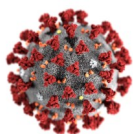


EPI SCOPE

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Seminole County Highlights



COVID-19 case counts have plateaued in Seminole County in recent weeks.



66% of eligible Seminole County residents have received at least one dose of a COVID-19 vaccine.

For more information, view the latest weekly COVID-19 report on the [Florida Department of Health COVID-19 website](#).



Harmful algal bloom (HAB) sightings have been reported in Lake Jesup and Lake Howell, many of which have tested positive for toxins that can be harmful to humans and animals. Learn how to [protect yourself](#) and [your pets](#) from HABs.

National Immunization Awareness Month: Protecting Against Vaccine-Preventable Diseases

August is National Immunization Awareness Month (NIAM), an annual observance to remind the public about the important role vaccinations play in protecting our community from serious vaccine-preventable diseases (VPDs) such as pertussis, hepatitis A, mumps and measles. NIAM is also a great time to raise awareness about the importance of staying up to date on routine vaccinations and to highlight the efforts of healthcare providers in protecting patients of all ages against VPDs.

Over the past 200 years, vaccines have had significant impacts on the quality of life of adults and children. Because of vaccines, diseases that used to be common in the United States like polio have become increasingly rare. Nevertheless, timely and complete vaccination for all VPDs is still important and the best way to prevent against infection. According to the World Health Organization (WHO), immunization prevents 4 to 5 million deaths every year and is considered one of the most successful and cost-effective public health interventions.

In Seminole County, VPD incidence has remained relatively low over the past several years. Only six varicella (chickenpox) cases have been reported from January to July 2021, which is less than half the cases reported last year during the same time period. No other VPDs have been reported year to date in Seminole County.

VPD Incidence in Seminole County, January through July of 2017-2021*

Disease	2017	2018	2019	2020	2021
Hepatitis A	0	3	35	8	0
Pertussis	3	1	4	10	0
Measles	0	0	0	0	0
Mumps	2	0	1	0	0
Varicella/Chickenpox	20	13	12	13	6

Data is provisional. Only confirmed and probable disease case counts are shown.

NIAM is an excellent time for healthcare providers to not only communicate with their patients about the importance of vaccination, but also to protect their patients from serious VPDs. The Centers for Disease Control and Prevention (CDC) strongly encourages healthcare providers to evaluate their patient's vaccine needs and ensure recommended immunizations schedules are followed. Healthcare providers should continue to be a guiding resource for their patients as well as parents by answering questions and keeping up to date on the latest guidelines and recommendations.

For more information on immunizations, visit the Florida Department of Health's (FDOH) [Immunizations webpage](#). Healthcare providers may also visit the CDC's [National Immunization Awareness Month webpage](#) for key messages and educational resources about immunizations and immunization awareness.

For any questions about VPDs or to report a case of a VPD, please contact the Florida Department of Health in Seminole County (DOH-Seminole) Epidemiology Program at 407-665-3243 (if reporting afterhours, call 407-665-3000, option 1).

References: [CDC National Immunization Awareness Month](#); [DOH-Seminole Immunizations](#); [FLHealthCHARTS: Reportable and Infectious Diseases Data](#); [WHO Immunization](#)



