



Public Health LOOK OUT!

- November is **National Alzheimer’s Disease Awareness Month!** Alzheimer’s disease is a progressive brain disorder that impacts memory, thinking and language skills, and the ability to carry out simple tasks. Alzheimer’s disease is one of the top 10 leading causes of death in the United States, with more than 6.2 million Americans living with the disease. The goal of this month is to raise awareness about Alzheimer’s disease and help support the millions of Americans affected. To learn more visit alzfdn.org!
- **World Pneumonia Day** is recognized on November 12th to heighten awareness on pneumonia and the impacts of this illness among the most vulnerable populations worldwide. Pneumonia, an infection of the lungs, is the biggest infectious killer of adults and children. This day is dedicated to spreading awareness and advocating for global action against this disease. For more information or learn how you can get involved visit stoppneumonia.org!
- **The Great American Smokeout** is November 17th. This event encourages people to quit smoking for 24 hours, because if you can stop for 24 hours then you can quit permanently. Smoking is the largest preventable cause of death in the world, causing over 480,000 deaths every year. Quitting smoking is not easy but with continued help and support, anyone can do it! Visit to learn more on how you can stop smoking visit Cancer.org.

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

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Click the image to the left to watch the video.

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Safety First! Food Safety Tips Amid the Holidays

By: Yoselin Garcia and Ozair Ilyas

As we approach the holidays, food safety awareness is essential to prevent foodborne illness from ruining the joy and family fun we look forward to all year long! Thanksgiving is a major holiday in the United States, with up to 88% of people reporting to consume turkey during their Thanksgiving meal.¹ Whether you are cooking a whole turkey, a large dinner, or an individual meal, exercising food safety is essential to prevent the transmission of foodborne diseases. Foodborne diseases are defined by the World Health Organization (WHO) as diseases of infectious or toxic nature which are caused by the consumption of contaminated food or water.² Each year, globally, approximately 600 million people become ill, and 420,000 deaths occur due to the consumption of contaminated food.³ While many pathogens have been identified to cause foodborne disease, common causative bacteria are *Staphylococcus aureus* (*S. aureus*), *Salmonella* species, *Campylobacter* species, *Listeria monocytogenes* (*L. monocytogenes*) and *Escherichia coli* (*E. coli*).⁴



Symptoms and severity of food poisoning may vary depending on the pathogen consumed. However, the most common symptoms include fever, diarrhea, vomiting, nausea, abdominal cramps, and an upset stomach.⁵ The onset and length of symptoms vary depending on the pathogen lasting anywhere from hours to weeks. For example, the symptoms of *salmonella* may begin 6 hours to 6 days but may last between 4 to 7 days.⁵ Meanwhile, symptoms of *staphylococcus aureus* will develop within 30 minutes to 8 hours and last for only a day.⁵ If severe symptoms including bloody diarrhea, high fever, frequent vomiting, signs of dehydration, and diarrhea lasting for longer than 3 days occur, contact your primary care provider.⁵ Food poisoning may cause adverse long term health effects such as chronic arthritis, brain and nerve damage, and kidney failure.⁵ While food poisoning can affect everyone, there are some groups that are more at risk. Adults aged 65 or older, children younger than 5 years, people with weakened immune systems, and pregnant women are at higher risk of illness and severe disease.⁶ In healthy people, symptoms often resolve without the need for medical treatment.

To prevent food poisoning and food-borne illness during the holiday season, make sure to keep food separated, cook foods thoroughly, keep foods out of the range of temperatures between 40°F to 140°F, use pasteurized eggs instead of raw eggs, properly wash hands, thaw your turkey safely, and avoid consuming raw dough or batter.⁷ Harmful bacteria such as *Salmonella* and *E. coli* can live on food products, so it is important to take all the steps necessary to prevent becoming ill. At home, you can use these 4 steps to prevent food poisoning:⁸

