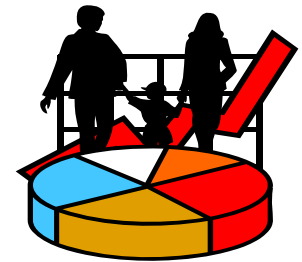


Epi Monthly Report



Drowning and Near-Drowning to Children 0-18 Years of Age, Miami-Dade County, 2000-2004

Inside this issue:

Drowning is the third leading cause of death to Miami-Dade County children aged 18 years and under and the leading cause of all deaths to children aged 1-4 years. Between 2001-2003, Miami-Dade County's drowning rate for children aged 4 years and under was 42% higher than the national rate but 65% lower than the rate for the state. For every child 18 years and younger who drowns, three more are hospitalized for nonfatal submersion injuries. Nonfatal incidents can cause brain damage that result in long-term disabilities ranging from memory problems and learning disabilities to the permanent loss of function.

to drown or suffer a near-drowning than White children. Furthermore, the drowning and near-drowning rate for African-American children aged 4 and under has been increasing over the past five years (Figure 2).

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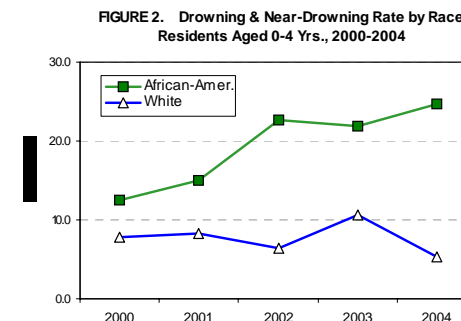
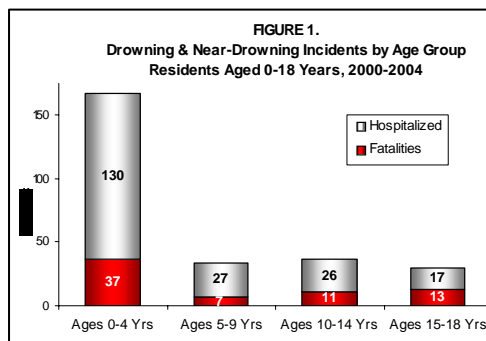
Groups at Risk

Children: Between 2000-2004, 68 children died from drowning and another 200 were hospitalized for non-fatal submersion injuries.

Children aged 4 years and under were most at-risk, accounting for 55% of drowning and 65% of near-drowning incidents (Figure 1).

Males: Males aged 18 and under accounted for 77% of drowning and 65% of near-drowning incidents. However, 2004 was the first year that both the drowning and near-drowning rate was higher for females than males.

African-Americans: Among children 18 years and under, African-American children were more than 3 times likely



Location of Incident

The location of drowning and near-drowning incidents to children vary by age:

Swimming pools were the site of more than 1/2 of all drowning and near-drowning incidents (Figure 3).

Children 4 and under accounted for

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83% of swimming pool drownings and 70% of the near-drownings.

Bathtubs were responsible for 4 fatal and 17 non-fatal incidents; 10 involved infants 1 year and under.

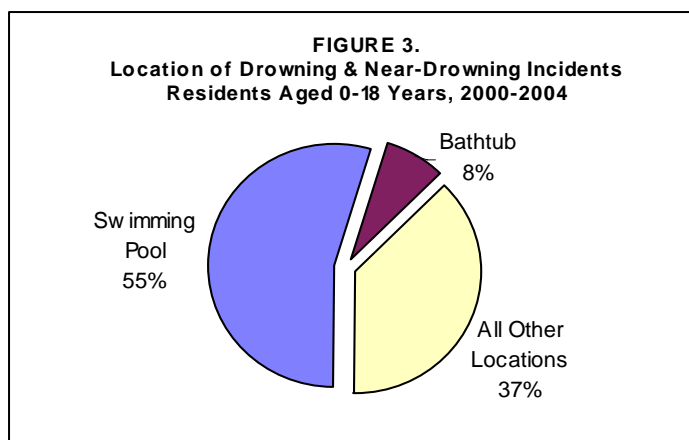
Older children were more likely to drown in open water such as lakes, rivers and ocean (61% of age 5–14 drownings; 54% of age 15-18 drownings).