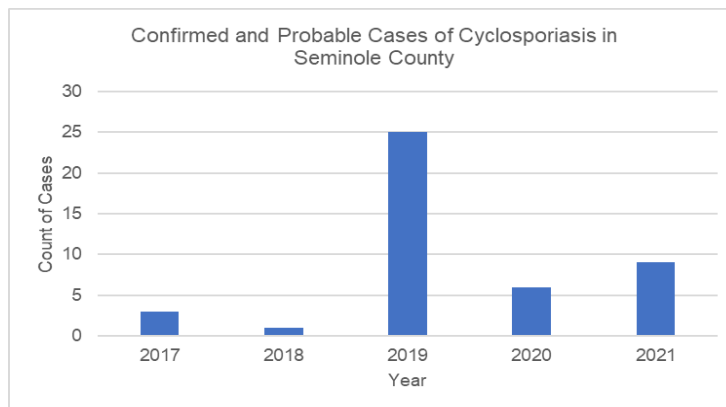
CYCLOSPORIASIS AWARENESS

by Taylor Kwiatkowski, MPH

Cyclosporiasis

Cyclosporiasis (also known as “cyclo”) is an intestinal infection caused by the parasite, *Cyclospora cayetanensis*. Infection with the parasite occurs when an individual ingests food or water which has been contaminated with feces containing the parasite and is not routinely transmitted person to person. Cyclo illness can be characterized by watery, sometimes explosive, diarrhea, loss of appetite, abdominal cramping/pain, weight loss, and fatigue. Some patients may also report vomiting, body aches, and fatigue, while others may remain asymptomatic. Illness may last from a few days to a month or greater, with relapses in symptoms occurring one or more times. Testing for cyclo is most commonly performed via ova and parasite microscopic detection or antigen detection. Recommended treatment for cyclosporiasis is trimethoprim-sulfamethoxazole (Bactrim, Septra, or Cotrim). Ciprofloxacin, while less effective, should be used for patients who are unable to tolerate sulfa drugs.

Cyclosporiasis is most seen during the months of May to August, with Florida reporting approximately 50% of cases between June and July. Seminole county is currently experiencing a busier than normal year, with nine (9) cases reported through July 2021.



Commonly contaminated foods with *C. cayetanensis* include fresh produce such as basil, cilantro, raspberries, and mesclun lettuce. While contamination can occur anytime between when the product was harvested to purchase, there are preventative measures individuals can take, including: properly washing hands, cutting boards, utensils, and countertops before and after handling fruits and vegetables and thoroughly washing all fruits and vegetables and storing them in containers other than what they were purchased in.

Cyclo is reportable by hospitals, laboratories and healthcare providers to the Florida Department of Health in Seminole County (DOH-Seminole) the next business day after a positive lab result is finalized. Contact DOH-Seminole at 407-665-3243 to report a cyclo case or consult with the Epidemiology Program.

Sources: [Guide to Surveillance and Investigation: Cyclosporiasis](#); [Parasites – Cyclosporiasis](#)

PERINATAL HEPATITIS B PREVENTION: PROTECTING FLORIDA’S BABIES

by Carley Robinson, MPH, CPH



Safeguarding the health of Seminole County babies is key for the Florida Department of Health in Seminole County (DOH-Seminole). One service that the Florida Department of Health provides statewide is the Perinatal Hepatitis B Prevention Program (PHBPP), a program dedicated to ensuring that pregnant people who have hepatitis B virus (HBV) infection do not pass the disease to their babies. Infants born to individuals with HBV infection have a 40% chance of developing HBV if prophylaxis is not properly administered. In 2019, a total of 423 pregnant individuals were reported to have HBV in Florida, 15 of which were Seminole residents.

The CDC recommends screening all pregnant individuals for the HBV surface antigen (HBsAg). Babies born to HBV positive individuals should receive immune globulin within 12 hours of birth. The first dose of the HBV vaccine should follow within 24 hours of birth, with the subsequent doses administered at 1 month and 6 months of age. Additionally, a post-vaccine serology titer for the child should be drawn between 9-12 months of age.

The role of DOH-Seminole is to actively identify pregnant HBV positive individuals, provide education and resources to families, and ensure that babies receive HBV prophylaxis and routine vaccination. By working with parents, hospitals, and pediatricians, DOH-Seminole creates access to appropriate care for the Seminole County community.

If you are caring for a patient who has HBV infection and is pregnant, or plans to become pregnant, discuss pediatric HBV immunization as part of their family planning. Contact the DOH-Seminole PHBPP with any questions at 407-665-3243.

This is an official
CDC HEALTH ADVISORY

Distributed via the CDC Health Alert Network
August 26, 2021, 11:40 AM ET
CDCHAN-00449

Rapid Increase in Ivermectin Prescriptions and Reports of Severe Illness Associated with Use of Products Containing Ivermectin to Prevent or Treat COVID-19

Summary

Ivermectin is a U.S. Food and Drug Administration (FDA)-approved prescription medication used to treat certain infections caused by internal and external parasites. When used as prescribed for approved indications, it is generally safe and well tolerated.

During the COVID-19 pandemic, ivermectin dispensing by retail pharmacies has increased, as has use of veterinary formulations available over the counter but not intended for human use. FDA has cautioned about the potential risks of use for prevention or treatment of COVID-19.

Ivermectin is not authorized or approved by FDA for prevention or treatment of COVID-19. The National Institutes of Health's (NIH) COVID-19 Treatment Guidelines Panel has also determined that there are currently insufficient data to recommend ivermectin for treatment of COVID-19. [ClinicalTrials.gov](https://clinicaltrials.gov) has listings of ongoing clinical trials that might provide more information about these hypothesized uses in the future.

