

EPI SCOPE

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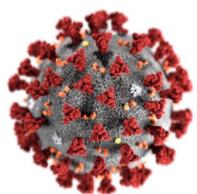
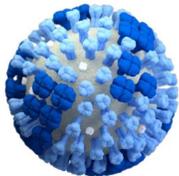
Seminole County Highlights

Of all eligible Seminole County residents, 51% have received at least one dose of a COVID-19 vaccine.



There has been an increase in GI illness caused by [enteric diseases](#) and norovirus.

There has been an increase in influenza and RSV activity, particularly among young children less than 5 years old.



COVID-19 cases are decreasing in Seminole County, when compared to prior months. For more info, visit the [COVID-19 dashboard](#).

May is Hepatitis Awareness Month



Hepatitis Awareness Month is observed annually every May to bring awareness to the burden of viral hepatitis in the United States. Additionally, National Hepatitis Testing Day is observed on May 19th each year to promote knowing one's viral hepatitis status.

According to the CDC, in 2018 there were an estimated 96,800 new viral hepatitis infections in the United States, with 862,000 living with chronic HBV and 2.4 million with chronic HCV in 2016. Providers should be familiar with the clinical presentation, epidemiology, risk factors, treatment and prophylaxis options for the most common types of viral hepatitis seen in the United States: hepatitis A, B and C.

While symptoms are generally undistinguishable between types of viral hepatitis, potential for chronicity, incubation period, mode of transmission, risk factors, testing, treatment, and prophylaxis vary significantly. Some important differences to note are:

- Hepatitis A is spread through the fecal-oral route, hepatitis B is spread primarily via sexual fluid and hepatitis C is primarily transmitted via blood.
- There are vaccines to prevent hepatitis A and B, but not for hepatitis C.
- There is treatment available to those who have chronic hepatitis B or C.

Some recommendations to consider during medical evaluation for viral hepatitis are as follows:

- Order an acute hepatitis panel when the patient is acutely ill with hepatitis symptoms or has another medical indication for an acute infection. Otherwise, a chronic hepatitis panel will suffice for screening purposes.
- Order liver function tests, especially when the case is acutely ill, but also when otherwise medically indicated.
- The hepatitis C antibody (anti-HCV) only indicates that a patient was exposed to hepatitis C. Order a HCV PCR/NAT to confirm active HCV infection.
- If a patient is at high risk for hepatitis A, B or C and susceptible, they can be referred to the Florida Department of Health in Seminole County for no-cost vaccinations and provided referrals for chronic hepatitis B and C treatment at local clinics. Call 407-665-3243 for more information.

For more information about hepatitis A, B and C, visit the following websites:

[CDC—Hepatitis A](#)

[CDC—Hepatitis B](#)

[CDC—Hepatitis C](#)

May 18th is HIV Vaccine Awareness Day (HVAD), also known as World AIDS Vaccine Day. Led by the National Institute of Allergy and Infectious Diseases (NIAID), HVAD is an international day of observance celebrated each year, commemorating the efforts of all researchers, scientists, health professionals, and volunteers who are continuously working together to find a safe and effective preventive HIV vaccine. This is also a day to educate communities across the nation about the importance of continued HIV vaccine research and development.



Initial efforts to develop an HIV vaccine were based on the idea that neutralizing antibodies would be adequate to protect against HIV infection. In 1986, the first phase 1 HIV vaccine trial based on the induction of neutralizing antibodies was carried out in Zaire. Following this promising trial, over 250 clinical trials had been conducted worldwide, most being early-phase trials. The path toward the development of an HIV vaccine later shifted in the early 2000s toward the induction of CD8⁺ T cell responses in the control of HIV infection. Over the next several years, however, multiple setbacks in the HIV vaccine field ensued. The next wave of HIV vaccine development saw its greatest success in a breakthrough 2009 HIV vaccine trial (RV144), which examined the safety and efficacy of a prime-boost combination of two HIV vaccines. Today, researchers are investigating and testing other numerous vaccine development strategies, including harnessing the potential of broadly neutralizing antibodies (bNAbs), exploring the optimization and delivery of antigens, and examining the role of adjuvants and vectors.

While we are closer to having an HIV vaccine now than we were in the mid-1980s, the development of a safe and effective preventive HIV vaccine continues to be a top priority. While recent advancements have been promising, continued HIV vaccine research is key to achieving a durable end to the HIV/AIDS pandemic.

Sources: [What Has 30 Years of HIV Vaccine Research Taught Us?](#); [CDC—HIV Research](#); [HIV Vaccine Awareness Day](#); [NIH Infographic—Progress Toward an HIV Vaccine](#)

STAY SAFE FROM CRYPTO IN RECREATIONAL WATER THIS SUMMER



Summer is coming, which means warm days filled with visits to water parks and swimming in pools, lakes, rivers, and streams. Frequent recreational water exposures increase the likelihood of individuals coming in contact with *Cryptosporidium* (Crypto).

Crypto is a parasite that infects humans via the fecal-oral route. Crypto can be found in soil, food, water, or on surfaces which have been in contact with feces contaminated with Crypto. Crypto can cause symptoms such as watery diarrhea, stomach pain or cramps, nausea, vomiting, dehydration, and sometimes fever. These symptoms can start 2-10 days after exposure and can last 1-2 weeks, with symptom improvement and symptom recurrence prior to complete illness resolution. Patients with weakened immune systems may experience more severe illness.

