

# EPIGRAM

PRODUCED BY DISEASE CONTROL SERVICES  
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## INFLUENZA SURVEILLANCE

### County influenza and influenza-like illness (ILI) activity

Nassau County reported mild influenza and ILI activity for week 14 (April 1-7). ILI activity has plateaued in Nassau County and is similar to activity levels in previous seasons at this time. During week 14, 1.56% of emergency department (ED) and urgent care center (UCC) visits by Nassau County residents were for ILI. ILI-related ED and UCC visits by Nassau County residents peaked at 11.69% in week 6 (February 4-10, 2018).

### State influenza and ILI activity

✦ Influenza and ILI activity continued to decrease in week 14 and has returned to normal levels for this time of the flu season. Influenza activity peaked during week 5 (Fig. 1).

ED and UCC visits for ILI by Flu Season

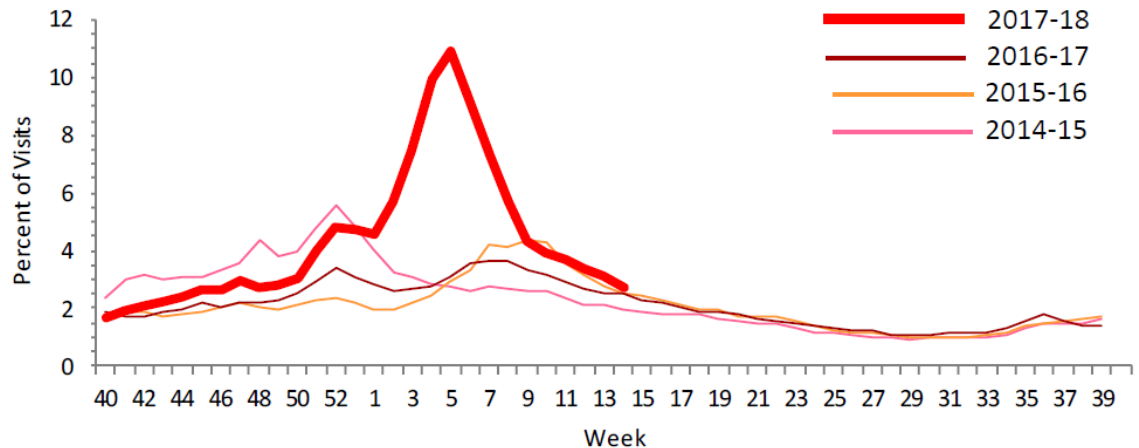


Figure 1. Percent of visits for ILI from ED and UCC chief complaint data for ESSENCE-FL participating facilities (n=310), week 40, 2014 to week 14, 2018. Source: Florida Flu Review, [www.floridahealth.gov/floridafiu](http://www.floridahealth.gov/floridafiu)

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- ✦ One new influenza-associated pediatric death was confirmed in Florida. Eight influenza-associated pediatric deaths have been confirmed so far during the 2017-18 influenza season.
- ✦ Four outbreaks of influenza or ILI were reported in week 14: three with lab confirmation of influenza and one ILI (Fig. 2). As of week 14, 488 outbreaks of influenza and ILI have been reported since the start of the 2017-18 season. More outbreaks have been reported this season than in previous seasons on record. The average number of influenza and ILI outbreaks reported during the last five seasons was 91.

Source: Florida Department of Health. Florida Flu Review.

[www.floridahealth.gov/floridaflu](http://www.floridahealth.gov/floridaflu)

### **National influenza and ILI activity**

- ✦ Overall, influenza A(H3) viruses predominated this flu season. Since early March, influenza B viruses have been more frequently reported than influenza A viruses. The percentage of respiratory specimens testing positive for influenza in clinical laboratories decreased.
- ✦ The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold. Nine influenza-associated pediatric deaths were reported in week 14.
- ✦ A cumulative rate of 101.6 laboratory-confirmed influenza-associated hospitalizations per 100,000 population was reported.
- ✦ The proportion of outpatient visits for ILI was 2.1%, which is below the national baseline of 2.2%. Six of 10 regions reported ILI at or above region-specific baseline levels. In week 14, two states experienced high ILI activity, two experienced moderate ILI activity, 11 experienced low ILI activity, and New York City, the District of Columbia, Puerto Rico, and 35 states reported sporadic activity.

