



Epi Monthly Report

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OF HEALTH IN MIAMI-
DADE COUNTY

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Responding to High Rates of Sexually-Transmitted Diseases in Miami-Dade County

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Introduction

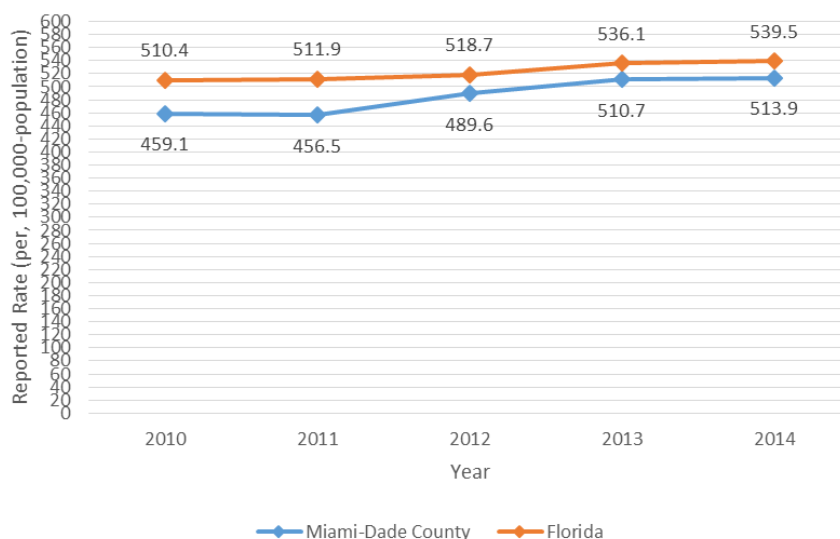
April is National STD Awareness month, a time when the Centers for Disease Control & Prevention (CDC) call on health care providers to talk to their patients about protecting their sexual health, getting tested, and how to effectively prevent and treat sexually-transmitted infections. The consequences of unidentified and untreated STDs can be dire. Cancer, infertility, blindness, deafness, birth defects, and an increased risk of transmitting or contracting HIV are only some of the adverse health outcomes linked to an untreated sexually-acquired infection. Many STDs do not have visible symptoms, and so the only way

to know for certain that an STD is present is to get tested.

STDs in Miami-Dade County

Miami-Dade County faces a particular challenge in its fight against rising STD rates. Although the reported STD rates were not higher than those at the Florida state average level (with the exception of infectious syphilis), Miami-Dade County was number one in the state for reported STD cases in 2015, with an average of 15 cases of an STD diagnosed every day among 20 to 25 year olds. According to Florida Charts, a state-wide community health statistics database, reported STD rates have continued to climb in Miami-Dade County for the last 4 years. The total reported cases of gonorrhea,

Total Gonorrhea, Chlamydia & Infectious Syphilis Reported Rate in Miami-Dade County and FL (General Population)



chlamydia, and infectious syphilis increased dramatically in 2012, and have continued a steady increase since that year (Figure 1). The reported rate of chlamydia alone in the general population of Miami-Dade County has risen at a much more rapid rate compared to the rest of the state (Figure 2). Between 2010 and 2011, the reported rate of infectious syphilis cases declined in Miami-Dade County, but it has been increasing since 2012. In Florida, the reported rate has been steadily increasing since 2010 (Figure 3).

Meanwhile, the reported HIV rates in both the county and the state have remained relatively steady over the last 5 years, although rates are much higher at the county level than at the state level (45.8 per 100,000-population in 2014 compared to 23.6 per 100,000-population that same year, respectively). In 2015, the reported HIV rate in Miami-Dade County was a staggering 53.9 per 100,000 people, making Miami-Dade the county with