- 1. Clean** Make sure to wash your hands and any surfaces that may come in contact with food often. Always wash your hands when handling uncooked meats and rinse fruits and vegetables.
- 2. Separate** Separate raw meat, seafood, and eggs from other prepared foods to avoid cross-contamination. The juices from the raw food products can spread germs and contaminate other foods.
- 3. Cook** When cooking food, make sure it gets to an internal temperature that is high enough to kill potential germs. Use a thermometer to accurately check the internal temperature of your food. Cuts of beef, fish, lamb, and pork should be cooked to 145°F. Ground meat should be cooked to 160°F and poultry and leftovers should be cooked to 165°F.
- 4. Chill** Bacteria in food can multiply rapidly if kept between temperatures of 40°F and 140°F. Make sure to keep your refrigerator at 40°F or lower and your freezer at 0°F or lower. Refrigerate any perishable food and thaw frozen food in the refrigerator or cold water so bacteria will not multiply quickly.

4 STEPS TO FOOD SAFETY



How to Safely Prepare Your Holiday Turkey

If you are preparing turkey for your holiday meal, make sure to take precautions. Turkey can contain bacteria that cause illness such as Salmonella and Campylobacter, so you should follow the proper steps to ensure food safety.⁹

⇒ Store Turkey Properly

Frozen raw turkey should be stored in the freezer at 0°F or below. Fresh raw turkey can be stored in the refrigerator for 1 to 2 days before cooking.

⇒ Thaw Turkey Safely

Allow approximately 24 hours of thawing for each 4 to 5 pounds of turkey. Make sure to keep turkey in leak proof bag while thawing to prevent the juices from contaminating other food.

⇒ Handle Turkey Correctly

Wash your hands with soap and water before and after handling the turkey. Use a separate cutting board for the turkey, never place other food on the cutting board used for the turkey.

⇒ Cook Stuffing

Cook stuffing outside of the turkey. This makes it easier to tell if it is cooked properly. Use a food thermometer to confirm it is at the appropriate temperature.

⇒ Cook Turkey

Make sure turkey is cooked properly by checking it with a food thermometer.

⇒ Leftovers

Refrigerate any leftovers within 2 hours to prevent food poisoning.

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Dengue in Miami-Dade County, 2017-2021.

By: Yoselin Garcia and Ozair Ilyas

Background

Dengue is a vector-borne disease that is transmitted to humans through the bite of infected mosquitos. Dengue, caused by a virus of the Flaviviridae family, is comprised of four serotypes (DENV1-4).⁶ Because these serotypes are distinct, subsequent infection of dengue can occur and increase the risk of developing severe dengue.⁶ Infected female mosquitos of the *Aedes* species such as *Aedes albopictus* and *Aedes aegypti* transmit Dengue, and are responsible for the transmission of other vector-borne diseases such as Zika virus, yellow fever, and chikungunya¹. The mosquitos that spread dengue are found in tropical and subtropical regions around the world. Globally, almost 4 billion people live in areas with risk of dengue and an estimated 400 million dengue infections occur annually.¹ Of these infections, about 100 million people become ill from infection and 40,000 die from severe disease.¹

Transmission

Dengue is primarily transmitted through the bite of infected *Aedes* species mosquitos. These mosquitos may become infected with dengue virus after feeding on a person who is viremic with dengue. This includes persons who are symptomatic, pre-symptomatic, and/or asymptomatic. An infected mosquito may then transmit dengue approximately 8-12 days after virus ingestion and remains capable to transmit virus through the course of its life.⁶ Human to mosquito transmission may occur 2 days before symptom onset until 2 days after fever has resolved. Infections due to dengue transmission via blood products, organ donation, blood transfusions, and maternal transmission (infected pregnant mother to baby) have also been reported.⁶

Symptoms

While most dengue cases are asymptomatic or develop mild disease, dengue can manifest as a severe, flu-like illness. Approximately one in four people infected will develop symptoms.³ Mild symptoms of dengue include fever accompanied by nausea, vomiting, rash, eye pain, and muscle, joint or bone pain. Symptoms generally last between two to seven days. Because there is no specific medicine used in the treatment of dengue, it is important to rest, stay hydrated, and manage symptoms with acetaminophen to reduce pain and fever.³ Of those who get sick with dengue, nearly 1 in 20 will have a severe case.³ Symptoms of a severe case include belly pain and tenderness, vomiting, bleeding from the nose or gums, blood in stool, vomiting blood, and feeling restless, tired, or unstable. Severe disease may lead to shock, internal bleeding, and death. Signs of a severe case usually occur between 24-48 hours after the fever has gone away.³ Individuals developing signs and symptoms of severe dengue should seek medical care immediately with their healthcare provider or an emergency department. Those at risk for severe dengue include infants, pregnant women, and those who have had a previous dengue infection.