The three communities that experienced the greatest number of child drowning and near-drowning incidents in 2000-2004 were:

the 33157 zip code (Cutler Ridge, Palmetto Bay area: 3 drownings, 15 near-drownings);

the 33162 zip code (North Miami Beach area: 5 drownings, 11 near-drownings);

the 33177 zip code (Richmond West area: 2 drownings, 10 near-drownings).



Drowning Prevention

The Ounce of Prevention Fund of Florida in collaboration with the Florida Department of Health developed the following drowning prevention recommendations. Children can drown in a matter of seconds. If a child is missing, check the water first.

- There is no substitute for adequate supervision. Children need to be watched. Never leave children unattended in or around pools or spas - not even for a second.
- Never allow a young child to be responsible for a younger sibling or playmate.
- Children drown in pools, spas, buckets, toilets and bathtubs. A child can drown in as little as two inches of water.
- Empty buckets immediately after use and store them upside down and out of a child's reach.
- Keep toilet seats down and consider using a lock

or toilet clip to prevent toddlers from opening the toilet

A child can drown in less time than it takes to answer the telephone.

The key to preventing swimming pool tragedies is to have layers of protection. This includes placing barriers around your pool to prevent access, using pool alarms, closely supervising your child and being prepared in case of an emergency.

- Never disable an alarm or prop open the gate to a pool barrier.
- Learn to swim and teach children how to swim.
- Flotation devices and swimming lessons are not a substitute for adult supervision.
- Remove toys from in and around the pool area, especially riding toys.
- Knowing cardiopulmonary resuscitation (CPR) can be a lifesaver.

Pools Inspection List

Is your pool surrounded by a 5 foot 6 inch high or higher fence or barrier?

Is the fence childproof with bars not more than 4 inches apart? If it is a chain link fence, the diamond shaped opening should be no larger than 1 3/4 inches.

Are the gates self-closing and self-latching? The self latching mechanism should be out of the reach of children.

Is the self-latching mechanism at least 54 inches, from the bottom of the gate? If less than 54 inches, the latching mechanism should be located on the pool side of the gate.

Are all the gates kept locked?

Are all exit doors and windows leading from the house to the pool kept locked and secured?

Are pool rules posted in a visible location?

Is rescue equipment kept near the pool? A ring buoy with an attached line and/or a long handled hook.

Is the pool cover completely removed or properly installed? Never use a pool with its pool cover partially in place.

Are steps and ladders leading to an above ground pool secured, locked or removed when the pool is not in use?

Are there plenty of approved PFD's (Personal Flotation Devices) available?

Are the diving board and any slides in safe



operating condition?

Does the hot tub or spa have a solid, locking cover, and is the cover in place and locked when the spa or hot tub is not in use

Information provided by:

Injury Free Coalition for Kids :