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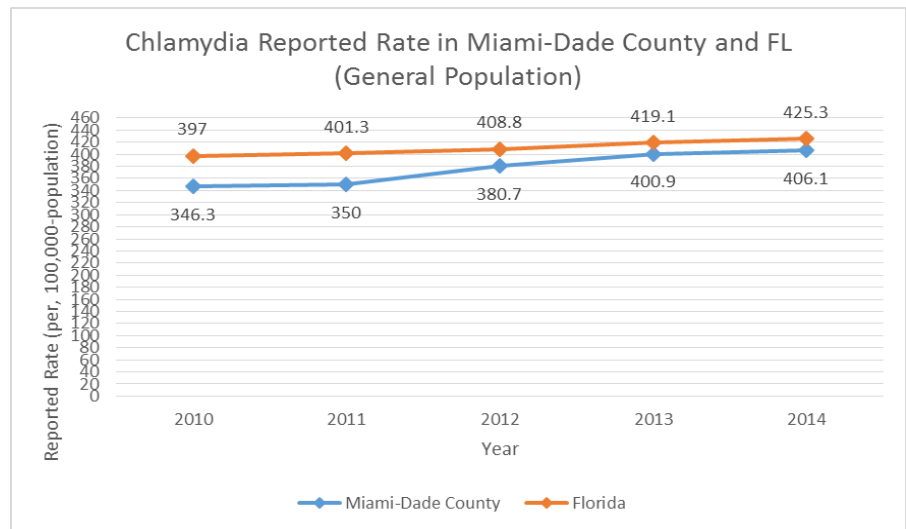


Figure 2

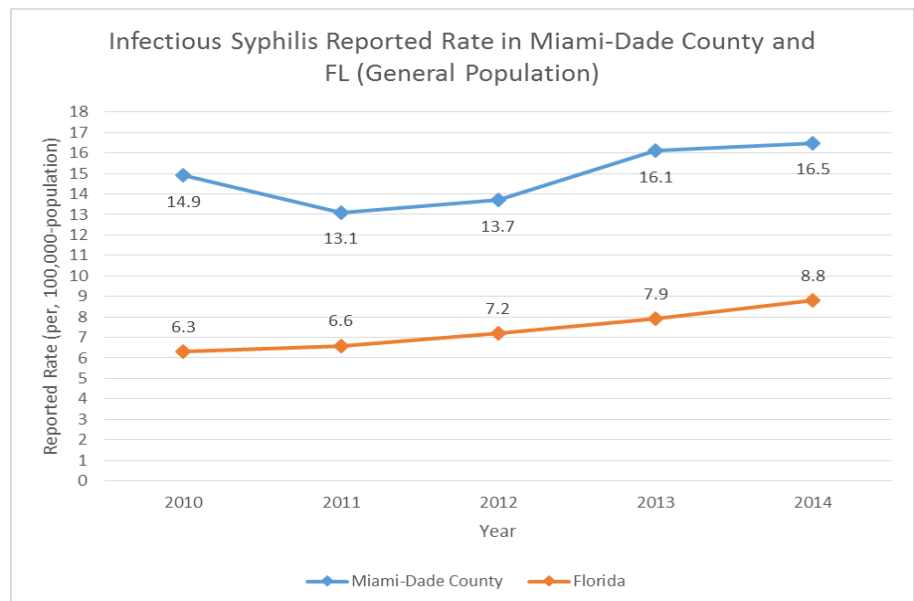


Figure 3

the highest incidence rate for HIV cases in the United States according to both state and federal data. Miami-Dade and Broward, the county with the second highest HIV incidence in the state, together accounted for 38% of the Florida's new HIV cases last year.

Talk, Test, Treat.

Sexually transmitted diseases can be prevented. CDC recommends 3 steps to stemming the rising rates of STDs in Miami-Dade County, and in the rest of the country: *Talk, Test, and Treat.*

1. *Talk:* Patients should be encouraged to talk to both their sexual partner(s) and to their health care provider about their sexual health and about their sexual history so that it can be determined which STD tests are needed. Understanding personal sexual health should be part of routine primary care. Discussing STDs can sometimes be a challenge, but studies indicate that patients want to talk about sex and have concerns regarding sexual health that they'd like to discuss with their physician.
2. *Test:* CDC provides in-depth screening recommendations for different populations (found at <http://www.cdc.gov/std/tg2015/screening-recommendations.htm>). STD testing is the only way to know for sure which sexually-

transmitted infections are present, and so patients should know where to go to be tested and to whom to talk to about their results. It is always important to consider the sexual history of each individual patient and the burden of certain STDs in their particular community while deciding on a screening course.

