Dade and its local partners hosted community outreach and education events across the county including an outreach event at the HAC Chapman Partnership Shelter, a tabling fair at Jackson Memorial Hospital, and the 11th annual World TB Day Conference at Camillus House.

Tuberculosis is a significant disease threat across the globe, with an estimated one-fourth of the world's population infected with TB. In 2017, 10 million people were infected and acquired with TB disease with 1.3 million TB-related deaths recorded worldwide. In the United States, however, 9,105 TB cases were reported in 2017, a 2.3% decrease from the year prior and the lowest case count on record in the United States to date. In Miami-Dade County, the DOH-Miami-Dade Tuberculosis Control & Prevention Program has made significant strides towards its goal to eliminate TB in the county. Cases of TB in Miami-Dade County over the past 10 years have decreased by 20.5 percent from reporting 156 cases in 2009 to 124 in 2018.

World TB Day is a time to renew our commitment to ending this disease both in the United States and globally. While improvements have been made in TB identification and treatment in the United States in recent years, we must continue to find and treat cases of active TB disease and also test and treat latent TB infection to prevent progression to disease. Clinicians, health care agencies, and community organizations, especially those serving at-risk populations, have a critical role in TB elimination. DOH Miami-Dade has implemented strategies, improved testing, provided incentives and enablers, and treatment technologies, making it easier for clients to successfully complete therapy. The time has come to end TB.

To explore resources relating to TB and learn more, visit DOH Miami-Dade's [website](#). For additional information about World TB Day 2019, visit the CDC's World TB Day [page](#).



Candida auris: An Emerging Global Health Threat

By: Sebastian Arenas

Introduction

Candida auris is an emerging fungus that presents a serious global health threat. The concern is based on three main reasons: multidrug resistance, frequent misidentification, and potential to cause outbreaks in health care settings.

C. auris was first isolated in Japan and described as a new species in 2009. Subsequently, it was later isolated from patients in South Korea, Kuwait, South Africa, and Venezuela. Cases in the United States are a result of introduction by patients with international health care exposures where *C. auris* has been reported or as a result of local spread after such an introduction. Most cases in the U.S. have been detected in recent years in New York, Illinois, and New Jersey with a total of 561 confirmed cases. As of March 29, 2019, Florida has 12 confirmed cases based on the latest tracking data from the Centers for Disease Control and Prevention (CDC).¹

How Serious is *C. auris*?

C. auris has been isolated most frequently from hospitalized patients and can be fatal; more than 1 in 3 patients with invasive *C. auris* infections die.² The patients with the highest risk for colonization and/or infection are those with prolonged hospitalizations, tracheostomy and ventilator dependence, intensive care unit admissions, indwelling devices (e.g., central lines, peg tubes), recent surgeries, and immunosuppression.³

Furthermore, *C. auris* has demonstrated multidrug resistance properties worldwide, which has not been seen in other *Candida* species.³ Most infections are treatable with a class of antifungal drugs called echinocandins. However, some *C. auris* infections have been resistant to all three main classes of antifungal medications, making them more difficult to treat.⁴

In addition, *C. auris* can be misidentified as a number of different organisms when using identification methods such as VITEK 2 YST, API 20C, BD Phoenix yeast identification system, and MicroScan.⁵ An increase in unidentified *Candida* infections in a patient care unit should raise suspicion for *C. auris* because of its ability to cause nosocomial outbreaks.

Transmission of *C. auris*

C. auris can either cause colonization and/or infection in patients. Colonization refers to the presence of the fungus on or within a patient without symptoms of infection. Infection, on the other hand, may result in onset of symptoms; however, due to the condition of those at risk, it may be difficult to differentiate *C. auris* infections from other illnesses or conditions. Infection requires medical treatment.