Prevention

Because the mosquitos that spread dengue bite during the day and night, it is essential to protect yourself from mosquito bites. To prevent and lower your risk of infection, use EPA-approved insect repellants. Protect babies and children by dressing them in clothing that covers their arms and legs. Cover strollers and baby carriers with mosquito netting.² Wear clothing that cover your arms and legs and use clothes that have been treated with EPA-approved pesticides, if possible. If available at your residence, use air conditioning and screens on doors and windows, making sure to repair any holes. Prevent mosquitos from laying eggs in or near water by emptying out any still-standing water at least once a week.² If you are residing or traveling to any tropical or sub-tropical regions, make sure to take extra precautions.

Currently, there is a vaccine available for dengue referred to as Dengvaxia, however it is only available for children and adolescents who are between the ages of 9 to 16 who have had a previously confirmed dengue infection and live in an area where dengue is endemic.⁵

Dengue Surveillance in Action

As of November 2, 2022, a total of 469 dengue cases have been reported in Miami-Dade, including 33 locally acquired confirmed cases. Dengue has been reportable in the state of Florida prior to 1992. Until 2009, the last dengue epidemic in Florida occurred in 1934 to 1935. Since then, imported cases have been reported regularly. Multiple dengue outbreaks of locally acquired dengue have been recorded in Florida, including a 2019 outbreak of 88 cases outbreak in Key West and another in 2013 in Martin County. Twenty-four Sporadic cases of locally transmitted dengue have also been identified in central and south Florida. The Florida Department of Health in Miami-Dade conducts surveillance of dengue to rapidly detect and monitor exotic arboviral disease activity and respond efficiently to outbreaks in the community. Surveillance also aids in characterizing risk factors for infection to develop and improve targeted preventive messaging and increase awareness of mosquito-borne illness.⁷

Methods

Confirmed dengue cases reported 01/01/2017 – 12/31/2021 in Miami-Dade were obtained from the Florida Department of Health’s surveillance system, Merlin, by event date. Population estimates obtained from Florida Health Charts were used to calculate incidence rates per 100,000 population in Miami-Dade and Florida. Statistical analysis was conducted using SAS 9.4 and graphically summarized using Microsoft Excel. Geocoding was done to identify clusters using ArcGIS.

Results

A total of 301 confirmed dengue cases were reported in Miami-Dade from 2017 to 2021. The number of cases reported increased from 2017 to 2019, with 217 cases reported in 2019, accounting for 72.1% of all cases. A decreasing trend was observed from 2019 to 2021, with 21 cases reported in 2020 and 14 cases reported in 2021. Figure 1 shows incidence rates of dengue in Miami-Dade remained above the state’s rate from 2017 to 2021, with a peak incidence of 7.7 cases per 100,000 population reported in 2019. Concurrently, rates in Florida peaked to 1.7 per 100,000 population in 2019.

Age and Sex

Incidence rates of Dengue were highest in 2019 when compared to other years observed due to the increase in confirmed cases reported. Figure 2 shows a positive trend of dengue incidence as age increased from age group 25-34 years to 55-64 years of age in 2019. The highest incidence of dengue was observed in age group 55-64 years, which was 15.6 confirmed cases per 100,000. No cases were reported for age group 0-4 during 2017-2021. Incidence among the elderly (age group 85+) was observed in 2019, while no cases were reported among this group across other years observed. In 2018, incidence was highest among ages 45-74, with peak incidence among ages 45-54.

During 2017-2021, 53% of all confirmed dengue cases reported in Miami-Dade were female. While male and female had similar frequency of dengue, more cases were reported among females when compared to males in 2017-2019.

Table 1. Characteristics of Confirmed Dengue Cases in Miami-Dade, 2017-2021.