Treat: Providers should understand their role in the treatment of STDs and follow CDC's STD Treatment Guidelines (found at <http://www.cdc.gov/std/tg2015/default.htm>) to ensure that patients receive successful treatment and effective care.

As National STD Awareness Month comes to a close, it is necessary now more than ever in Miami-Dade County to work against rising STD rates. Primary care providers, infection control practitioners, and public health officials need to work in collaboration with one another to ensure that at-risk populations in our county have access to the information and care that they need to properly protect themselves, get tested, and receive appropriate treatment. The topic of STDs in our county cannot be avoided or ignored, and following CDC's model of *Talk, Test, Treat* can help to eliminate the factors that contribute to this hidden epidemic.

“Understanding sexual health should be a part of routine primary care.”

<http://miamidade.floridahealth.gov>

Zika Update

- The CDC has officially concluded that Zika virus infection during pregnancy causes fetal microcephaly and other birth anomalies. However, the CDC has not changed its current guidelines as a result of this finding.
- An official case of Zika virus transmission from male-to-male via anal sexual contact was reported on April 15.
- As of now, health care providers no longer need to collect saliva to test for Zika virus.
- In the continental U.S., 426 reported travel-associated cases of Zika virus have been reported, as of April 27. Of those cases, 36 involved pregnant women, 8 were sexually transmitted, and 1 was associated with Guillain-Barré syndrome.
- As of April 27, the U.S. territories of Puerto Rico, American Samoa, and the U.S. Virgin Islands have all had a total of 596 reported locally-acquired cases of Zika virus.
- Florida continues to be the state with the highest number of travel-associated cases reported. Miami-Dade continues to report the highest number of these cases.
- State and county mosquito-control efforts have increased significantly during the month of April in preparation for the anticipated emergence of local mosquito-to-human Zika virus transmission.

**Health Care
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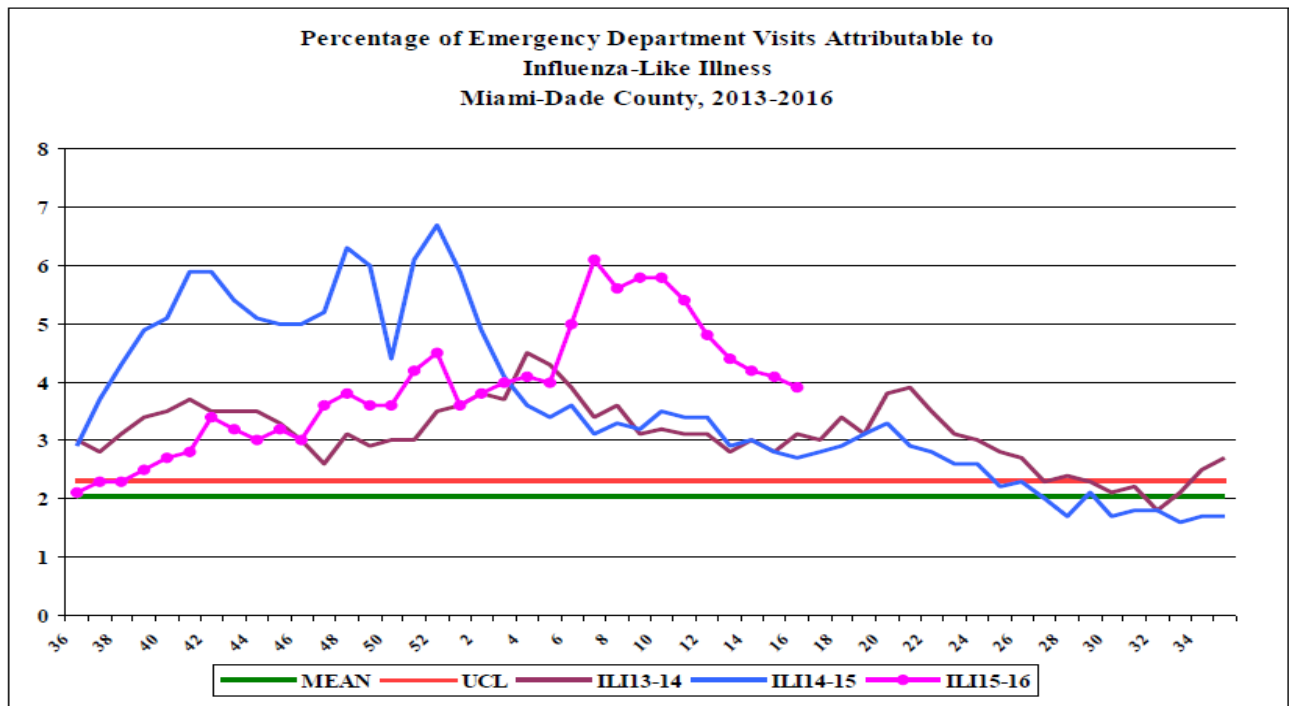
National Public Health Week 2016

