



## Public Health LOOK OUT!

- This year, December 5-9<sup>th</sup> is recognized by the Centers for Disease Control and Prevention (CDC) as **National Influenza Vaccination Week (NIVW)**. NIVW focuses on emphasizing the importance of influenza vaccination. If you have not received your yearly influenza vaccination reach out to your primary care provider (PCP) or local health department to schedule a vaccination. Visit [CDC.gov](https://www.cdc.gov) to learn more about fighting the flu!
- **National Handwashing Awareness Week** is also celebrated during the first week of December, raising awareness on the importance of proper handwashing and hygiene. Washing hands often is one of the best ways to protect yourself and others from the spreading of germs. Make sure to wash your hands properly by following the five steps of proper handwashing. Visit [CDC.gov](https://www.cdc.gov) to learn when and how to wash your hands!
- **World Aids Day** is observed on December 1<sup>st</sup> each year. This day was started in 1988 as an opportunity for people worldwide to unite in the fight against HIV, to show support for people living with HIV, and to commemorate those who have died from AIDS related illness. To show their support many people wear a red ribbon, the symbol of solidarity, awareness, and support for people living with HIV. For more information or to learn how you can contribute visit [CDC.gov](https://www.cdc.gov)!

For the most recent information on COVID-19 in Florida please visit: <https://floridahealthcovid19.gov/>

### In this Issue

Public Health Lookout	1
Influenza (flu) Guidance and Resources	2
EDC-IS Influenza Respiratory Illness Surveillance Report	4
Select Reportable Diseases and Conditions for October 2022	5
What's New at DOH - Miami-Dade	6

Click the image to the left to watch the video.

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# Treating Influenza (Flu)



## Information for People at High Risk for Serious Flu Complications



### Do you have Asthma, Chronic Obstructive Pulmonary Disease, Diabetes, or Heart Disease?

If so, you are at high risk of serious illness if you get flu. Treatment with an influenza antiviral drug can mean the difference between having milder illness instead of very serious illness that could result in a hospital stay. This fact sheet provides information about using prescription antiviral drugs to treat influenza in people at high risk for serious flu complications.

### Why am I at greater risk of serious flu complications?

Your medical condition makes it more likely that you will get complications from flu, like pneumonia. Flu also can make long-term health problems worse, even if they are well-managed. People with asthma, chronic obstructive pulmonary disease, or heart failure may experience worsening of their conditions and have difficulty breathing. Diabetes (type 1 and 2) can make the immune system less able to fight flu. Also, flu illness can raise blood sugar levels.

### Can flu be treated?

Yes. There are prescription medications called “antiviral drugs” that can be used to treat influenza illness. Antiviral drugs fight influenza viruses in your respiratory tract. They are different from antibiotics, which fight against bacterial infections.

### What should I do if I think I have flu?

Check with your doctor promptly if you are in a group at high risk for serious complications and you get flu symptoms. Symptoms of flu can include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills, and fatigue. If you get flu, antiviral drugs are a treatment option. Your doctor may prescribe antiviral drugs to treat your flu illness.

### Should I still get a flu vaccine?

Yes. Antiviral drugs are not a substitute for getting a flu vaccine. While flu vaccines can vary in how they work, flu vaccination is the first and best way to prevent influenza. You should receive flu vaccine every year. Antiviral drugs are a second line of defense to treat flu if you get sick.

### What are the benefits of antiviral drugs?

Antiviral treatment works best when started within two days of getting symptoms. Antiviral drugs can lessen fever and other symptoms and shorten the time you are sick by about one day. They also can prevent serious flu complications, like pneumonia when treatment is started early.

For people at high risk of serious flu complications, early treatment with an antiviral drug can mean the difference between having a milder illness instead of a more serious illness that could result in a hospital stay. For adults hospitalized with flu illness, some studies have reported that early antiviral treatment can reduce the risk of death.

### What antiviral drugs are recommended?

There are four FDA-approved influenza antiviral drugs recommended by CDC: oseltamivir (available as a generic version or under the trade name Tamiflu®), zanamivir (trade name Relenza®), peramivir (trade name Rapivab®), and baloxavir marboxil (trade name Xofluza®). Oseltamivir is available as a pill or liquid, and zanamivir is a powder that is inhaled. Peramivir is administered intravenously by a health care provider. Baloxavir is a pill given as a single dose by mouth.