Adverse effects associated with ivermectin misuse and overdose are increasing, as shown by a rise in calls to poison control centers reporting overdoses and more people experiencing adverse effects.

Background

The Centers for Disease Control and Prevention (CDC) confirmed with the American Association of Poison Control Centers (AAPCC) that human exposures and adverse effects associated with ivermectin reported to poison control centers have increased in 2021 compared to the pre-pandemic baseline. These reports include increased use of veterinary products not meant for human consumption.

Ivermectin is a medication that is approved by FDA in oral formulations to treat onchocerciasis (river blindness) and intestinal strongyloidiasis. Topical formulations are used to treat head lice and rosacea. Ivermectin is also used in veterinary applications to prevent or treat internal and external parasitic infections in animals. When used in appropriate doses for approved indications, ivermectin is generally well tolerated.

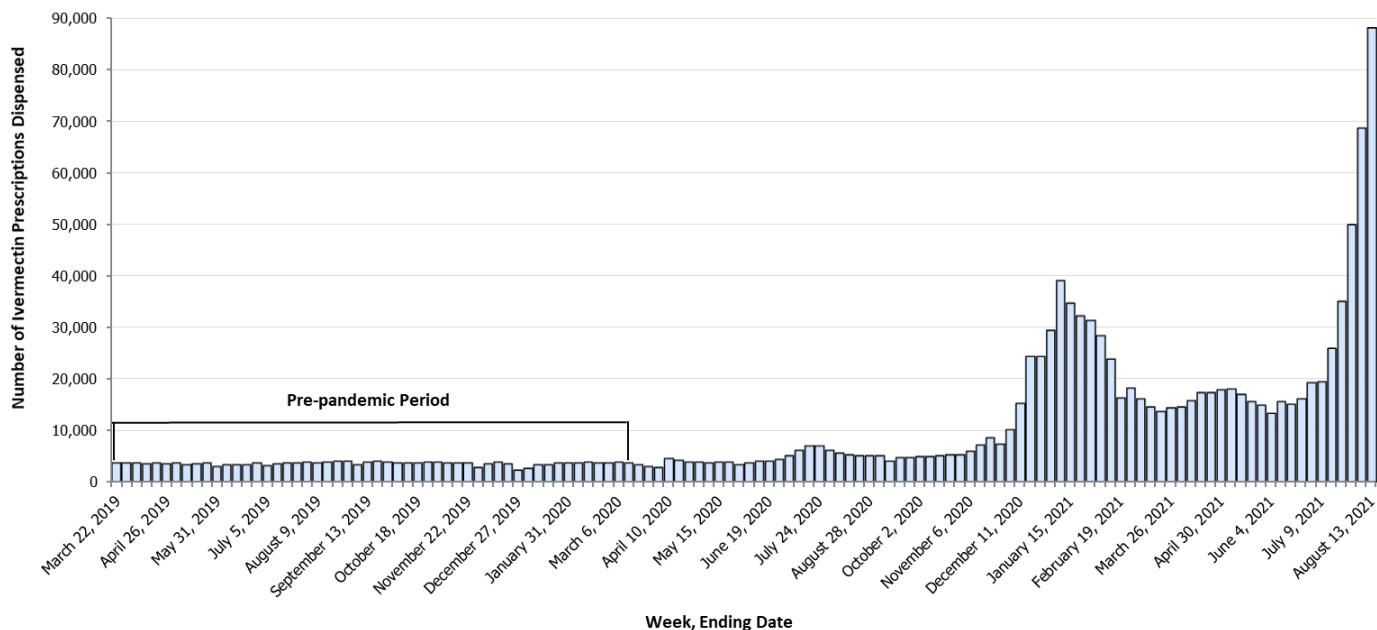
Clinical trials and observational studies to evaluate the use of ivermectin to prevent and treat COVID-19 in humans have yielded insufficient evidence for the NIH COVID-19 Treatment Guidelines Panel to recommend its use. Data from adequately sized, well-designed, and well-conducted clinical trials are needed to provide more specific, evidence-based guidance on the role of ivermectin in the treatment of COVID-19.