The Employee Activities Committee at the Florida Department of Health in Miami-Dade County celebrated National Public Health Week (NPHW) during the week of April 4th – 10th. Team members across all programs participated in this nationwide initiative, which is coordinated by the American Public Health Association (APHA). The week was full of educational and fun-filled challenges designed to showcase the efforts of public health professionals and foster a culture of health in the workplace. Daily activities consisted of a 10,000 step challenge, “taste the rainbow” lunch contest, Wheel of Public Health trivia, and a collage highlighting the many diverse reasons our team chose a career in public health through the Centers for Disease Control and Prevention’s “I am a Public Health Nerd because...” campaign. We here at DOH-Miami-Dade would like to formally thank all those who participated in NPHW this year. Together, we can create the healthiest nation in one generation.

For more information on the initiative and to take the pledge to be part of “Generation Public Health,” please visit <http://www.nphw.org/>.



Influenza-Like-Illness, All Age



During this period, there were 24,842 ED visits; among them 966 (3.9%) were ILI. At the same week of last year, 2.7% of ED visits were ILI.

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

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**.

Childhood Lead Poisoning Prevention Program305-470-6877
Hepatitis305-470-5536
Immunizations or outbreaks305-470-5660
HIV/AIDS Program305-470-6999

STD Program305-575-5430
Tuberculosis Program305- 575-5415
Immunization Service305-470-5660
To make an appointment.....786-845-0550

For more information, please contact

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 2016

Diseases/Conditions	2016 Current Month	2016 Year to Date	2015 Year to Date	2014 Year to Date
HIV/AIDS				
AIDS*	81	156	97	112
HIV	145	415	353	299
STD				
Infectious Syphilis*	38	93	74	81
Chlamydia*	1119	2859	2185	2448
Gonorrhea*	260	627	435	505
TB				
Tuberculosis**	9	21	23	22
Epidemiology, Disease Control & Immunization Services				
Epidemiology				
Campylobacteriosis	15	61	60	63
Chikungunya Fever	0	0	6	0
Ciguatera Poisoning	0	0	2	4
Cryptosporidiosis	0	5	4	6
Cyclosporiasis	0	0	0	0
Dengue Fever	2	7	4	5
Escherichia coli, Shiga Toxin-Producing	0	2	3	4
Encephalitis, West Nile Virus	0	0	0	0
Giardiasis, Acute	23	43	49	52
Influenza Novel Strain	0	0	0	0
Influenza, Pediatric Death	0	0	0	1
Legionellosis	1	1	5	4
Leptospirosis	0	0	1	0
Listeriosis	0	0	0	0
Lyme disease	0	0	0	0
Malaria	1	1	0	1
Meningitis (except aseptic)	0	1	2	5
Meningococcal Disease	0	0	4	3
Salmonella serotype Typhi (Typhoid Fever)	0	0	2	0
Salmonellosis	33	102	90	100
Shigellosis	3	22	29	189
Streptococcus pneumoniae, Drug Resistant	0	1	0	19
Vibriosis	0	0	1	2
West Nile Fever	0	0	0	0
Immunization Preventable Diseases				
Measles	0	0	0	0
Mumps	2	2	0	0
Pertussis	2	7	5	7
Rubella	0	0	0	0
Tetanus	0	0	0	0
Varicella	9	26	10	11
Hepatitis				
Hepatitis A	1	4	5	6
Hepatitis B (Acute)	0	1	4	4
Healthy Homes				
Lead Poisoning	15	24	14	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.