Source: Centers for Disease Control and Prevention. Weekly U.S. Influenza Surveillance Report. <https://www.cdc.gov/flu/weekly/summary.htm>

**Outbreaks by County**

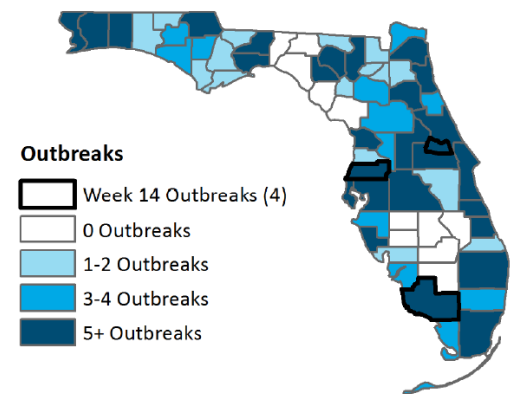


Figure 2. Influenza and ILI outbreaks by county for week 40, 2017 through week 14, 2018.

Source: Florida Flu Review, [www.floridahealth.gov/floridaflu](http://www.floridahealth.gov/floridaflu)

## **OPIOID EPIDEMIC**

The following is a bulletin distributed by the Florida Department of Health Division of Medical Quality Assurance:

In an effort to combat the national opioid epidemic in Florida, in March 2018 Governor Rick Scott signed HB 21 creating new limits on schedule II prescriptions for pain medication. These restrictions do not apply to patients suffering pain from:

- ✦ Cancer
- ✦ terminal illness
- ✦ provision of relief for symptoms related an incurable, progressive illness or injury (chronic nonmalignant pain)
- ✦ palliative care, or
- ✦ serious traumatic injuries.

The law (Section 456.44(3)(d), F.S.) does require that a prescribing practitioner see a patient being treated with controlled substances for chronic nonmalignant pain at least once every three months.

In proposing the 2018 legislation, lawmakers focused attention on preventing addiction through placing opioid prescription limits for patients with acute pain. The law places a three-day limit on opioid prescription for acute pain. However, the practitioner may prescribe up to a 7-day supply if he or she determines it is medically necessary.

**TRAINING OPPORTUNITIES**

✦ The Florida Department of Health Bureau of Epidemiology has developed an infection control training series for registered nurses, licensed practical nurses, certified nursing assistants, and other people who work in infection control in health care settings. This training program is aimed at strengthening infection control and prevention competencies among health care workers in Florida who work in hospitals, nursing homes, and ambulatory care. It covers information and guidance on infection control and prevention in a number of health care settings. One hour of continuing education (0.1 CE) is available for each module. The course is free and can be accessed online on TRAIN Florida (<https://fl.train.org/DesktopShell.aspx>) with course ID 1074807.

✦ The Southeast AIDS Education and Training Center (SE AETC) is an eight state consortium that includes Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee (Fig. 3). The SE AETC is part of a nationwide network of eight regional AETCs founded in 1987 by the Health Resources Services Administration (HRSA) to train healthcare providers and disseminate rapidly changing information about HIV/AIDS. The SE AETC regularly offers webinars on various HIV-related topics, such as PrEP and PEP, oral health, culturally competent care, and telemedicine. The webinars are also archived for online viewing. CME and CNE credits are available. For more information, visit <https://www.seaetc.com/>

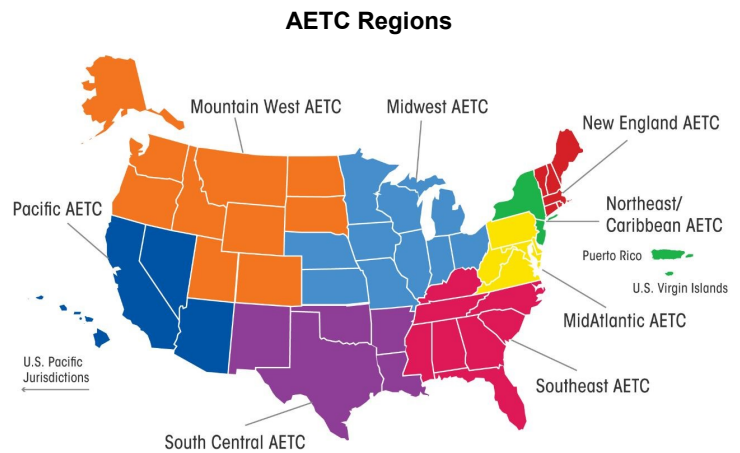


Figure 3. National AIDS Education and Training Center (AETC) regions.

