

Florida Department of Health in Miami-Dade County

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Mosquito-borne Diseases

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Epidemiology,

Mosquito-borne diseases involve the transmission of viruses and parasites from animal-to-animal, animal-to-person, or person-to-person, without afflicting the insect vectors with symptoms of disease. The most common mosquito-borne diseases in humans that the Florida Department of Health in Miami-Dade (DOH Miami-Dade) investigates include Dengue, malaria, West Nile Virus (WNV), Yellow Fever, St. Louis Encephalitis (SLEV), and Chikungunya Virus (CHIKV).

The mosquito genus Female Anopheles Mosquito carries the malaria parasite. The viral diseases yellow fever, dengue fever and chikungunya are transmitted mostly by Aedes aegypti and Aedes albopictus mosquitoes. Other viral diseases like St. Louis encephalitis and West Nile virus (WNV) are carried by several different mosquitoes.

The DOH-Miami-Dade receives reports of mosquito-borne illnesses through hospital, private physicians' offices, electronic lab reports and faxed reports. After receiving a report of a mosquito-borne illness, DOH Miami-Dade works closely with the Mosquito Control Division at the Miami-Dade Public Works & Waste Management Department in order to protect our community from further spread of the viruses through infected mosquitos.

Since 2011, increases of reported

Dengue cases have been observed in Miami-Dade (2011= 24, 2012= 52, 2013=51, and 2014=9 as of 6/5/14). The majority of these cases were imported, but locally-acquired cases were also seen in 2011 (3 cases), 2012 (2 cases), 2013 (2 cases). As of June 5, 2014, no locallyacquired cases have been reported in 2014. There was one case of locallyacquired WNV reported in 2011 and one imported Eastern Equine Encephalitis Virus (EEE) case in 2012. All confirmed malaria cases in Miami-Dade County were imported (19 in 2011, 9 in 2012, 12 in 2013 and 4 as 6/5/2014). Although Chikungunya Fever is not a reportable disease in Florida, DOH Miami-Dade has had three imported cases since 2006 (2006, 2010, and 2013). All of them were imported from Asian Countries. In December 2013, the Pan American Health Organization (PAHO) and the World Health Organization (WHO) received confirmation of the first local transmission of CHIKV on the Caribbean island of Saint Martin.

To ensure that providers and the community are up to date with the most recent information, DOH Miami-Dade released a Health Advisory with information of Chikungunya for clinicians in January 2014. In May 2014, the Florida Department of Health sent out a press release providing awareness on CHIKV after three imported cases were reported among travelers to



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Florida from the Caribbean islands.

The first imported case of CHIKV since the Caribbean outbreak was reported to the health department in May 2014. In 2014, DOH Miami-Dade has investigated eight confirmed CHIKV cases of which all have been imported with no locally-acquired cases yet (6 from Haiti, 1 from Dominica, 1 from Dominican Republic).

Prevention measures can be taken to prevent infection and spread of mosquito-borne illness. DOH Miami-Dade urges the community to practice drain and cover techniques around their home. These include draining water from garbage cans, house gutters, pool covers, coolers, toys, flower pots or any other containers where sprinkler or rain water has collected and discard any items that may collect water. Clean bird baths and pet water bowls twice a week. While outside during times when mosquitoes are active, cover up. Wear shoes, socks, long pants, and long sleeves. Apply mosquito repellent to bare skin and clothing, and follow directions according to the label. Repellents with DEET, picaridin, oil of lemon eucalyptus, and IR3535 are effective. Use mosquito netting to protect children younger than 2 months.

Mosquito-borne diseases are most common between June and September. In Florida, activity may even be seen even during the winter months. Mosquito-borne illness can spread quickly, do your part to help prevent infection and transmission of these viruses. For further information regarding mosquito-borne illness, please visit http:// www.floridahealth.gov/diseases-and-conditions/ mosquito-borne-diseases/index.html.

See pg. 3 for a DOH Mosquito-borne Illness Prevention flyer.

June is Men's Health June is Men's Health Month: Month

To quote Congressman Bill Richardson (Congressional Record, H3905-H3906, May 24, 1994):

"Recognizing and preventing men's health problems is not just a man's issue. Because of its impact on wives,

Be a Hero. Get it Checked.



Support Men's Health Awareness www.menshealthmonth.org

mothers, daughters, and sisters, men's health is truly a family issue."

The purpose of Men's Health Month is to heighten the awareness of preventable health problems and encourage early detection and treatment of disease among men and boys.