A recent study examining trends in ivermectin dispensing from outpatient retail pharmacies in the United States during the COVID-19 pandemic showed an increase from an average of 3,600 prescriptions per week at the pre-pandemic baseline (March 16, 2019–March 13, 2020) to a peak of 39,000 prescriptions in the week ending on January 8, 2021.¹ Since early July 2021, outpatient ivermectin dispensing has again

begun to rapidly increase, reaching more than 88,000 prescriptions in the week ending August 13, 2021. This represents a 24-fold increase from the pre-pandemic baseline. **(Figure)**

Figure: Estimated number of outpatient ivermectin prescriptions dispensed from retail pharmacies — United States, March 16, 2019–August 13, 2021*

*Data are from the IQVIA National Prescription Audit Weekly (NPA Weekly) database. NPA Weekly collects data from a sample of approximately 48,900 U.S. retail pharmacies, representing 92% of all retail prescription activity. Ivermectin dispensed by mail order and long-term care pharmacies, prescriptions by veterinarians, and non-oral formulations were not included.



In 2021, poison control centers across the U.S. received a three-fold increase in the number of calls for human exposures to ivermectin in January 2021 compared to the pre-pandemic baseline. In July 2021, ivermectin calls have continued to sharply increase, to a five-fold increase from baseline. These reports are also associated with increased frequency of adverse effects and emergency department/hospital visits.

In some cases, people have ingested ivermectin-containing products purchased without a prescription, including topical formulations and veterinary products. Veterinary formulations intended for use in large animals such as horses, sheep, and cattle (e.g., “sheep drench,” injection formulations, and “pour-on” products for cattle) can be highly concentrated and result in overdoses when used by humans. Animal products may also contain inactive ingredients that have not been evaluated for use in humans. People who take inappropriately high doses of ivermectin above FDA-recommended dosing may experience toxic effects.

Clinical effects of ivermectin overdose include gastrointestinal symptoms such as nausea, vomiting, and diarrhea. Overdoses are associated with hypotension and neurologic effects such as decreased consciousness, confusion, hallucinations, seizures, coma, and death. Ivermectin may potentiate the effects of other drugs that cause central nervous system depression such as benzodiazepines and barbiturates.

Examples of recent significant adverse effects reported to U.S. poison control centers include the following:

- An adult drank an injectable ivermectin formulation intended for use in cattle in an attempt to prevent COVID-19 infection. This patient presented to a hospital with confusion, drowsiness, visual hallucinations, tachypnea, and tremors. The patient recovered after being hospitalized for nine days.
- An adult patient presented with altered mental status after taking ivermectin tablets of unknown strength purchased on the internet. The patient reportedly took five tablets a day for five days to treat COVID-19. The patient was disoriented and had difficulty answering questions and following commands. Symptoms improved with discontinuation of ivermectin after hospital admission.

Recommendations for Clinicians and Public Health Practitioners

- Be aware that ivermectin is not currently authorized or approved by FDA for treatment of COVID-19. NIH has also determined that there are currently insufficient data to recommend ivermectin for treatment of COVID-19.
- Educate patients about the risks of using ivermectin without a prescription, or ingesting ivermectin formulations that are meant for external use or ivermectin-containing products formulated for veterinary use.
- Advise patients to immediately seek medical treatment if they have taken any ivermectin or ivermectin-containing products and are experiencing symptoms. Signs and symptoms of ivermectin toxicity include gastrointestinal effects (nausea, vomiting, abdominal pain, and diarrhea), headache, blurred vision, dizziness, tachycardia, hypotension, visual hallucinations, altered mental status, confusion, loss of coordination and balance, central nervous system depression, and seizures. Ivermectin may increase sedative effects of other medications such as benzodiazepines and barbiturates. Call the poison control center hotline (1-800-222-1222) for medical management advice.
- Educate patients and the public to get vaccinated against COVID-19. COVID-19 vaccination is safe and the most effective means to prevent infection and protect against severe disease and death from SARS-CoV-2, the virus that causes COVID-19, including the Delta variant.
- Educate patients and the public to use COVID-19 prevention measures including wearing masks in indoor public places, physical distancing by staying at least six feet from other people who don't live in the same household, avoiding crowds and poorly ventilated spaces, and frequent handwashing and use of hand sanitizer that contains at least 60 percent alcohol.