	Florida n(%)	Miami n(%)
Total # of Cases	537	301
Age Group		
0-5	1 (0.2)	0 (0)
5-14	32 (5.9)	12 (4.0)
15-24	34 (6.3)	16 (5.3)
25-34	45 (8.4)	20 (6.6)
35-44	72 (13.4)	34 (11.3)
45-54	144 (26.8)	80 (26.6)
55-64	107 (19.9)	68 (22.6)
65-74	76 (14.2)	53 (17.6)
75-84	23 (4.3)	16 (5.3)
85+	3 (0.6)	2 (0.7)
Gender		
Female	292 (54.4)	161 (53.5)
Male	243 (45.2)	140 (46.5)
Unknown	2 (0.4)	0 (0)
Race/Ethnicity		
Non-Hispanic White	62 (11.5)	12 (4.0)
Non-Hispanic Black	46 (8.6)	7 (2.3)
Hispanic	401 (74.7)	275 (91.4)
Other	23 (4.3)	6 (2.0)
Unknown	5 (0.9)	1 (0.3)

Figure 1. Incidence Rate of Confirmed Dengue in Miami-Dade and Florida, 2017-2021.

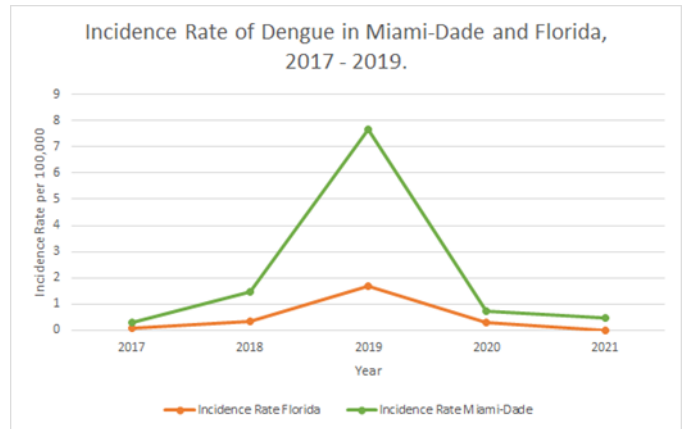
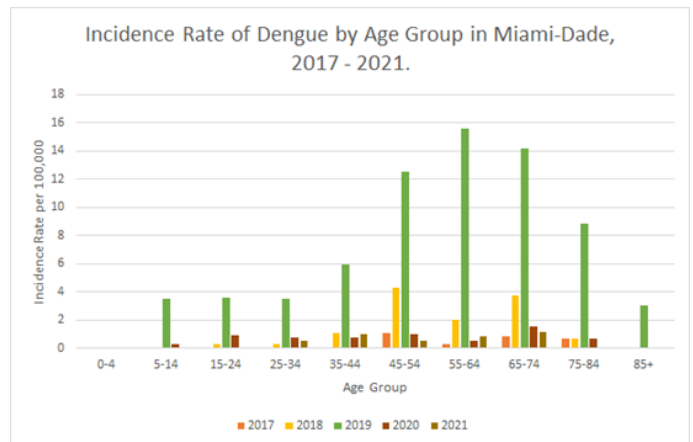


Figure 2. Incidence Rate of Confirmed Dengue by Age Group in Miami-Dade, 2017-2021.



Race and Ethnicity

From 2017-2021 dengue has been reported in all races and ethnicities. Over 275 (92%) of cases during this time were reported in Hispanics. Non-Hispanic Whites reported 12 (4%) cases and non-Hispanic Blacks reported 7 cases (2%). Other races/ethnicities reported 6 cases (2%) and unknown reported 1 case. Incidence rates per 100,000 for race and ethnicity were also calculated cumulatively and during the year of the dengue epidemic, 2019. During 2019, non-Hispanic Whites had an incidence rate of 1.4 per 100,000 and non-Hispanic Blacks had a rate of 0.7 per 100,000. Hispanics were calculated at a rate of 10.4 and Other was at a rate of 4.4. Cumulatively, incidence rates differ greatly when compared to 2019.

Figure 3. Case Frequency of Confirmed Dengue by Week in Miami-Dade, 2017-2021.