**STD SURVEILLANCE**

**Confirmed, Probable, Suspect Cases of Sexually Transmitted Diseases Reported in First Quarter 2018 with Three-Year Period Comparison for Nassau County**

Disease Name	Selection Date		Comparison Date 1		Comparison Date 2		Comparison Date 3	
	Cases	Percent	Cases	Percent	Cases	Percent	Cases	Percent
<b>NASSAU COUNTY</b>								
Chlamydia	71	87.7%	47	77.0%	40	75.5%	30	75.0%
Gonorrhea	9	11.1%	10	16.4%	11	20.8%	9	22.5%
Syphilis	1	1.2%	4	6.6%	2	3.8%	1	2.5%
<b>TOTAL</b>	<b>81</b>	<b>100.0%</b>	<b>61</b>	<b>100.0%</b>	<b>53</b>	<b>100.0%</b>	<b>40</b>	<b>100.0%</b>
<b>STATEWIDE</b>								
Chlamydia	24405	72.8%	23298	71.3%	22206	73.1%	20448	75.5%
Gonorrhea	7141	21.3%	7218	22.1%	6195	20.4%	5091	18.8%
Syphilis	1969	5.9%	2140	6.6%	1980	6.5%	1559	5.8%
<b>TOTAL</b>	<b>33515</b>	<b>100.0%</b>	<b>32656</b>	<b>100.0%</b>	<b>30381</b>	<b>100.0%</b>	<b>27098</b>	<b>100.0%</b>

Table 1. Confirmed, probable, and suspect case counts for sexually transmitted diseases in Nassau County and Florida, first quarter 2015 through first quarter 2018.

Disease/condition counts from 2016 and before are final. Disease/condition counts for 2017 and 2018 are preliminary and will change.

## NATIONAL INFANT IMMUNIZATION WEEK

The Florida Department of Health recognizes April 21-28 as National Infant Immunization Week (NIIW), an annual observance promoting the benefits of immunizations for children from birth to two years old. NIIW celebrates the milestones achieved in controlling vaccine-preventable diseases among infants worldwide as a result of immunization and provides an opportunity to encourage better communication between parents and health care professionals.



National Infant  
Immunization Week

IMMUNIZATION.  
POWER TO PROTECT.

Image source: <https://www.cdc.gov/vaccines/events/niiw/promotional.html>

### **Health Care Professionals Essential in Easing Parental Concerns about Vaccination**

Parents consider health care professionals one of the most trusted sources in answering questions and addressing concerns about their child's health. A recent survey on parents' attitudes, knowledge, and behaviors regarding vaccines for young children — including vaccine safety and trust — found that 82% of parents cited their child's health care professional as one of their top 3 trusted sources of vaccine information. With so many parents relying on the advice of health care professionals about vaccines, your recommendation plays a key role in guiding parents' vaccination decisions. "How you communicate with parents during routine pediatric visits is critical for fostering parental confidence in the decision to vaccinate their children," said Dr. Nancy Messonnier, CDC's Director of the National Center for Immunization and Respiratory Diseases.

The survey also found that 71 percent of parents were confident or very confident in the safety of routine childhood immunizations, although parents' most common question is what side effects they should look for after vaccination. Twenty-five percent are concerned that children get too many vaccines in one doctor's visit and 16 percent of survey participants are concerned that vaccines may cause autism. "Reinforcing vaccine safety messages can go a long way towards assuring parents that they are doing the best thing for their children," says Patsy Stinchfield, a Pediatric Nurse Practitioner who represents the National Association of Pediatric Nurse Practitioners. "One of the best ways you can establish trust with parents is by asking open-ended questions to help identify and address concerns they may have about vaccines. Also, restate their questions and acknowledge concerns with empathy."

Make sure to address questions or concerns by tailoring responses to the level of detail the parent is looking for. Some parents may be prepared for a fairly high level of detail about vaccines—how they work and the diseases they prevent—while others may be overwhelmed by too much science and may respond better to a personal example of a patient you've seen with a vaccine-preventable disease. A strong recommendation from you can also make parents feel comfortable with their decision to vaccinate. For all parents, it's important to address the risks of the diseases that vaccines prevent. It's also imperative to acknowledge the risks associated with vaccines. Parents are seeking balanced information. Never state that vaccines are risk-free and always discuss the known side effects caused by vaccines.

