



# Epi Monthly Report

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## 2016 Influenza Season

### Time to Think About the Flu Shot

#### Flu Season

As the days become shorter and begin to cool off, residents of Miami-Dade County should begin preparing themselves for another season of influenza. Every year in the United States, millions of people are sickened and thousands die from seasonal influenza, commonly known as “Flu.” Flu is caused by influenza viruses that attack the respiratory system, causing moderate to high fever, body aches, cough, congestion, sore throat, chills, and extreme fatigue. Elderly adults, children, pregnant women, and immunocompromised individuals are at a higher risk of developing complications from influenza infection, such as sinus or ear infections and, more seriously, pneumonia. Receiving an annual flu vaccine is the best way to reduce one’s risk of contracting influenza viruses and spreading them to other people.

#### Another Year, Another Flu Shot

Flu season is different every single year due to small genetic changes in the influenza viruses as they replicate over time. Because flu viruses evolve and change every year, a new flu vaccine must be received annually to protect oneself against infection. Global influenza surveillance data is used to determine which viruses are most likely to circulate and affect human populations each flu season, and vaccine compositions are determined months in advance so that clinical professionals can be prepared. Seasonal flu vaccines are most effective when the vaccine compositions for the current season

match the predominant viruses that are being among humans.

#### This Season’s Vaccine

For the 2016-2017 Flu Season, the Advisory Committee on Immunization Practices (ACIP) recommends the inactivated influenza vaccine (IIV) or the recombinant influenza vaccine (RIV). Both trivalent (three component) and quadrivalent (four component) vaccines will be available. Vaccines that come in the form of nasal sprays are not recommended for the 2016-2017 flu season.

#### When the Shot “Doesn’t Work”

The ability of a flu shot to protect an individual from influenza infection depends on the age and health status of the person getting the vaccine, and on the similarity between the viruses or virus in the vaccine and those that are circulating during the current flu season. If a person gets the flu shot and still contracts influenza, it might seem that the flu shot “didn’t work.” In fact, it could be that, during that particular season, the influenza vaccine was not a good match for the circulating viruses. It could also be that the person contacted flu during the 2 weeks after vaccination while the vaccine was still taking effect. Even so, public health studies conclude that getting a vaccine each year is the most effective way to prevent influenza infection, and that getting a flu shot could even reduce the severity of a person’s illness should they become infected by a strain not covered by the vaccine.

**Who should get the flu shot, and who shouldn't**

Everyone aged 6 months and older can get a flu shot, with some exceptions. There are some individuals who should not get a flu shot, such as people who have a severe allergy to the vaccine. People who have a history of a sickness of the nervous system, who are allergic to eggs, and who are already feeling ill should talk to their medical care provider before receiving a flu shot. Others, however, should be sure to make getting a flu shot a special priority:

- People with chronic respiratory conditions such as COPD or asthma
- People with chronic conditions such as diabetes
- Young children between the ages of 6 months and 4 years old
- Those who are severely obese
- Immunosuppressed individuals
- Women who are pregnant or who will be pregnant during flu season
- Elderly individuals
- Healthcare workers

Flu shots are offered in many hospitals, clinics, pharmacies, health departments, places of employment, and schools. A person can get a flu vaccine even if they do not have a primary health care provider.

**Other Prevention Strategies**

Even though the flu shot is the best way to prevent flu, there are other methods that can provide added protection to individuals who are hoping to avoid infection.