U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention



Health and age factors known to increase a person's risk for developing flu-related complications:

- Asthma
- Neurological and neurodevelopmental conditions
- Blood disorders (such as sickle cell disease)
- Chronic lung disease (such as chronic obstructive pulmonary disease [COPD] and cystic fibrosis)
- Endocrine disorders (such as diabetes mellitus)
- Heart disease (such as congenital heart disease, congestive heart failure, and coronary artery disease)
- Kidney disorders
- Liver disorders
- Metabolic disorders (such as inherited metabolic disorders and mitochondrial disorders)
- People who are obese with a body mass index [BMI] of 40 or higher
- People younger than 19 years of age on long-term aspirin- or salicylate-containing medications
- People with a weakened immune system due to disease or medication (such as people with HIV or AIDS, or some cancers such as leukemia) or medications (such as those receiving chemotherapy or radiation treatment for cancer, or persons with chronic conditions requiring chronic corticosteroids or other drugs that suppress the immune system)

Other people at high risk from the flu:

- Adults 65 years and older
- Children younger than 2 years old<sup>1</sup>
- Pregnant women and women up to 2 weeks after the end of pregnancy
- American Indians and Alaska Natives
- People who live in nursing homes and other long-term-care facilities

<sup>1</sup> Although all children younger than 5 years old are considered at high risk for serious flu complications, the highest risk is for those younger than 2 years old, with the highest hospitalization and death rates among infants younger than 6 months old, younger than 6 months old.

## What are the possible side effects of antiviral drugs?

Side effects vary for each medication. For example, the most common side effects for oseltamivir are nausea and vomiting, zanamivir can cause wheezing and difficulty breathing (bronchospasm), and peramivir can cause diarrhea.

Other less common side effects also have been reported. Your health care provider can give you more information about these drugs, or you can check the Food and Drug Administration (FDA) website for specific information about antiviral drugs, including the manufacturer's package insert.

## When should antiviral drugs be taken for treatment?

Studies show that flu antiviral drugs work best for treatment when started within two days of getting sick. However, starting them later can still be helpful, especially if the sick person is in a group at high risk for serious complications (see list in sidebar) or is very sick from flu (for example, hospitalized from flu). Follow your health care provider's instructions for taking these drugs. These antiviral drugs are given in different ways and are approved for different ages.

## How long should antiviral drugs be taken?

To treat flu, oseltamivir and zanamivir are usually taken for 5 days, although people hospitalized with flu may need the medicine for longer than 5 days. Peramivir is given once intravenously. Baloxavir is given as a single dose.

## Can children take antiviral drugs?

Yes. Oseltamivir is recommended by CDC and the American Academy of Pediatrics (AAP) for early treatment of flu in people of any age, and is approved for the prevention of flu (i.e., prophylaxis) in people 3 months and older. Zanamivir is recommended for early treatment of flu in people 7 years and older. Peramivir is recommended for early treatment of flu in people 6 months and older. Baloxavir is recommended for early treatment of flu in children aged 5 to less than 12 years without chronic medical conditions and in all persons aged 12 years and older.

## Can pregnant and breastfeeding women take antiviral drugs?

Oral oseltamivir is recommended for treatment of pregnant women if it has the most studies available to suggest that it is safe and beneficial during pregnancy. Baloxavir is not recommended for pregnant women or breastfeeding mothers.

## Who should take antiviral drugs?

It's very important that antiviral drugs be used early to treat flu in people who are very sick with flu (for example, people who are in the hospital).