If a parent chooses not to vaccinate, keep the lines of communication open and revisit their decision at a future visit. Make sure parents are aware of the risks and responsibilities they need to take on, such as informing schools and child care facilities that their child is not immunized, and being careful to stay aware of any disease outbreaks that occur in their communities. If you build a trusting relationship over time with parents, they may reconsider their vaccination decision.

To help communicate about vaccine-preventable diseases, vaccines, and vaccine safety, the Centers for Disease Control and Prevention (CDC), the American Academy of Family Physicians (AAFP), and the American Academy of Pediatrics (AAP) have partnered to develop Provider Resources for Vaccine Conversations with Parents. These materials include vaccine safety information, fact sheets on vaccines and vaccine-preventable diseases, and strategies for successful vaccine conversations with parents. They are free and available online (<https://www.cdc.gov/vaccines/hcp/conversations/index.html>).

Source: Centers for Disease Control and Prevention. Childhood Immunization Drop-In Article for Health and Child Care Professionals. <https://www.cdc.gov/vaccines/partners/childhood/matte-articles-nurses-essential.html>

## MARCH 2018: REPORTED CASES IN NASSAU COUNTY

### Confirmed, Probable, Suspect Cases of Multiple Diseases with Report Date 03/01/18 to 03/31/18 with Three-Year Period Comparison for Nassau County

Disease Name	Selection Date		Comparison Date 1		Comparison Date 2		Comparison Date 3	
	03/01/18-03/31/18		03/01/17-03/31/17		03/01/16-03/31/16		03/01/15-03/31/15	
	Cases	Percent	Cases	Percent	Cases	Percent	Cases	Percent
<b>NASSAU COUNTY</b>								
Campylobacteriosis	0	0.0%	2	15.4%	1	5.3%	0	0.0%
Cryptosporidiosis	0	0.0%	0	0.0%	1	5.3%	0	0.0%
Giardiasis, Acute	0	0.0%	0	0.0%	3	15.8%	0	0.0%
Haemophilus influenzae Invasive Disease	0	0.0%	0	0.0%	0	0.0%	1	9.1%
Hepatitis B, Acute	2	14.3%	0	0.0%	0	0.0%	0	0.0%
Hepatitis B, Chronic	1	7.1%	0	0.0%	0	0.0%	1	9.1%
Hepatitis C, Chronic	4	28.6%	10	76.9%	5	26.3%	6	54.5%
Mumps	1	7.1%	0	0.0%	0	0.0%	0	0.0%
Pertussis	0	0.0%	0	0.0%	5	26.3%	0	0.0%
Rabies, Possible Exposure	2	14.3%	0	0.0%	2	10.5%	1	9.1%
Salmonellosis	2	14.3%	0	0.0%	1	5.3%	0	0.0%
Strep pneumoniae Invasive Disease, Drug-Resistant	1	7.1%	0	0.0%	0	0.0%	2	18.2%
Strep pneumoniae Invasive Disease, Drug-Susceptible	1	7.1%	0	0.0%	1	5.3%	0	0.0%
Vibriosis (Excluding Cholera)	0	0.0%	1	7.7%	0	0.0%	0	0.0%
<b>TOTAL</b>	<b>14</b>	<b>100.0%</b>	<b>13</b>	<b>100.0%</b>	<b>19</b>	<b>100.0%</b>	<b>11</b>	<b>100.0%</b>
<b>STATEWIDE</b>								
Campylobacteriosis	325	6.8%	315	7.1%	270	6.8%	264	6.4%
Cryptosporidiosis	42	0.9%	28	0.7%	35	0.9%	57	1.4%
Giardiasis, Acute	113	2.4%	84	1.9%	89	2.2%	82	2.0%
Haemophilus influenzae Invasive Disease	38	0.8%	29	0.7%	23	0.6%	13	0.3%
Hepatitis B, Acute	67	1.4%	73	1.6%	43	1.1%	45	1.1%
Hepatitis B, Chronic	461	9.7%	480	10.8%	431	10.8%	431	10.5%
Hepatitis C, Chronic	2162	45.5%	2185	49.3%	2020	50.7%	2024	49.3%
Mumps	15	0.3%	6	0.1%	4	0.1%	2	0.0%
Pertussis	18	0.4%	35	0.8%	27	0.7%	33	0.8%
Rabies, Possible Exposure	373	7.9%	294	6.6%	268	6.7%	248	6.0%
Salmonellosis	346	7.3%	277	6.2%	290	7.3%	255	6.2%
Strep pneumoniae Invasive Disease, Drug-Resistant	30	0.6%	26	0.6%	17	0.4%	14	0.3%
Strep pneumoniae Invasive Disease, Drug-Susceptible	42	0.9%	37	0.8%	50	1.3%	38	0.9%
Vibriosis (Excluding Cholera)	13	0.3%	25	0.6%	5	0.1%	6	0.1%
Other remaining conditions in FL (not shared with Nassau County)	703	14.8%	540	12.2%	412	10.3%	592	14.4%
<b>TOTAL</b>	<b>4748</b>	<b>100.0%</b>	<b>4435</b>	<b>100.0%</b>	<b>3984</b>	<b>100.0%</b>	<b>4104</b>	<b>100.0%</b>

