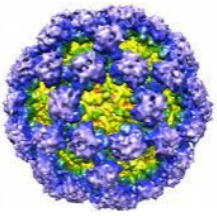
EPI SCOPE

FLORIDA DEPARTMENT OF HEALTH IN SEMINOLE COUNTY EPIDEMIOLOGY NEWSLETTER // APRIL 2021 // ISSUE 1

What's Included?

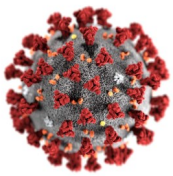
Seminole County Higlights

About 1 in 3 Seminole County residents have received at least one dose of a COVID-19 vaccine.



There were multiple GI illness outbreaks in schools and childcare facilities caused by norovirus in March.

A cluster of rash illness in children was investigated that may have been caused by the white-marked tussock moth caterpillar.



COVID-19 cases are increasing in Seminole County. Visit the COVID-19 dashboard for more info.

Effectiveness of mRNA COVID-19 Vaccines Among Health Care Personnel, First Responders and Other Essential Frontline Workers

A recent CDC study of 3,950 of frontline workers, including healthcare personnel, first responders, and other essential workers, established the efficacy of COVID-19 vaccines under real-world conditions. Those who were fully vaccinated (≥14 days after second dose), were 90% less likely to be infected with SARS-CoV-2. Those with partial immunization (≥14 days after first dose but before second dose) were 80% less likely to be infected. It is important to reduce the risk of transmission among these individuals because the nature of their jobs creates enhanced potential to spread the virus in patient care settings or through frequent close contact with the public.

Study participants spanned six states, including Arizona, Florida, Minnesota, Oregon, Texas and Utah, and had no laboratory evidence of a prior COVID-19 infection. The Pfizer-BioNTech and Moderna vaccines were administered to 62.7% and 29.6% of participants, respectively, with 7.7% receiving an mRNA vaccine product that was still pending verification at the time of the study.

The study period began when the first doses of vaccine were administered (December 14-18, 2020) and ended on March 13, 2021. Over the course of the study, participants were actively monitored for symptoms consistent with COVID-19. These were defined as fever, chills, cough, shortness of breath, sore throat, diarrhea, muscle aches, or loss of smell or taste. Additionally, participants were tested weekly for SARS-CoV-2 using real time PCR methods on nasal swab specimens, regardless of the presence of symptoms. If COVID-19 symptoms did appear, an additional specimen was collected at the onset of illness.

Eight individuals in the study who had been partially vaccinated, and three who had been fully vaccinated, were diagnosed with SARS-CoV-2. Of the total participants, 5.2% were diagnosed with SARS-CoV-2 infection over the course of the study. Participants who were male, Hispanic, first responders, or living in Arizona, Florida, and Texas were at higher risk for infection. Based on these results, the study found that vaccine effectiveness was 90% for those who were fully vaccinated, and 80% for those that were only partially vaccinated.

Per the CDC: "These findings for both Pfizer-BioNTech's and Moderna's mRNA vaccines in real-world conditions demonstrate that current vaccination efforts are resulting in substantial preventive benefits among working-age adults. They reinforce CDC's recommendation of full 2-dose immunization with mRNA vaccines."

RABIES HEALTH ALERT IN HAITI

The Centers for Disease Control and Prevention (CDC) issued a Travelers' Health Alert for all travelers going to Haiti regarding an increasing number of rabid dogs and a shortage of rabies post-exposure prophylaxis (PEP). According to the CDC, Haiti is one of five countries in the Americas where rabies in dogs remains a threat. Haiti leads the Western Hemisphere in human deaths due to rabies infection. In the years following the devastating earthquake in 2010, which impaired Haiti's rabies control program, it's been estimated that two humans died each week from rabies infection.

While rabies is mostly found in wild animals in the United States, dog bites still make up the main source of rabies infection in numerous other countries. Haiti's last nationwide rabies vaccination program for dogs took place in 2018. Due to this gap in vaccination coverage and efforts, the number of rabies positive dogs tested in Haiti rose from 10% from January to June 2020 to 64% from July to November 2020.