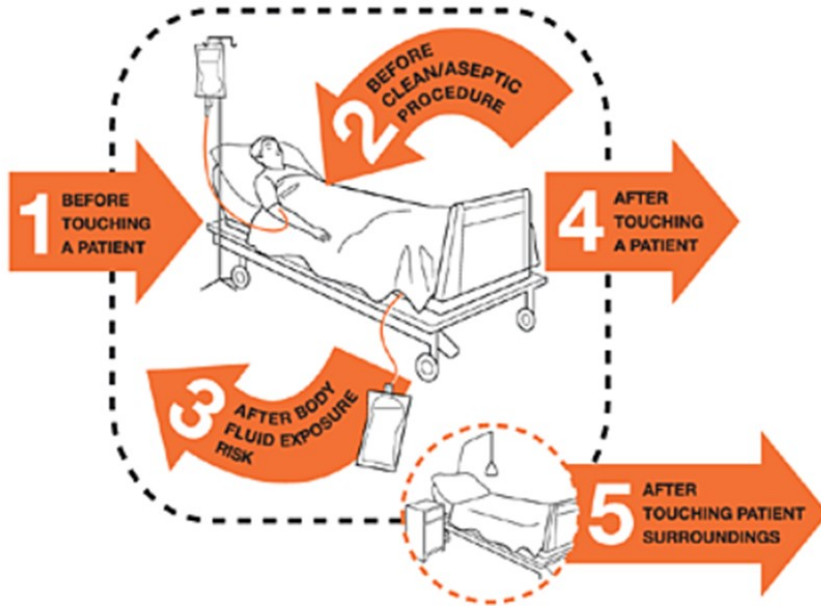
Patients can become colonized or develop infections through contact with contaminated medical equipment, hands of health care providers or the environment around them. *C. auris* has been shown to survive in high touch surfaces, such as bedrails and bedside tables, and locations away from patients such as window sills in health care environments for a long time.⁶ It has also been isolated from nursing carts, glucometers, and blood pressure cuffs. For this reason, *C. auris* is highly transmissible unless proper infection control practices are in place.⁷

Infection Prevention and Control

The following actions need to be implemented immediately upon confirmation of a *C. auris* case:

- Transmission-based precautions:
 - Patients with suspect or confirmed *C. auris* should be placed on contact precautions and in a private room.
- Hand hygiene:
 - Increased emphasis should be placed on hand hygiene and facilities should implement “My 5 Moments of Hand Hygiene” as recommended by the World Health Organization, as depicted in Figure 1.

Figure 1. “My 5 Moments of Hand Hygiene” as outlined by the World Health Organization.



- Environmental disinfection:
 - CDC recommends the use of Environmental Protection Agency (EPA)-registered hospital-grade disinfectant effective against *Clostridioides difficile* spores. Other disinfectants that are commonly used such as quaternary ammonium compounds may not be effective against *C. auris*. For a complete list of EPA-registered disinfectants, please visit: <https://www.epa.gov/sites/production/files/2018-01/documents/2018.10.01.listk.pdf>.
- Inter-facility Communication:
 - When transferring patients, it is imperative that receiving facilities be informed of *C. auris* or any multidrug resistance organism status. A transfer sheet is available at: <https://www.cdc.gov/hai/pdfs/toolkits/InfectionControlTransferFormExample2.pdf>.

Reporting

Immediately notify the Florida Department of Health in Miami-Dade County (DOH Miami-Dade), Epidemiology, Disease Control and Immunization Services at 305-470-5660 if *C. auris* is suspected or identified to arrange confirmatory testing and conduct surveillance screening. For more information and guidance on reporting to DOH Miami-Dade, please see attached document, “*Candida auris* Update: Information for Clinicians and Laboratorians, Version 4.0.”