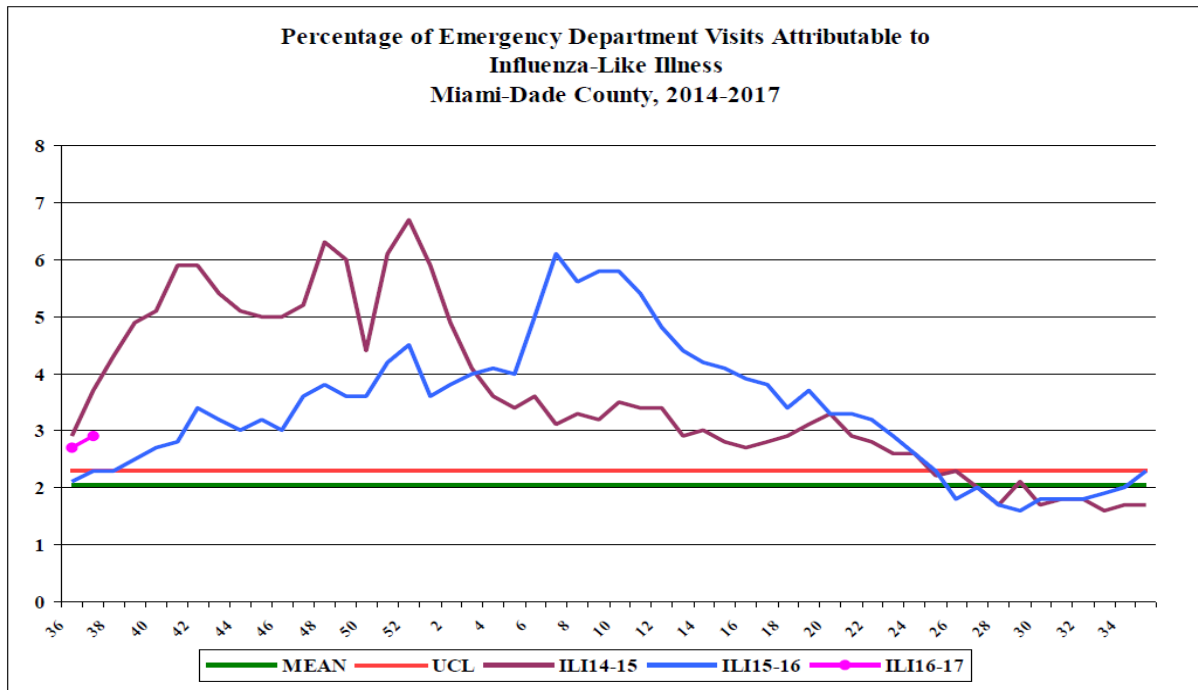
Everyday prevention practices include limiting one's contact with sick individuals, washing one's hands often with soap and water, keeping one's hands away from the eyes, nose and mouth, and disinfecting surfaces that may be contaminated with flu germs.

If a person does get sick with flu, they can still take measures to avoid spreading the virus to others. If you become sick with flu, stay home while you are ill, and do not return to work or school until you have gone at least 24 hours without fever, and without having to take medications to reduce fever. Cover your nose and mouth with a tissue when you cough or sneeze, or try to cough and sneeze into the crook of your elbow. Wash your hands often with soap and water, and take time to rest and drink plenty of fluids. Antivirals can be prescribed to make your symptoms milder and to shorten the amount of time that you are ill. These medicines have to be prescribed by a physician.

For more information on the flu shot, flu season, and flu prevention strategies, you can visit

<http://www.floridahealth.gov/programs-and-services/prevention/flu-prevention/flu-facts.html>

**Influenza-Like-Illness, All Age**



During this period, there were 29,788 ED visits; among them 858 (2.9%) were ILI. At the same week of last year, 2.3% of ED visits were ILI.

**PARTICIPATE IN INFLUENZA SENTINEL PROVIDER SURVEILLANCE**

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

**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

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 August 2016

Diseases/Conditions	2016 Current Month	2016 Year to Date	2015 Year to Date	2014 Year to Date
<b>HIV/AIDS</b>				
AIDS*	42	371	323	370
HIV	141	1088	918	825
<b>STD</b>				
Infectious Syphilis*	36	284	207	240
Chlamydia*	1246	8369	6662	6473
Gonorrhea*	315	1922	1272	1423
<b>TB</b>				
Tuberculosis**	8	68	70	92
<b>Epidemiology, Disease Control &amp; Immunization Services</b>				
<b>Epidemiology</b>				
Campylobacteriosis	42	217	461	263
Chikungunya Fever	0	0	15	31
Ciguatera Poisoning	3	3	9	17
Cryptosporidiosis	9	21	16	20
Cyclosporiasis	1	2	2	1
Dengue Fever	3	11	12	22
Escherichia coli, Shiga Toxin-Producing	1	7	14	18
Encephalitis, West Nile Virus	0	0	0	0
Giardiasis, Acute	25	149	113	146
Influenza Novel Strain	0	0	0	0
Influenza, Pediatric Death	0	0	0	1
Legionellosis	6	11	14	14
Leptospirosis	0	0	1	0
Listeriosis	1	5	2	2
Lyme disease	0	0	3	4
Malaria	2	8	5	5
Meningitis (except aseptic)	1	7	3	13
Meningococcal Disease	0	0	6	7
Salmonella serotype Typhi (Typhoid Fever)	0	1	2	1
Salmonellosis	82	431	402	395
Shigellosis	8	54	100	615
Streptococcus pneumoniae, Drug Resistant	1	3	0	36
Vibriosis	2	6	13	5
West Nile Fever	0	0	0	0
<b>Immunization Preventable Diseases</b>				
Measles	0	4	0	0
Mumps	2	4	3	0
Pertussis	2	16	23	24
Rubella	0	0	0	0
Tetanus	0	0	0	0
Varicella	4	51	28	34
<b>Hepatitis</b>				
Hepatitis A	6	26	30	23
Hepatitis B (Acute)	3	10	10	7
<b>Healthy Homes</b>				
Lead Poisoning	9	72	64	46

\*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.