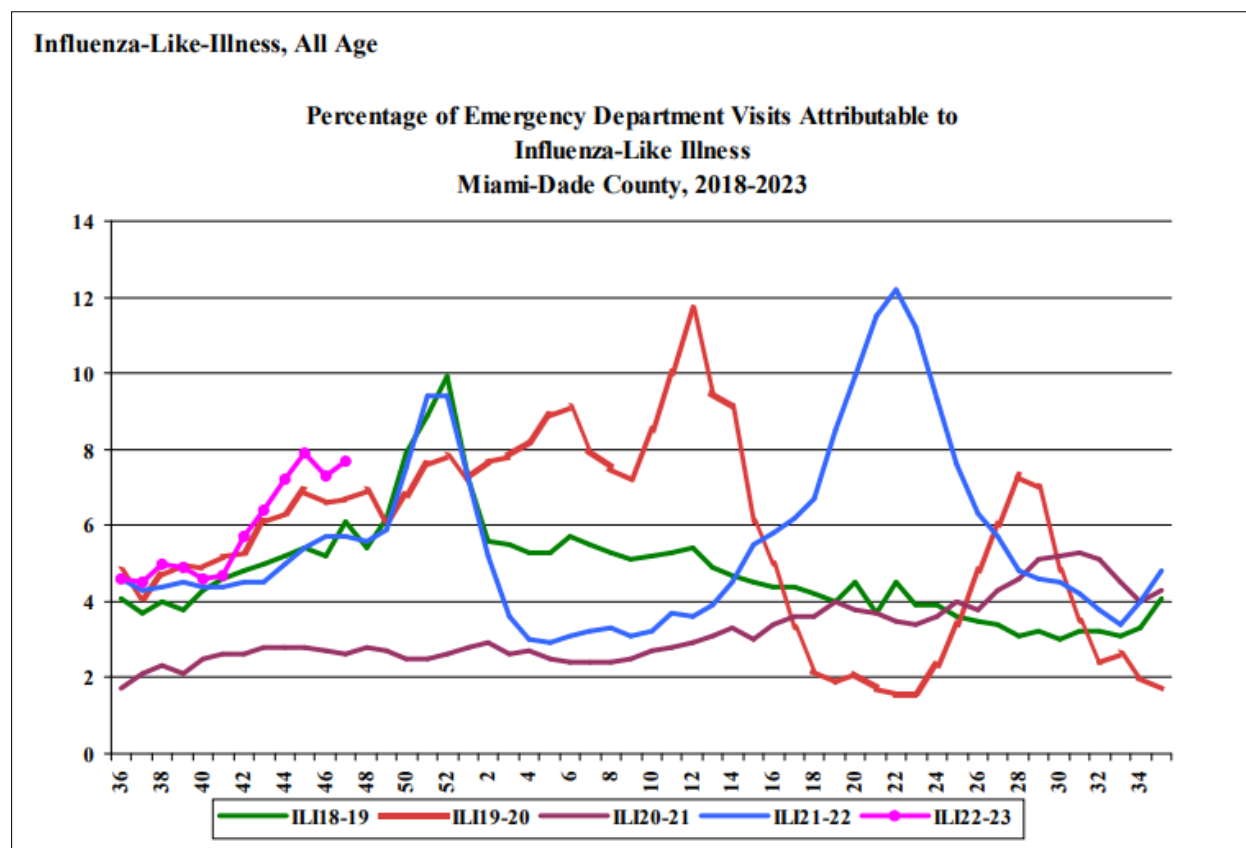
People who are sick with flu and have a high-risk factor related to a health condition like asthma, diabetes or chronic heart disease or their age. (See the full list of high-risk factors).

For more information, visit: [www.cdc.gov/flu](http://www.cdc.gov/flu)  
or call 1-800-CDC-INFO

# 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 2020-2021 data is compared to the previous 4 influenza seasons (2016-2017, 2017-2018, 2018-2019, 2019-2020).



Across all ages, there were 34,136 ED visits; among them 2,623 (7.7%) were ILI. During the same week last year, 5.7% 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  
**Stephanie Ramirez** at 305-470-5660.