References

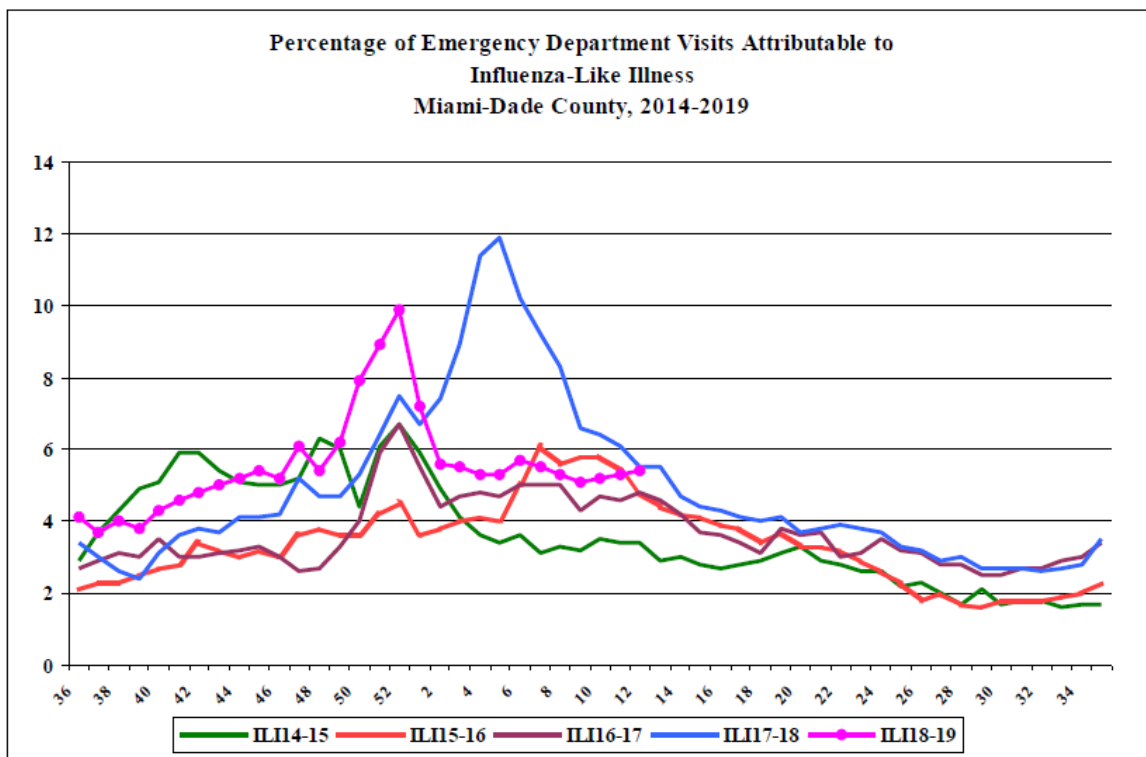
1. <https://www.cdc.gov/fungal/candida-auris/tracking-c-auris.html>
2. <https://www.cdc.gov/fungal/candida-auris/index.html>
3. Lone, S. A., & Ahmad, A. (2019). *Candida auris* - the growing menace to global health. *Mycoses*, doi: <http://dx.doi.org.ezproxy.fiu.edu/10.1111myc.12904>
4. <https://www.cdc.gov/fungal/candida-auris/c-auris-treatment.html>
5. <https://www.cdc.gov/fungal/candida-auris/recommendations.html>
6. Tsay S, Welsh RM, Adams EH, et al. Notes from the Field: Ongoing Transmission of *Candida auris* in Health Care Facilities— United States, June 2016–May 2017. *MMWR Morb Mortal Wkly Rep* 2017;66:514–515. DOI: <http://dx.doi.org/10.15585/mmwr.mm6619a7>
7. <https://www.cdc.gov/fungal/candida-auris/c-auris-infection-control.html>

Florida Department of Health in Miami-Dade County Epidemiology, Disease Control and Immunization Services

Influenza Like Illness Surveillance Report

On a daily basis, all of Miami-Dade County's emergency department (ED) hospitals electronically transmit ED data to the Florida Department of Health. This data is then categorized into 11 distinct syndromes. The influenza-like illness (ILI) syndrome consists of fever with either cough or sore throat. It can also include a chief complaint of "flu" or "ILI". This season's 2017-2018 data is compared to the previous 4 influenza seasons (2013-2014, 2014-2015, 2015-2016, 2016-2017).

Influenza-Like-Illness, All Age



Across all ages, there were 35,382 ED visits; among them 1,915 (5.4%) were ILI. At the same week of last year, 5.5% of ED visits were ILI.

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.



Miami-Dade County Monthly Report Select Reportable Disease/Conditions February 2019