Recommendations for the Public

- Be aware that currently, ivermectin has not been proven as a way to prevent or treat COVID-19.
- Do not swallow ivermectin products that should be used on skin (e.g., lotions and creams) or are not meant for human use, such as veterinary ivermectin products.
- Seek immediate medical attention or call the poison control center hotline (1-800-222-1222) for advice if you have taken ivermectin or a product that contains ivermectin and are having symptoms. Signs and symptoms include gastrointestinal effects (nausea, vomiting, abdominal pain, and diarrhea), headache, blurred vision, dizziness, fast heart rate, and low blood pressure. Other severe nervous system effects have been reported, including tremors, seizures, hallucinations, confusion, loss of coordination and balance, decreased alertness, and coma.
- Get vaccinated against COVID-19. COVID-19 vaccination is approved by FDA and is the safest and most effective way to prevent getting sick and protect against severe disease and death from SARS-CoV-2, the virus that causes COVID-19, including the Delta variant.
- Protect yourself and others from getting sick with COVID-19. In addition to vaccination, wear masks in indoor public places, practice staying at least six feet from other people who don't live in your household, avoid crowds and poorly ventilated spaces, and wash your hands often or use hand sanitizer that has at least 60 percent alcohol.

For More Information

[NIH COVID-19 Treatment Ivermectin Guidelines](#)

[FDA Consumer Alert on Use of Ivermectin to Treat or Prevent COVID-19](#)

[FDA MedWatch Adverse Event Reporting program](#)

[CDC Coronavirus \(COVID-19\) website](#)

[U.S. Government Coronavirus \(COVID-19\) website](#)

[American Association of Poison Control Centers](#)

[Press Release: American College of Medical Toxicology Reports Data on Adverse Effects and Toxicity from Unapproved Use of Ivermectin for the Prevention or Treatment of COVID-19](#)

[Treatments Your Healthcare Provider Might Recommend if You Are Sick](#)

References

1 Lind JN, Lovegrove MC, Geller AI, Uyeki TM, Datta SD, Budnitz DS. [Increase in Outpatient Ivermectin Dispensing in the US During the COVID-19 Pandemic: A Cross-Sectional Analysis](#). J Gen Intern Med. 2021 Jun 18:1–3. doi: 10.1007/s11606-021-06948-6.

The Centers for Disease Control and Prevention (CDC) protects people's health and safety by preventing and controlling diseases and injuries; enhances health decisions by providing credible information on critical health issues; and promotes healthy living through strong partnerships with local, national, and international organizations.

Categories of Health Alert Network messages:

Health Alert Requires immediate action or attention, highest level of importance
Health Advisory May not require immediate action; provides important information for a specific incident or situation
Health Update Unlikely to require immediate action; provides updated information regarding an incident or situation
HAN Info Service Does not require immediate action; provides general public health information

##This message was distributed to state and local health officers, state and local epidemiologists, state and local laboratory directors, public information officers, HAN coordinators, and clinician organizations##

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Ron DeSantis
Governor

Scott A. Rivkees, MD
State Surgeon General

Vision: To be the **Healthiest State** in the Nation

Nationwide Recall of Eco-Gel 200 Due to Bacterial Contamination

August 20, 2021

Dear Colleagues,

As a brief update to the earlier recall notice on contaminated ultrasound gel produced by Eco-Med Pharmaceutical, FDA released a memo informing health care providers, health care facility risk managers, and procurement staff to immediately stop using and discard all ultrasound gels and lotions manufactured by Eco-Med Pharmaceutical, Inc., due to risk of bacterial contamination with *Burkholderia cepacia* complex (Bcc). The FDA's determination is based on concerns that the company did not complete its investigation of the issues, the root cause and extent of bacterial contamination was not identified, and multiple products could be affected by manufacturing issues associated with the company's ultrasound gel (such as inappropriate testing of finished product, inadequate testing of raw materials, and a lack of environmental controls). Eco-Med has shut down all operations and is no longer manufacturing or distributing any products.

The FDA recommends that health care providers and facilities:

- Immediately stop using and discard all ultrasound gel and lotion products manufactured by Eco-Med.
- Do not purchase ultrasound gels or lotions manufactured by Eco-Med.
- Consult Centers for Disease Control and Prevention (CDC) and professional society guidelines regarding use of ultrasound gel and appropriate ultrasound cleaning procedures (see Additional Resources).
- Contact the distributor that supplied these products to you if you have questions about the disposal of the products.
- Report any adverse reactions or quality problems experienced with the use of these products to the [FDA's MedWatch Adverse Event Reporting program](#).

If health care facilities identify infections from *Burkholderia cepacia* complex or *Burkholderia stabilis*, associated with use of Eco-Med Pharmaceutical products, facilities should inform the Florida Department of Health in Seminole County at 407-665-3243 who can then involve the HAI Prevention Program for further investigation and support.