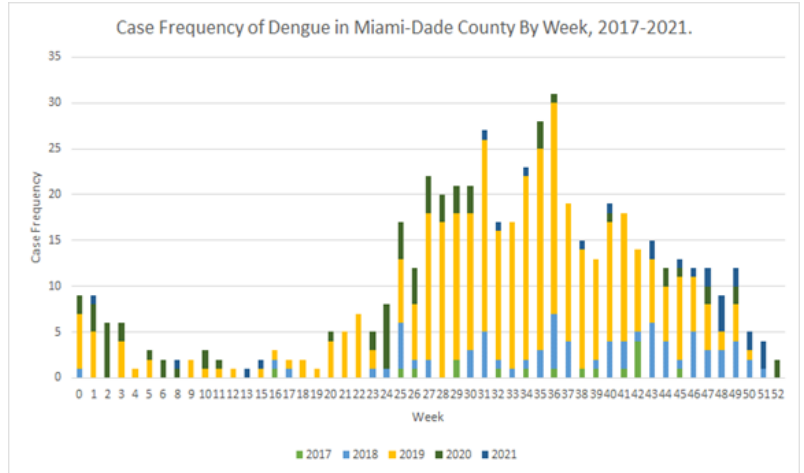
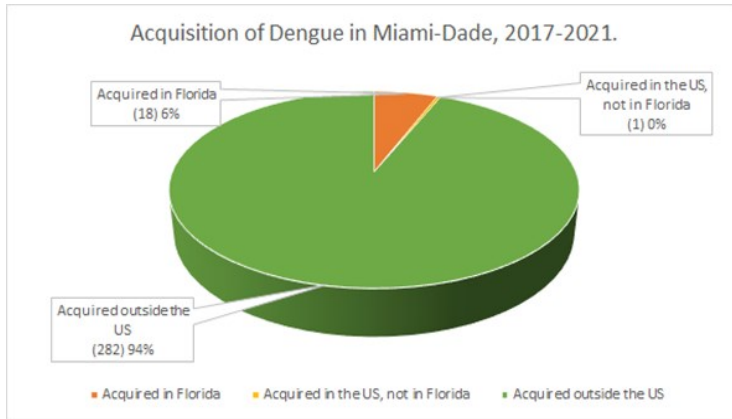


Figure 4. Travel-association of Dengue Infection in Miami-Dade, 2017-2021.



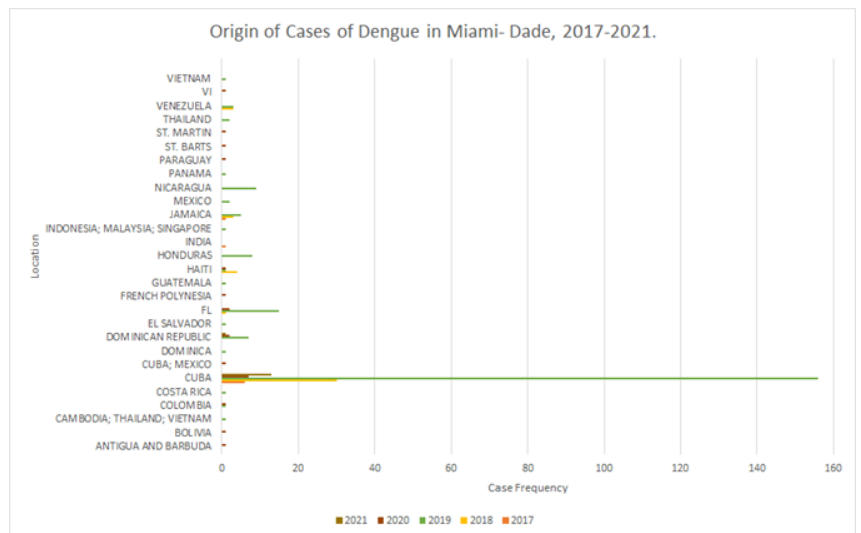
Non-Hispanic White reported a rate of 16.3 while Non-Hispanic Black reported a rate of 10.3. Hispanic had a rate of 21.5 and Other had a rate of 26.14. These rates are much higher cumulatively when compared to incidence in 2019.