Diseases/Conditions	2019 Current Month	2019 Year to Date	2018 Year to Date	2017 Year to Date
HIV/AIDS				
AIDS*	63	91	80	63
HIV	151	282	224	193
STD				
Infectious Syphilis*	43	80	68	57
Chlamydia*	1190	2324	2087	1914
Gonorrhea*	369	727	651	432
TB				
Tuberculosis**	7	14	12	12
Epidemiology, Disease Control & Immunization Services				
Epidemiology				
Campylobacteriosis	61	123	103	91
Chikungunya Fever	0	0	0	0
Ciguatera Poisoning	3	8	4	2
Cryptosporidiosis	4	6	2	0
Cyclosporiasis	0	0	0	0
Dengue Fever	5	14	1	0
Escherichia coli, Shiga Toxin-Producing	7	18	17	1
Encephalitis, West Nile Virus	0	0	0	0
Giardiasis, Acute	17	17	10	9
Influenza Novel Strain	0	0	0	0
Influenza, Pediatric Death	0	0	0	0
Legionellosis	4	7	5	5
Leptospirosis	0	0	0	0
Listeriosis	0	0	1	3
Lyme disease	1	1	0	0
Malaria	0	0	4	1
Meningitis (except aseptic)	0	1	3	0
Meningococcal Disease	0	0	0	2
Salmonella serotype Typhi (Typhoid Fever)	1	1	1	0
Salmonellosis	47	84	61	69
Shigellosis	24	50	41	13
Streptococcus pneumoniae, Drug Resistant	2	2	7	2
Vibriosis	2	3	0	1
West Nile Fever	0	0	0	0
Immunization Preventable Diseases				
Measles	0	0	0	0
Mumps	2	2	1	0
Pertussis	2	5	5	5
Rubella	0	0	0	0
Tetanus	0	0	0	0
Varicella	17	26	5	7
Hepatitis				
Hepatitis A	3	6	3	6
Hepatitis B (Acute)	3	5	6	3
Healthy Homes				
Lead Poisoning	12	30	31	14

*Data is provisional at the county level and is subject to edit checks by state and federal agencies.

** Data on tuberculosis are provisional at the county level.

Data on EDC-IS includes Confirmed and Probable cases.

Did You Know?



The [2019 County Health Rankings](#) are now available online. The tool, developed by the University of Wisconsin and the Robert Wood Johnson Foundation, utilizes multidisciplinary data to provide a comprehensive snapshot of the health of counties across the country. This year, Miami-Dade County ranked 5th in *overall health outcomes* among the 67 Florida counties. Data are also available for quality of life, health behaviors, utilization of clinical care services, social and economic factors, and physical environment. While data are presented as a county-level snapshot, more detailed data for subgroups may exist at the state, county, and city level. For more information on accessing and utilizing the data, please visit:

<http://www.countyhealthrankings.org/explore-health-rankings/use-data>.



What you **EAT** influences your overall **HEALTH** and **WELLBEING**.

In celebration of National Nutrition Month, the Florida Department of Health in Miami-Dade County challenges you to eat a variety of healthy foods to improve your mood and health.

- ⇒ Fish, nuts & avocados are a great source of healthy fats for brain boosting function.
- ⇒ Whole grains & high fiber foods keep your blood sugar stable.
- ⇒ Fresh fruits & vegetables help lower your risk of heart disease.
- ⇒ A small piece of dark chocolate has been shown to reduce the levels of cortisol and other stress hormones.
- ⇒ Herbs and spices such as peppermint and sage not only flavor foods but may help with anxiety and other mood disorders.



Robert Stempel College
of Public Health
& Social Work

Click here for
more
information
on NPHW
2019.

NATIONAL PUBLIC HEALTH WEEK

April 1st - 5th 2019

SCHEDULE OF EVENTS

April 1 | Living and Aging in Miami | Green Library (GL) 139 | 1:00 p.m.
April 2 | A Communication Called Bullying | MANGO Room 220 | 10:00 a.m.
April 3 | Spackdown on PEEP | Graham Center (GC) 314 | 12:00 p.m.
April 4 | Using mHealth to Empower and Link Communities to Local Resources | MANGO Room 222 | 1:00 p.m.
April 5 | Climate Change & Public Health | Graham Center (GC) 140 | 10:00 a.m.

For more information, visit GO.FIU.EDU/NPHW2019

To report diseases and for information, call EDC-IS at:

Childhood Lead Poisoning Prevention Program	305-470-6877
Epidemiology and Disease Surveillance	305-470-5660
Hepatitis Program	305-470-5536
HIV/AIDS Program	305-470-6999
Immunization Services	305-470-5660
STD Program	305-575-5430
Tuberculosis Program	305-575-5415
Appointment Line	786-845-0550

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 Danielle Fernandez at 305-470-6980 or danielle.fernandez@flhealth.gov.