Additional information can be found in the [FDA memo](#) as well as on the [CDC outbreak investigation](#) website. Any questions or concerns can be directed to Dr. Chris Prestel at Christopher.Prestel@flhealth.gov or 813-422-3642.

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.

Disease	Seminole Monthly Total		Year to Date Total		Seminole County Annual Totals		
	July 2021	July 2020	Seminole 2021	Florida 2021	2020	2019	2018
A. Vaccine Preventable							
Measles	0	0	0	0	0	0	0
Mumps	0	0	0	4	0	1	0
Pertussis	0	0	0	31	10	6	4
Varicella	0	0	6	185	18	24	17
B. CNS Diseases & Bacteremias							
Creutzfeldt-Jakob Disease (CJD)	1	0	1	12	0	1	1
Meningitis (Bacterial, Cryptococcal, Mycotic)	0	0	0	43	1	2	3
Meningococcal Disease	0	0	0	11	0	0	0
C. Enteric Infections							
Campylobacteriosis	5	0	28	2294	38	75	59
Cryptosporidiosis	1	1	2	175	4	4	1
Cyclosporiasis	8	0	8	176	6	25	1
<i>E. coli Shiga Toxin (+)</i>	3	0	23	306	6	7	9
Giardiasis	3	3	8	332	16	14	18
Hemolytic Uremic Syndrome (HUS)	0	0	0	3	0	0	0
Listeriosis	0	0	0	25	0	0	0
Salmonellosis	12	7	50	2861	59	120	121
Shigellosis	1	1	3	257	12	22	17
D. Viral Hepatitis							
Hepatitis A	0	2	0	136	10	48	30
Hepatitis B in Pregnant Women	0	0	1	199	2	13	4
Hepatitis B, Acute	0	0	7	275	8	16	16
Hepatitis C, Acute	3	3	12	735	24	15	6
E. Vectorborne/Zoonoses							
Animal Rabies	0	0	0	48	7	2	1
Rabies, possible exposure	3	4	44	2107	135	180	134
Chikungunya Fever	0	0	0	1	0	0	1
Dengue	0	0	0	0	0	5	0
Eastern Equine Encephalitis	0	0	0	0	0	0	0
Lyme Disease	0	0	0	85	3	4	3
Malaria	1	0	2	21	0	3	4
West Nile Virus	0	0	0	1	0	0	0
Zika Virus Disease	0	0	0	0	0	0	1
F. Others							
Chlamydia	134	150	1117	n/a	1745	1994	1978
Gonorrhea	53	60	408	n/a	592	619	646
Hansen's Disease	0	0	0	6	0	0	1
Legionellosis	5	1	9	263	13	8	16
Mercury Poisoning	0	0	0	9	0	0	0
Syphilis, Total	21	19	129	n/a	151	149	132
Syphilis, Infectious (Primary and Secondary)	8	7	45	n/a	51	46	35
Syphilis, Early Latent	7	5	41	n/a	61	55	63
Syphilis, Congenital	0	1	0	n/a	1	0	2
Syphilis, Late Syphilis (Late Latent; Neurosyphilis)	6	6	43	n/a	38	48	32
Tuberculosis	0	0	2	n/a	0	0	0
<i>Vibrio Infections</i>	0	0	1	139	5	2	2

*n/a—Data not available

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Reporting and Consultations**
Phone: 407-665-3000, option 1

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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

Florida Department of Health Websites

[Florida Department of Health](#)

[Florida Department of Health in Seminole County](#)

General Public Health Surveillance & Data Resources

[Florida Statewide Weekly Influenza Surveillance Report—Flu Review](#)

[CDC U.S. Weekly Influenza Surveillance Report—FluView](#)

[Florida Health CHARTS—Public Health Data](#)

[Agency for Health Care Administration Data](#)

COVID-19 Surveillance & Data Resources

[Florida Department of Health—COVID-19 Data and Information](#)

[CDC—U.S. COVID-19 Data](#)

[World Health Organization—Nationwide COVID-19 Data](#)

Practitioner Resources

[Florida Department of Health Practitioner Disease Report Form](#)

[Florida Department of Health—Report Food and Waterborne Illness](#)

Health Alerts and Advisories

- [CDC Travel Health Notices](#)
- [FDA Food Recalls](#)

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](#).