In February 2021, CDC learned Haiti was in a general stock-out of rabies PEP, with only a small amount available in Port au Prince. It is estimated that 70,000 – 100,000 Americans either reside in or work in Haiti. The CDC is advising that all Americans who suspect they have been exposed to rabies should evacuate to the United States as soon as possible to initiate PEP. If travelers have initiated PEP in Haiti, they may have received expired vaccine doses. If a traveler returning to the United States has initiated PEP while abroad, an expedited titer check should be considered.

Anyone with plans to travel to Haiti or another high-risk country where PEP is limited should consider receiving rabies pre-exposure vaccine. While this does not replace the need for rabies PEP if exposed to rabies, it may offer partial immunity until PEP can be initiated.

For more information about traveling to areas with elevated rabies activity, please visit the CDC's Travelers' Health—Rabies webpage.

Sources: CDC Travlers' Health: Haiti; CDC Rabies in Haiti; CDC Human Rabies Prevention, ACIP

DECREASE IN BLOOD LEAD LEVEL TESTING IN CHILDREN DURING COVID-19

Over the past few decades, public health has made significant progress in protecting young children from exposure to lead. Since the emergence of COVID-19 in early 2020, however, testing for lead in children has fallen significantly, leaving public health officials concerned and unable to appropriately identify and treat children at the greatest risk of exposure. In February 2021, the Centers for Disease Control and Prevention (CDC) investigated and compared trends in blood lead level (BLL) testing among children less than 6 years of age, and found that routine testing had decreased from the year prior due to the ongoing COVID-19 pandemic.

The CDC gathered and analyzed lead data from 34 state and local health departments (LHDs). The data contained information on BLL testing during January-May 2019 and January-May 2020 among children under the age of 6 years. Researchers found that testing during January-May 2020 had decreased by 34% compared to 2019, with the largest proportional decrease occurring in April 2020. It was estimated that 9,603 children with elevated BLLs were missed because of decreased testing. Health departments have reported difficulty in conducting appropriate and timely follow-up medical and environmental investigations due to constraints associated with COVID-19. CDC has prioritized working with LHDs and other health partners to promulgate strategies for increased testing and appropriate management of care for elevated BLLs in children during the pandemic.

Lead poisoning is a reportable condition per Chapter 64D-3 of the Florida Administrative Code. All practitioners and laboratories are required to report blood lead test results to the Florida Department of Health in Seminole County (DOH-Seminole). For any questions about lead poisoning, contact DOH-Seminole at 407-665-3243 or visit CDC's website.

Sources: CDC Childhood Lead Poisoning Prevention Program; CDC MMWR: Decreases in Young Children Who Received Blood Lead Level Testing During COVID-19 — 34 Jurisdictions, January–May 2020

SEMINOLE COUNTY MONTHLY SURVEILLANCE DATA

Confirmed and probable cases of select notifiable diseases as per 64D-3, Florida Administrative Code

THESE DATA ARE PROVISIONAL AND SUBJECT TO CHANGE

	Seminole Monthly Total		Seminole Year to Month Total		Seminole Annual Totals		
Disease	**March 2021**	**March 2020**	**Seminole**	**Florida**	**2020**	**2019**	**2018**
Vaccine Preventable Diseases							
Measles	0	0	0	0	0	0	0
Mumps	0	0	0	1	0	1	0
Pertussis	0	0	0	11	10	6	4
Varicella	1	1	2	63	18	24	17
CNS Diseases & Bacteremias							
Creutzfeldt-Jakob Disease (CJD)	0	0	0	2	0	1	1
Meningitis (Bacterial, Mycotic)	0	0	0	17	1	2	3
Meningococcal Disease	0	0	0	4	0	0	0
Enteric Diseases							
Campylobacteriosis	4	2	14	719	37	74	59
Cryptosporidiosis	0	0	1	65	3	5	1
Cyclosporiasis	0	0	0	3	6	25	1
***E. coli*, Shiga Toxin-Producing**	19	2	19	88	6	7	9
Giardiasis	1	2	2	125	15	14	18
Hemolytic Uremic Syndrome	0	0	0	3	0	0	0
Listeriosis	0	0	0	9	0	0	0
Salmonellosis	9	1	16	916	57	119	122
Shigellosis	0	1	1	98	12	20	17
Viral Hepatitis							
Hepatitis A	0	0	0	94	10	48	30
Hepatitis B, Acute	1	1	3	164	7	16	17
Hepatitis B in Pregnant Women	0	0	0	71	2	15	4
Hepatitis C, Acute	2	3	4	348	20	15	7
Vectorborne/Zoonoses							
Rabid Animals	0	0	0	19	7	2	1
Rabies, Possible Exposure (Humans)	6	10	18	821	135	180	134
Chikungunya Fever	0	0	0	0	0	0	1
Dengue Fever	0	0	0	7	1	0	0
Eastern Equine Encephalitis	0	0	0	0	0	0	0
Lyme Disease	0	0	0	28	3	4	3
Malaria	0	0	0	2	0	3	4
West Nile Virus	0	0	0	1	0	0	0
Zika Virus	0	0	0	0	0	0	1
Others							
Legionellosis	1	2	2	91	13	7	16
Mercury Poisoning	0	0	0	2	0	0	0
Vibriosis	0	0	0	29	5	2	3