Judy Schaechter, MD

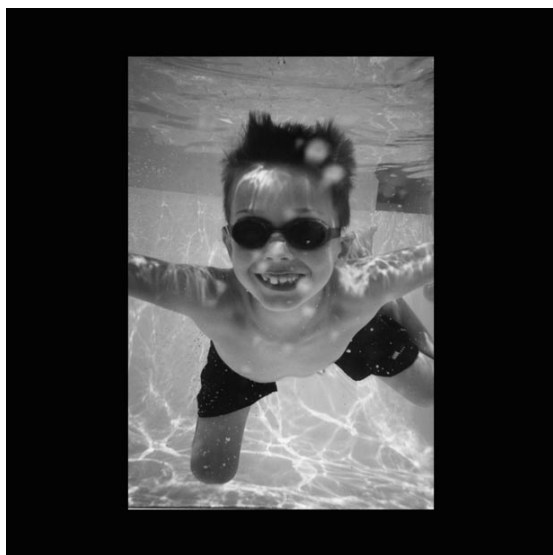
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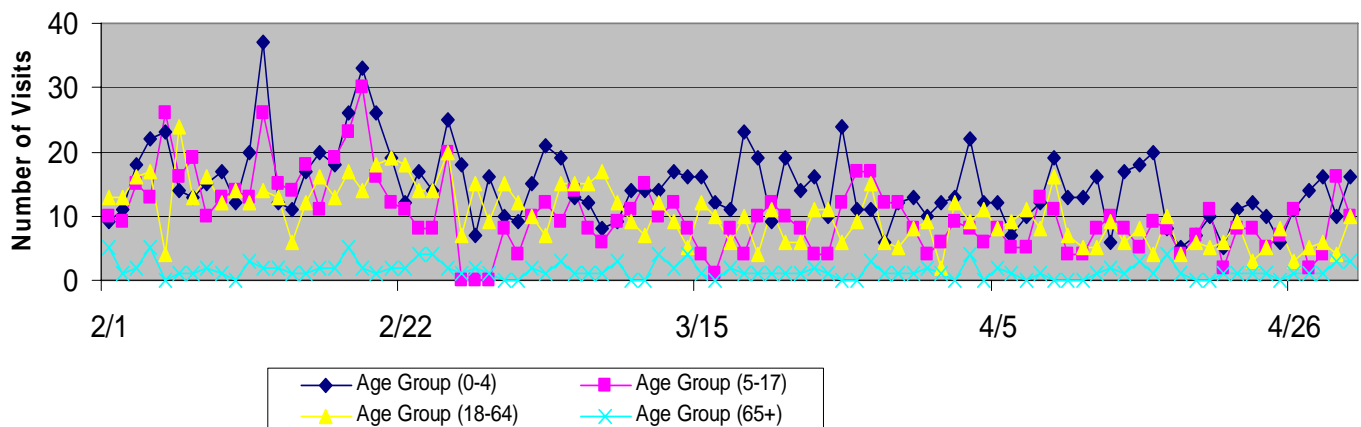
**Influenza-Like Illness (ILI) Surveillance
Miami-Dade County, February-April 2006**

On a daily basis, 8 Miami-Dade County hospitals transmit Emergency Department chief complaint data to the Office of Epidemiology and Disease Control. This data is then categorized into several syndrome categories. Influenza-like illness includes complaints of fever with either cough or sore throat. It can also include a chief complaint of "flu".

Since February, overall ILI activity in the county has decreased (Figure 1). The number of daily ILI visits in the 0-4 group peaked to 37 on February 12. In February, there were a median of 17, 14, 14, and 2 ILI visits per day in the 0-4, 5-17, 18-64, and 65+ age groups respectively. In March, these numbers declined to 13, 9, 10, and 1 median visits per day in the respective age groups. In April, these numbers further declined to a median of 12, 8, 6.5, and 1 visits per day in the age groups.

The total number of ILI visits across age groups for ILI in February was 1341. In March, this number dropped to 1056. In April, this number dropped further to 834 visits.

Figure 1. Influenza-Like Illness Based on Emergency Department Chief Complaint, Miami-Dade County, February-April 2006

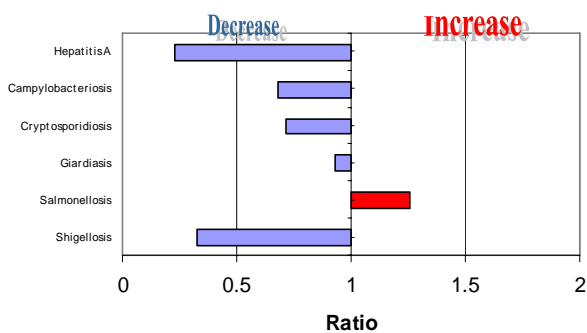


TO REPORT ANY DISEASE AND FOR INFORMATION CALL:

Office of Epidemiology and Disease Control

Childhood Lead Poisoning Prevention Program	(305) 470-6877
Hepatitis	(305) 470-5536
Other diseases and outbreaks	(305) 470-5660
HIV/AIDS Program	(305) 470-6999
STD Program	(305) 325-3242
Tuberculosis Program	(305) 324-2470
Special Immunization Program	(786) 845-0550

Selected Notifiable Disease Reports, Miami-Dade County, Comparison with Historical Data, April, 2006



*Ratio of current month total to mean of 15 month totals (from previous, comparable, and subsequent month periods for the past 5 years).

About the Epi Monthly Report

The Epi Monthly Report is a publication of the Miami-Dade County Health Department, Office of Epidemiology and Disease Control. 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, contact Rodlescia Sneed, Managing Editor, at 305-470-5660.