Research shows that:

- Men do not see their doctor for a physical exam as often as women
- Men are dying at the top leading causes of death at higher rates than women
- Men are more likely to be uninsured than women
- Approximately 30,000 men in the US die each year from prostate cancer

Prevent health problems:

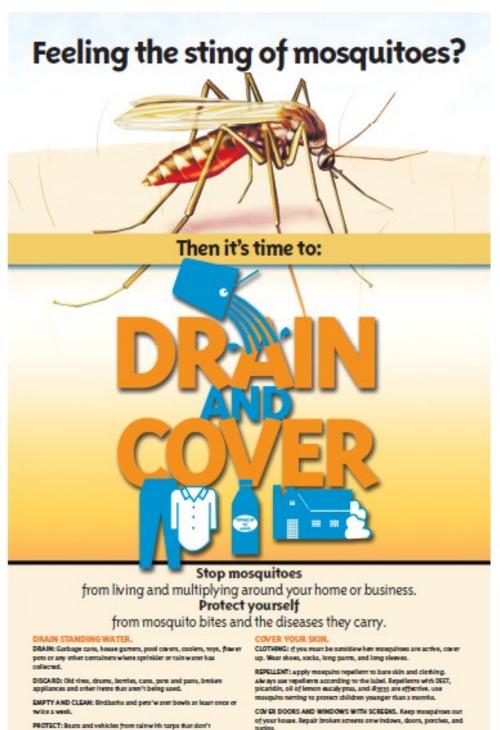
- ⇒ Eat healthy! Incorporate fruit and vegetables into every
- ⇒ Get moving! Stay motivated by being active with the exercises/sports you enjoy.
- Make prevention a priority! Many health problems can be prevented or detected early with regular checkups. Regular screenings include: blood pressure, cholesterol, glucose, prostate health, and more.

For more information visit: www.menshealthnetwork.org, www.menshealthmonth.org, http://www.cdc.gov/Features/ HealthyMen/



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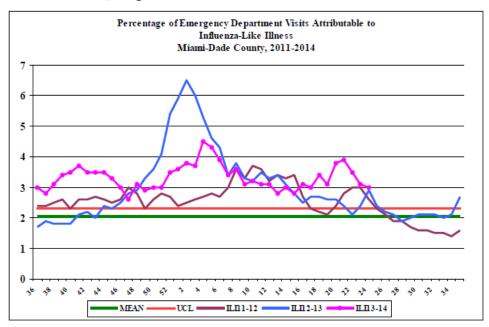
For more educational material and resources from the Florida Department of Health visit: http://www.floridahealth.gov/diseases-and-conditions/mosquito-borne-diseases/resources.html

MAINTAIN: The water balance (pool diveniony) of a imming pools. Empty plants swimming pools when not in use.



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Influenza-Like-Illness, All Age



During this period, there were 22,026 ED visits; among them 657 (3.0%) were ILI. At the same week of last year, 2.9% 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

Lakisha Thomas at 305-470-5660.

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 Tuberculosis Program	305- 575-5415
Immunization Service	305-470-5660
To make an appointment	786-845-0550

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, contact Kathleen Ochipa at (305) 470-6918.



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Miami-Dade County Monthly Report Select Reportable Disease/Conditions May 2014

Discours (Comditions	2014	2014	2013	2012
Diseases/Conditions	Current Month	Year to Date	Year to Date	Year to Date
HIV/AIDS				
AIDS*	77	259	322	223
HIV	131	569	629	434
STD				
Infectious Syphilis*	18	126	136	134
Chlam ydia*	769	3974	3915	3519
Gonorrhea*	138	804	1023	899
TB				
Tuberculosis**	18	54	32	42
Epidemiology, Disease Control &				
Immunization Services				
Epidemiology				
Campylobacteriosis	35	139	100	109
Ciguatera Poisoning	3	7	2	3
Cryptosporidiosis	4	11	9	11
Cyclosporiasis	0	0	1	0
Dengue Fever	1	7	12	3
Escherichia coli, Shiga Toxin-Producing	0	3	2	3
E. coli, Non-O157	0	0	0	0
Encephalitis, West Nile Virus	0	0	0	0
Giardias is, Acute	17	88	100	77
Influenza Novel Strain	0	0	0	0
Influenza, Pediatric Death	0	1	1	2
Legionellosis	3	8	10	3
Leptospirosis	0	0	0	0
Listeriosis	0	1	1	1
Lyme disease	0	1	1	1
Malaria	0	1	5	5
Meningitis (except aseptic)	4	11	11	8
Meningococcal Disease	1	4	10	9
Salmonella serotype Typhy (Typhoid Fever)	0	0	0	0
Salmonellosis	55	188	166	145
Shigellosis	120	436	20	20
Streptococcus pneumoniae, Drug Resistant	6	34	50	36
Toxoplasmosis	0	1	0	2
Vibriosis	0	2	4	1
West Nile Fever	0	0	0	0
Immunization Preventable Diseases				
Measles	0	0	0	0
Mumps	0	0	0	1
Pertussis	4	12	19	23
Rubella	0	0	0	0
Tetanus	0	0	0	0
Varicella	4	23	40	26
Hepatitis				
Hepatitis A	5	13	12	11
Hepatitis B (Acute)	0	6	8	10
Lead	_			a-
Lead Poisoning	4	23	38	27

^{*}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.