# Miami-Dade County Monthly Report Select Reportable Disease/Conditions October 2022

Diseases/Conditions	2022 Current Month	2022 Year to Date	2021 Year to Date	2020 Year to Date
<b>HIV/AIDS</b>				
AIDS*	38	350	347	278
HIV	148	1513	1099	826
<b>STD</b>				
Infectious Syphilis*	48	560	531	394
Chlamydia*	1272	12026	11880	9661
Gonorrhea*	505	5261	5214	3871
<b>TB</b>				
Tuberculosis**	9	110	77	59
<b>Epidemiology, Disease Control &amp; Immunization Services</b>				
<b>Epidemiology</b>				
Campylobacteriosis	54	554	483	460
Chikungunya Fever	0	0	0	0
Ciguatera Poisoning	2	8	17	12
Cryptosporidiosis	0	61	49	19
Cyclosporiasis	2	70	19	9
Dengue Fever	128	502	3	19
Escherichia coli, Shiga Toxin-Producing	22	169	102	41
Encephalitis, West Nile Virus	0	0	0	0
Giardiasis, Acute	26	236	93	102
Influenza, Pediatric Death	0	0	0	0
Legionellosis	7	37	49	24
Leptospirosis	1	1	1	0
Listeriosis	0	5	9	9
Lyme disease	3	13	5	3
Malaria	2	3	5	2
Meningitis (except aseptic)	0	7	11	5
Meningococcal Disease	0	8	5	2
Salmonella serotype Typhi (Typhoid Fever)	0	0	1	0
Salmonellosis	202	1163	921	863
Shigellosis	25	151	59	88
S. Pneumoniae, invasive disease	5	66	48	39
Vibriosis	7	33	19	14
West Nile Fever	0	0	2	27
Zika Virus (non-congenital)	0	0	0	0
<b>Immunization Preventable Diseases</b>				
Measles	0	0	0	0
Mumps	0	5	3	2
Pertussis	1	5	0	9
Rubella	0	0	0	0
Tetanus	0	0	0	0
Varicella	6	29	16	29
<b>Hepatitis</b>				
Hepatitis A	3	27	7	12
Hepatitis B (Acute)	6	81	32	38
<b>Healthy Homes</b>				
Lead Poisoning	42	331	94	65

\*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.

# SMOKING CESSATION BY THE NUMBERS

Smoking Cessation:  
A Report of the Surgeon General

About **34 million** U.S. adults currently smoke cigarettes.

▶ Smoking is the leading cause of preventable disease and death in the United States

▶ **480,000** Americans die from smoking each year, accounting for nearly 1 in 5 deaths

▶ **16 million** Americans live with a smoking-related disease

▶ Smoking-related death and disease cost the United States over **\$300 billion** each year

Smoking cessation improves health, saves lives, and reduces financial burden.

### Quitting smoking:

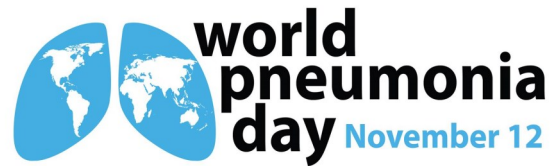
- Reduces risk of premature death and can add as much as a decade to life expectancy
- Reduces risk for many adverse health effects, including reproductive health outcomes, cardiovascular diseases, chronic obstructive pulmonary disease (COPD), and 12 types of cancer
- Benefits people who have already been diagnosed with coronary heart disease or COPD
- Benefits people at any age, with greater benefits for those who quit earlier in life
- Reduces the financial burden that smoking places on people who smoke, healthcare systems, and society

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

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

## What's New at DOH-Miami-Dade:

- Miami-Dade County has been selected to participate in the **National Health and Nutrition Examination Survey (NHANES)**. NHANES is the most comprehensive survey of health and nutritional status in the United States!
- **Abbott** has issued a press release voluntarily recalling certain lots of 2 fluid ounce/59 milliliter bottles of Ready-to-Feed (RTF) liquid formula products. For a list of products and lot numbers included in the recall, click [here](#) or call **1-800-986-8540**.
- DOH-Miami-Dade is offering **FREE Jynneos Monkeypox vaccine** to high-risk populations. To become fully immunized, you must be vaccinated with 2 doses, the second dose 28 days after the initial dose. Schedule an appointment [here](#)!
- DOH Miami-Dade offers COVID-19 vaccines, vaccine boosters, pediatric vaccines, and flu shots. Visit [miamidade.floridahealth.gov](http://miamidade.floridahealth.gov) for clinic locations and appointments!



Simple, proven solutions



Exclusive breastfeeding for baby's first 6 months



Vaccination



Safe drinking water and good sanitation



Frequent hand washing with soap



Good nutrition, especially for kids aged 6 months to 2 years



Adequate indoor ventilation



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention

#StopPneumonia  
[www.stoppneumonia.org](http://www.stoppneumonia.org)

## 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 Yoselin Garcia at (786) 582-2266 or [Yoselin.Garcia@flhealth.gov](mailto:Yoselin.Garcia@flhealth.gov).