AVIAN FLU WATCH



Unless indicated, information is current as of May 23, 2006

- **Since 2003, 218 human cases of avian influenza (H5N1) have been confirmed** by the World Health Organization (WHO). Of these, 124 have been fatal.
- **Countries with confirmed human cases** include Cambodia, China, Djibouti, Indonesia, Thailand, Vietnam, Iraq, Azerbaijan, Egypt and Turkey.
- **No human cases of avian influenza (H5N1) have been reported in the United States.**
- **The most recently confirmed human H5N1 case occurred in Indonesia.** The case was part of a cluster of seven family members who contracted the virus. All confirmed cases in the cluster can be directly linked to close and prolonged exposure to a patient during a phase of severe illness. Although human-to-human transmission cannot be ruled out, the search for a possible alternative source of exposure is continuing.
- **H5N1 has been confirmed in birds in several other countries since 2003.** H5N1 has been documented in birds in more than 30 countries in Europe & Eurasia, South Asia, Africa, East Asia and the Pacific, and the Near East. For a list of these countries, visit the World Organisation for Animal Health Web Site at http://www.oie.int/downld/AVIAN%20INFLUENZA/A_AI-Asia.htm (Updated 05/18/06).
- **No restrictions on travel to affected countries have been imposed.** Travelers should avoid contact with live poultry and monitor their health for ten days after returning from an affected country.

SOURCES: World Health Organization; World Organisation for Animal Health; Centers for Disease Control and Prevention



Monthly Report
Selected Reportable Diseases/Conditions in Miami-Dade County,
April 2006

Diseases/Conditions	2006 this Month	2006 Year to Date	2005 Year to Date	2004 Year to Date	2003 Year to Date	2002 Year to Date
AIDS ^{Provisional}	54	415	491	462	361	389
Animal Rabies	0	0	0	0	0	0
Campylobacteriosis	8	37	30	39	37	29
<i>Chlamydia trachomatis</i>	404	1451	1241	1254	1367	1504
Ciguatera Poisoning	0	0	0	0	0	0
Cryptosporidiosis	1	5	11	2	4	1
Cyclosporiasis	0	0	0	0	0	0
Dengue Fever	0	0	0	1	0	1
Diphtheria	0	0	0	0	0	0
<i>E. coli</i> , O157:H7	0	0	0	1	0	0
<i>E. coli</i> , Non-O157	0	0	0	0	0	0
<i>E. coli</i> , Other	0	0	0	0	0	0
Encephalitis (except WNV)	0	0	0	1	0	1
Encephalitis, West Nile Virus	0	0	0	0	0	0
West Nile Fever	0	0	0	0	0	0
Giardiasis, Acute	21	61	49	92	40	52
Gonorrhea	168	518	546	454	602	698
Hepatitis A	2	12	18	6	10	29
Hepatitis B	4	8	17	16	15	4
HIV ^{Provisional}	79	385	526	530	546	641
Lead Poisoning	8	40	36	83	52	62
Legionnaire's Disease	0	0	1	1	0	0
Leptospirosis	0	0	0	0	0	0
Lyme disease	0	0	0	1	0	0
Malaria	1	4	0	5	5	4
Measles	0	0	0	0	0	0
Meningitis (except aseptic)	4	5	3	1	1	2
Meningococcal Disease	0	6	3	8	3	7
Mumps	0	0	0	0	0	0
Pertussis	0	3	1	2	0	1
Polio	0	0	0	0	0	0
Rubella	0	0	0	0	0	0
Rubella, Congenital	0	0	0	0	0	0
Salmonellosis	47	112	101	90	108	76
Shigellosis	8	31	88	70	101	61
<i>Streptococcus pneumoniae</i> , Drug Resistant	13	42	3	26	45	42
Syphilis, Infectious	13	76	54	67	62	60
Syphilis, Other	34	149	200	315	376	356
Tetanus	0	0	0	0	0	0
Toxoplasmosis	0	0	0	1	3	7
Tuberculosis ^{Provisional}	14	75	58	72	80	73
Typhoid Fever	0	2	2	1	1	1
<i>Vibrio cholera</i> Type O1	0	0	0	0	0	0
<i>Vibrio cholera</i> Non-O1	0	0	0	0	0	0
<i>Vibrio</i> , Other	0	0	0	0	1	0

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

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