Florida Department of Health in Seminole County

400 W Airport Blvd, Sanford, FL 32773
Phone: 407-665-3000

Donna Walsh, MPA, BSN, RN
Health Officer

Ana Scuteri, MPH
Community & Population Health Director

Sarah Alvarez Wright, MPH, BSN
Executive Community Health Nursing Director

Dr. Meena Joseph, MD
Medical Director

Udgit Mehta, MBA, FCCM
Business & Community Relations Director

Epi Scope Staff

Kevin Baker, MPH, CPH, CHES
Epi Scope Editor
Epidemiology Program Manager

Maria Bermudez, MS
Carley Robinson, MPH, CPH,
Keisha Nauth, MPH
Tara Rao, MS
Tyler Weston, MPH
Taylor Kwiatkowski, MPH
Epidemiology Program Staff & Contributors

Disease Reporting

Epidemiology Program
COVID-19 Phone: 407-665-3000, option 1
Non-COVID-19 Phone: 407-665-3243
Fax: 407-845-6055

Afterhours Urgent Disease Reporting and Consultations
Phone: 407-665-3000, option 1

Tuberculosis Program
Phone: 407-665-3243
Fax: 407-665-3279

STD Program
Phone: 407-665-3384
Fax: 407-845-6134

HIV/AIDS Program
Phone: 407-723-5065

Questions?

Email:
DiseaseControlSeminole@FLHealth.gov

ADDITIONAL INFORMATION AND RESOURCES

Influenza Surveillance

Seminole County has reported an increase in influenza-like illness activity for the first time since the start of the 2020-2021 influenza season. Emergency department, urgent care center and other outpatient health care provider visits during week 14, 2021 are at the highest levels seen this influenza season.

Sporadic cases of influenza are not reportable to the Florida Department of Health in Seminole County unless it is a novel or pandemic strain or an influenza-associated pediatric mortality.

Florida Statewide Weekly Influenza Surveillance Report—Flu Review

CDC U.S. Weekly Influenza Surveillance Report—FluView

Practitioner Resources

Florida Department of Health Practitioner Disease Report Form

Florida COVID-19 Data and Information

Health Alerts and Advisories

- CDC Travel Health Notices
  - *Level 3—Avoid Nonessential Travel*
    - Ebola in Guinea
    - Ebola in Democratic Republic of the Congo
    - Health Infrastructure Breakdown in Venezuela
  - *Level 2—Practice Enhanced Precautions*
    - Polio in Africa and Asia
    - Yellow Fever in Nigeria
- FDA Food Recalls
- Health Alert 442 – Cases of Cerebral Venous Sinus Thrombosis with Thrombocytopenia after Receipt of the Johnson & Johnson COVID-19 Vaccine

Epi Scope Information

The Epi Scope is a monthly newsletter provided at no-cost to consumers to share epidemiological data and trends, public health and health care guidance and current events to Seminole County stakeholders.

To subscribe to the Epi Scope distribution list, please visit the Florida Department of Health in Seminole County Epi Scope webpage.