

# Epi Monthly Report

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## Hepatitis A in Miami-Dade County

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### Florida Department of Health in Miami-Dade County

#### Epidemiology, Disease Control & Immunizations Services

8600 NW 17th Street,  
Suite 200  
Doral, FL 33126

Tel: 305.470.5660

Fax: 305.470.5533

*Hepatitis A* is a highly contagious liver infection caused by the *hepatitis A* virus. It is usually transmitted by the fecal-oral route, either through person-to-person contact or consumption of contaminated food or water. Hepatitis A is a self-limited disease that does not result in chronic infection. More than 80% of adults with Hepatitis A have symptoms but the majority of children do not have symptoms or have an unrecognized infection. Individuals that have symptoms may experience fever, nausea, abdominal pain, dark urine, joint pain, and jaundice. Antibodies produced in response to Hepatitis A last for life and protect against reinfection.

The number of reported confirmed hepatitis A cases in Miami-Dade County has gradually increased to 47 in 2016 from 28 in 2014. As of April 19, 2017, there were 23 confirmed cases in the county which accounted for 46.9% of Florida's cases.

**Methods:** Data between 2010 and April 19, 2017 was obtained from Merlin based on the onset date, the Florida Department of Health Epidemiology Surveillance System. SAS and GIS were employed to perform data analysis and clustering detection.

**Results:** In 2011 and 2012, the number of confirmed Hepatitis A cases declined to an historical low of 17 and 14 respectively in Miami-Dade County; then the number of cases gradually increased to 47 in 2016. As of April 19, 2017, there were 23 confirmed cases which accounted for 46.9% of Florida's cases (Figure-1). Among the 23 cases, 21 (91.3%) were male, 14 (60.9%) were Hispanic followed by non-Hispanic white 5 (21.7%) and non-Hispanic black 2 (8.7%) as well as other. The age range was from 25 to 75 with a median of 34 years old. Thirteen (56%) of the cases reported were acquired in Florida, 9 (39.1%) were acquired from out of the United States, and one was unknown. Of the 21 male cases, 10 (47.6%) were men who have sex with men (MSM). Geographic clustering was not detected.

**Risk Factors:** Hepatitis A is usually spread when the Hepatitis A virus is taken in by mouth from contact with objects, food (includes frozen or undercooked food), or drinks contaminated by the feces (or stool) of an infected person. Although anyone can get



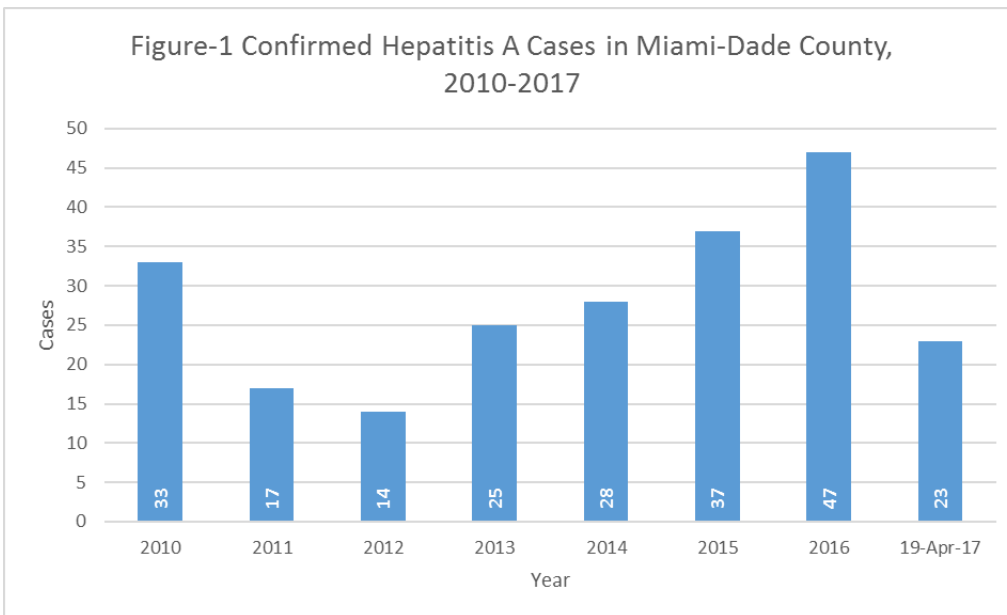
Hepatitis A, certain groups of people are at higher risk, such as those who:

- Travel to or live in countries where Hepatitis A is common
- Are men who have sexual contact with other men
- Live with someone who has Hepatitis A
- Use illegal drugs, whether injected or not
- Have clotting-factor disorders, such as hemophilia
- Have sexual contact with someone who has Hepatitis A

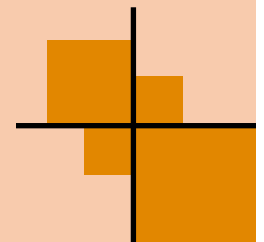
**Prevention:** The best way to prevent Hepatitis A is through vaccination with the Hepatitis A vaccine (2 dose). Vaccination is

recommended for all children, for travelers to certain countries, and for people at high risk for infection with the virus. Frequent hand-washing with soap and warm water after using the bathroom, changing a diaper, or before preparing food can help prevent the spread of Hepatitis A.