Seasonality

Dengue is an illness that can be acquired during any time of the year. As seen in Figure 3, Dengue is prevalent throughout the year. During the summer, weeks 26-39, the risk of dengue is much higher comparatively to other seasons of the year. Also, during Winter, weeks 0-12, the amount of dengue cases is much lower. The difference between summer and winter can likely be attributed to the prevalence of mosquitoes during these time periods as they are increasingly prevalent during the summer as opposed to winter. Across the years of 2017 to

2021, week 36 recorded the largest number of cases with 1 case in 2017, 6 cases in 2018, 23 in 2019, and 1 case in 2020 (Figure 3). The large number of cases in 2019 can be attributed to the Dengue epidemic that was occurring that year.

Figure 5. Confirmed Cases of Dengue in Miami-Dade by Origin, 2017-2021.



Travel-related Dengue and Origin of Infection

Travel-association of dengue in Miami-Dade from 2017-2021 can be found in Figure 4. The majority of cases in Miami-Dade were originally acquired outside of the United States, with 282, or 94%, of them originating from an outside country (Figure 4). As displayed in Figure 5, 70.4% of all imported cases of dengue observed during 2017-2021 reported Cuba as origin country. During 2019, the year of the dengue epidemic, 156 of the cases came from Cuba. Dengue cases originating in Honduras, Jamaica, Nicaragua, and the Dominican Republic were also reported. There were a few cases that originated in Florida with 18 or 6% of cases originating from inside the state (Figure 4). Additionally, there was 1 case that originated in the United States in a state that was not Florida. (Figure 4).

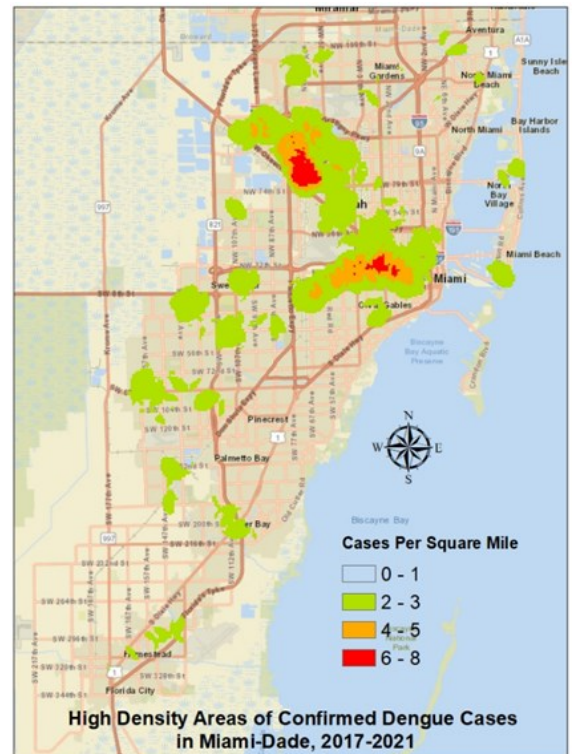
Distribution of Cases in Miami-Dade

Figure 6 exhibits high-density areas of confirmed dengue cases in Miami-Dade from 2017-2021. Areas of high-density are seen in Hialeah, including zip codes 33012, 33016, and 33013. Additionally, City of Miami, zip codes 33125, 33126, 33135 and 33144 are observed to have high density of dengue per square mile (4-8 cases). Dengue can be found in other areas throughout the county of Miami-Dade at lower densities including Homestead, Tamiami, Kendall, Cutlet Bay, North Miami Beach, and Miami Beach.