Crypto has become the most common source of recreational waterborne illness in the United States. It tends to follow a seasonal pattern, with infections typically occurring during the warmer months of the year. Recreational water sources, including water parks, swimming pools, and spas are common sources of infection in Florida. Under the right conditions, Crypto can survive from several weeks to a few months, even in properly chlorinated pools. Crypto outbreaks have occurred and have been associated with recent exposure to recreational water.

It is important to have discussions with patients on practicing good hand hygiene and swimming hygiene as summer approaches. Alcohol-based hand sanitizers are not effective against Crypto, so proper handwashing for 20 seconds with soap and water on a regular basis is the best way to prevent infection. If going to a swimming pool, individuals should shower before entering the pool, take care to not swallow any pool water, and keep those who were sick with diarrhea out of the water until symptoms have been resolved for two weeks. Additionally, they should avoid drinking untreated water, especially from lakes, rivers, springs, or ponds, and thoroughly wash and cook all produce before consumption.

Diagnosis of Crypto requires collection and testing of stool samples. Testing for Crypto is not routinely performed in many labs, therefore providers should specifically request testing for Crypto if suspected. Any positive result for Crypto should be reported to the Florida Department of Health in Seminole County (DOH-Seminole) by the next business day. For any questions or to report a lab result, call the Epidemiology Program at (407) 665-3243.

Sources: [CDC—Crypto](#); [Florida Department of Health—Crypto](#)

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	April 2021	April 2020	Seminole	Florida	2020	2019	2018
Vaccine Preventable Diseases							
Measles	0	0	0	0	0	0	0
Mumps	0	0	0	3	0	1	0
Pertussis	0	3	0	19	10	6	4
Varicella	0	0	2	93	18	24	17
CNS Diseases & Bacteremias							
Creutzfeldt-Jakob Disease (CJD)	0	0	0	3	0	1	1
Meningitis (Bacterial, Mycotic)	0	0	0	22	1	2	3
Meningococcal Disease	0	0	0	6	0	0	0
Enteric Diseases							
Campylobacteriosis	2	0	16	1026	37	74	59
Cryptosporidiosis	0	0	1	88	3	5	1
Cyclosporiasis	0	0	0	3	6	25	1
<i>E. coli</i> , Shiga Toxin-Producing	1	0	20	126	6	7	9
Giardiasis	2	0	4	195	15	14	18
Hemolytic Uremic Syndrome	0	0	0	3	0	0	0
Listeriosis	0	0	0	11	0	0	0
Salmonellosis	8	3	24	1206	57	119	122
Shigellosis	0	0	1	131	12	20	17
Viral Hepatitis							
Hepatitis A	0	3	0	114	10	48	30
Hepatitis B, Acute	0	0	3	202	7	16	17
Hepatitis B in Pregnant Women	0	1	0	89	2	15	4
Hepatitis C, Acute	3	2	6	515	20	15	7
Vectorborne/Zoonoses							
Rabid Animals	0	0	0	24	7	2	1
Rabies, Possible Exposure (Humans)	10	4	28	1102	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	40	3	4	3
Malaria	1	0	1	6	0	3	4
West Nile Virus	0	0	0	1	0	0	0
Zika Virus	0	0	0	0	0	0	1
Others							
Legionellosis	0	1	2	137	13	7	16
Mercury Poisoning	0	0	0	2	0	0	0
Vibriosis	0	0	0	44	5	2	3

Florida Department of Health in Seminole County

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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

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Email:

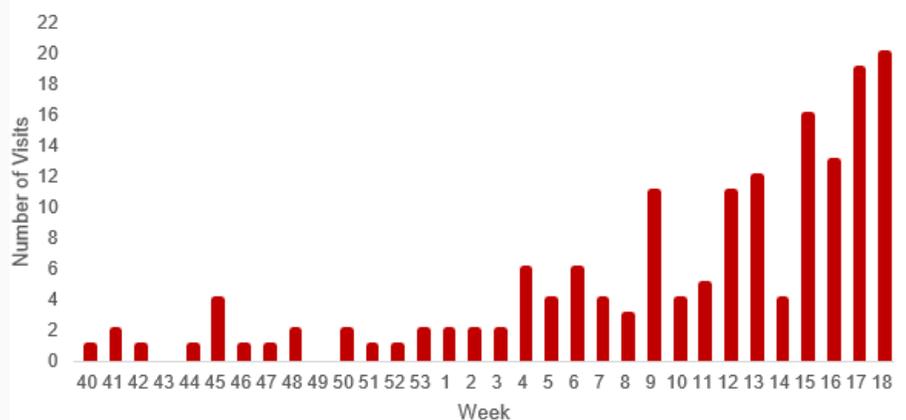
DiseaseControlSeminole@FLHealth.gov

ADDITIONAL INFORMATION AND RESOURCES

Influenza & Acute Respiratory Illness Surveillance

Seminole County continues to experience a late-season increase in influenza and influenza-like illness activity. RSV-related emergency department and urgent care center visits in children under 5 years of age has been increasing since the start of 2021. Sporadic cases of influenza and RSV are not reportable to the Florida Department of Health in Seminole County.

Emergency Department and Urgent Care Center Visits for Children Younger than 5 Years with a Discharge Diagnosis of RSV, Seminole County, FL



[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](#)
- [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](#).