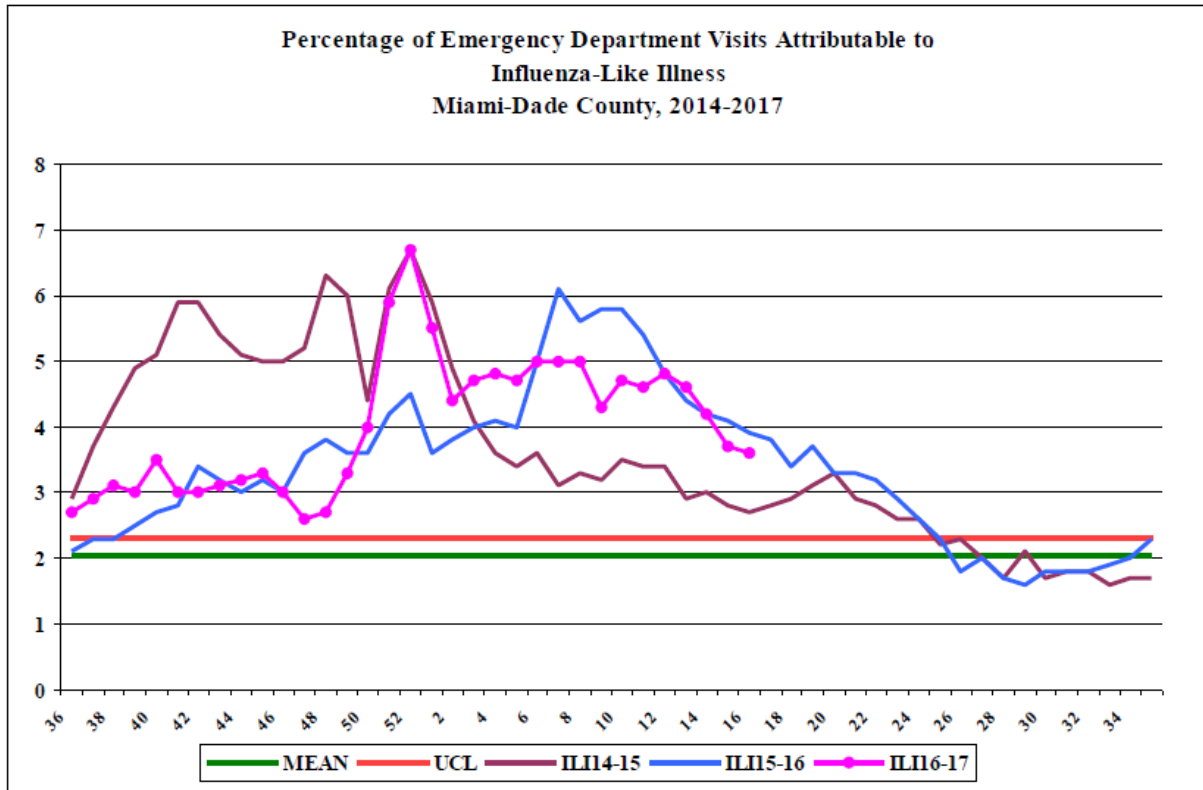
If you or someone you know is interested in getting the Hepatitis A vaccine, please contact the Florida Department of Health in Miami-Dade County, Epidemiology Disease Control and Immunization Services at **305-470-5660**.



**References:** Centers for Disease Control and Prevention. <https://www.cdc.gov/hepatitis/hav/afaq.htm#overview>



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



**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 .....305-575-5430
- 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, please contact Emily Moore at (305) 470-6918.



## Miami-Dade County Monthly Report Select Reportable Disease/Conditions March 2017

Diseases/Conditions	2017 Current Month	2017 Year to Date	2016 Year to Date	2015 Year to Date
<b>HIV/AIDS</b>				
AIDS*	51	116	155	75
HIV	157	348	366	354
<b>STD</b>				
Infectious Syphilis*	33	90	93	74
Chlamydia*	1080	2994	2859	2185
Gonorrhea*	259	691	627	435
<b>TB</b>				
Tuberculosis**	3	15	21	23
<b>Epidemiology, Disease Control &amp; Immunization Services</b>				
<b>Epidemiology</b>				
Campylobacteriosis	49	119	60	89
Chikungunya Fever	0	0	0	6
Ciguatera Poisoning	0	2	0	2
Cryptosporidiosis	1	1	5	4
Cyclosporiasis	0	0	0	0
Dengue Fever	1	1	6	4
Escherichia coli, Shiga Toxin-Producing	12	12	2	3
Encephalitis, West Nile Virus	0	0	0	0
Giardiasis, Acute	16	24	43	49
Influenza Novel Strain	0	0	0	0
Influenza, Pediatric Death	0	0	0	0
Legionellosis	4	9	1	5
Leptospirosis	0	0	0	1
Listeriosis	0	3	0	0
Lyme disease	2	2	0	0
Malaria	1	2	0	0
Meningitis (except aseptic)	2	2	0	0
Meningococcal Disease	1	3	0	0
Salmonella serotype Typhi (Typhoid Fever)	0	0	0	2
Salmonellosis	37	108	101	90
Shigellosis	6	18	22	29
Streptococcus pneumoniae, Drug Resistant	2	4	1	0
Vibriosis	1	2	0	1
West Nile Fever	0	0	0	0
<b>Immunization Preventable Diseases</b>				
Measles	0	0	0	0
Mumps	0	0	2	0
Pertussis	4	9	6	5
Rubella	0	0	0	0
Tetanus	0	0	0	0
Varicella	7	14	26	10
<b>Hepatitis</b>				
Hepatitis A	14	19	4	5
Hepatitis B (Acute)	2	4	1	4
<b>Healthy Homes</b>				
Lead Poisoning	5	21	23	13

\*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.