Discussion

Dengue is the most frequent mosquito-borne infection in the world.⁸ It is endemic to over 125 countries with a yearly incidence rate ranging from 50 million to 100 million and related to 20,000 deaths.⁸ Miami-Dade in Florida is no exception to dengue as seen in the data analysis. While most cases originate outside of the United States, Florida is the one of the few states where there are locally transmitted cases. Also, Miami-Dade accounts for over 50% of all dengue cases in Florida. While incidence rates for Hispanics are comparatively high, this may be attributed to the large number of Hispanics in the Miami-Dade population. From 2017-2021, the majority of cases of dengue are reported in the year 2019. During this year there were 1,475 cases reported in the United States alone.⁹ This large increase in dengue can be attributed to the dengue epidemic that was occurring during this year in the United States and in nearby countries found in the Caribbean and South American region. Several different factors, such as climate change, amplifying the distribution of the *Aedes Aegypti* mosquito, which is responsible for the transmission of the disease.¹⁰ According to the Pan American Health Organization (PAHO), since 1980, there has been a steady increasing trend of reported dengue cases throughout the Americas (North and South America). In 2022 alone, to date, there have been a total of 2,516,928 cases of Dengue reported.¹¹ Another factor to consider is that due to the 2016 Zika outbreak in Miami-Dade, there was an increase in public health surveillance and prevention activities focused on mosquito transmitted diseases. As prevention methods for Zika are also applicable to dengue, this caused a decrease in all diseases transmitted by mosquitoes. However, as cases dropped, less emphasis was put on prevention and surveillance which may have contributed to the epidemic of dengue in 2019. Because most dengue cases are travel-associated and originate outside of the United States in tropical and subtropical regions, the decreasing trend in dengue seen in the 2020 and 2021 data is attributed to the halt in travel during the COVID-19 pandemic. To prevent further dengue epidemics Miami-Dade should continue to monitor dengue transmission and develop interventions that will educate the population on vector-borne disease transmission and mosquito prevention.

Figure 6. High Density Areas of Confirmed Dengue Cases in Miami-Dade, 2017-2021



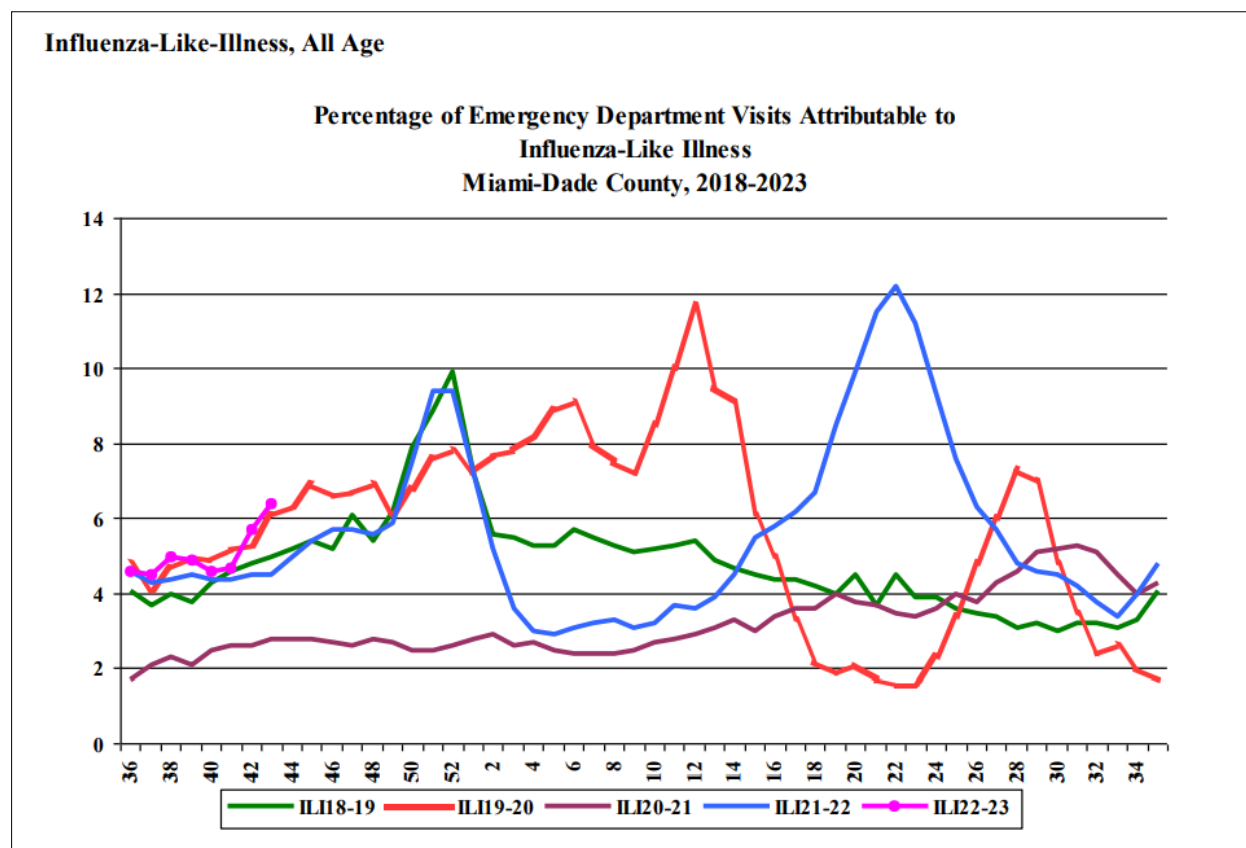
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Florida Department of Health in Miami-Dade County Epidemiology, Disease Control and Immunization Services

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 39,833 ED visits; among them 2,539 (6.4%) were ILI. During the same week last year, 4.5% 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
Stephanie Ramirez at 305-470-5660.



Miami-Dade County Monthly Report

Select Reportable Disease/Conditions

September 2022

Diseases/Conditions	2022 Current Month	2022 Year to Date	2021 Year to Date	2020 Year to Date
HIV/AIDS				
AIDS*	31	312	310	254
HIV	163	1372	990	782
STD				
Infectious Syphilis*	52	512	464	341
Chlamydia*	1185	10754	10692	8502
Gonorrhea*	433	4756	4663	3246
TB				
Tuberculosis**	11	101	73	54
Epidemiology, Disease Control & Immunization Services				
Epidemiology				
Campylobacteriosis	71	500	406	416
Chikungunya Fever	0	0	0	0
Ciguatera Poisoning	3	6	13	11
Cryptosporidiosis	11	61	37	14
Cyclosporiasis	13	68	19	7
Dengue Fever	159	373	1	16
Escherichia coli, Shiga Toxin-Producing	22	146	91	34
Encephalitis, West Nile Virus	0	0	0	0
Giardiasis, Acute	33	210	84	86
Influenza, Pediatric Death	0	0	0	0
Legionellosis	3	30	45	21
Leptospirosis	0	0	1	0
Listeriosis	1	5	9	9
Lyme disease	2	10	4	3
Malaria	1	1	5	2
Meningitis (except aseptic)	2	7	10	4
Meningococcal Disease	2	8	3	2
Salmonella serotype Typhi (Typhoid Fever)	0	0	1	0
Salmonellosis	198	961	774	719
Shigellosis	19	126	50	86
Pneumoniae, invasive disease	5	61	40	37
Vibriosis	3	26	17	36
West Nile Fever	0	0	0	0
Zika Virus (non-congenital)	0	0	0	0
Immunization Preventable Diseases				
Measles	0	0	0	0
Mumps	0	5	3	2
Pertussis	0	4	0	9
Rubella	0	0	0	0
Tetanus	0	0	0	0
Varicella	2	23	12	26
Hepatitis				
Hepatitis A	5	24	5	10
Hepatitis B (Acute)	6	75	27	35
Healthy Homes				
Lead Poisoning	40	289	83	59

*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.

OCTOBER 15



NATIONAL

LATINX AIDS

AWARENESS DAY



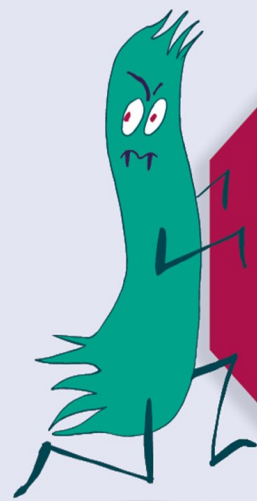
Ending
the
HIV
Epidemic

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

What's New at DOH-Miami-Dade:

- 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 for clinic locations and appointments!



**Clean hands
stop germs.**

*Ask us if we
washed.*

Washing your hands prevents infections.

Learn more: www.apic.org/IPandYou



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.