Table 2. Confirmed, probable, and suspect case counts for reportable diseases and conditions in Nassau County and Florida, March 2015 through March 2018.

For more information on disease reporting, visit <http://www.floridahealth.gov/diseases-and-conditions/disease-reporting-and-management/index.html>

## HEALTH BULLETINS, ADVISORIES & ALERTS

### March Press Releases & Public Information

For additional information regarding press releases visit the DOH-Nassau website or Department of Health Online Newsroom at: <http://nassau.floridahealth.gov/> and <http://www.floridahealth.gov/newsroom/>

- ✦ Public Service Announcement 03/12/18: Screening of the film “Resilience” on April 5th
- ✦ Press Release 03/14/18: Florida Department of Health in Nassau County Addresses County Health Rankings
- ✦ Press Release 03/26/18: A Message from the Florida Department of Health in Nassau: Public Health Week 2018
- ✦ Press Release 03/29/18: Florida Department of Health in Nassau County Stop the Bleed Program

### Vaccinating on Time is Important for Disease Protection

#### *National Infant Immunization Week 2018*

Parents agree that feeding and sleep schedules are important to help keep their children healthy. The same goes for childhood immunizations. Vaccinating children on time is the best way to protect them against 14 serious and potentially deadly diseases before their second birthday.

“The recommended immunization schedule is designed to protect babies early in life, when they are vulnerable and before it’s likely that they will be exposed to diseases,” said Dr. Nancy Messonnier, Director of the National Center for Immunization and Respiratory Diseases (NCIRD), Centers for Disease Control and Prevention (CDC).

Public health and medical experts base their vaccine recommendations on many factors. They study information about diseases and vaccines very carefully to decide which vaccines kids should get and when they should get them for best protection. Although the number of vaccines a child needs in the first two years may seem like a lot, doctors know a great deal about the human immune system, and they know that a healthy baby’s immune system can handle getting all vaccines when they are recommended. Dr. Messonnier cautions against parents delaying vaccination. “There is no known benefit to delaying vaccination. In fact, it puts babies at risk of getting sick because they are left vulnerable to catch serious diseases during the time they are not protected by vaccines.”

When parents choose not to vaccinate or to follow a delayed schedule, children are left unprotected against diseases that still circulate in this country, like measles and whooping cough. Since 2010, we have seen between 10,000 and 50,000 cases of whooping cough each year in the United States. And, up to 20 babies die from whooping cough each year in the United States. Most whooping cough deaths are among babies who are too young to be protected by their own vaccination. The United States experienced a record number of measles cases during 2014, with 667 cases from 27 states reported to CDC’s NCIRD. This was the greatest number of cases in the U.S. since measles was eliminated in 2000. Staying on track with the immunization schedule ensures that children have the best protection against diseases like these by age 2.

Parents who are concerned about the number of shots given at one time can reduce the number given at a visit by using the flexibility built into the recommended immunization schedule. For example, the third dose of hepatitis B vaccine can be given at 6 through 18 months of age. Parents can work with their child’s healthcare professional to have their child get this dose at any time during that age range.

“I make sure my kids are vaccinated on time,” said Dr. Andrew Kroger, medical officer, NCIRD, and father of two. “Getting children all the vaccines they need by age two is one of the best things parents can do to help keep their children safe and healthy.”

If you have questions about the childhood immunization schedule, talk with your child’s doctor or nurse. For more information about vaccines, go to [www.cdc.gov/vaccines/parents..](http://www.cdc.gov/vaccines/parents..)

Source: Centers for Disease Control and Prevention. Articles for parents/Public. <https://www.cdc.gov/vaccines/partners/childhood/matte-articles-on-time.html>

#### **About National Infant Immunization Week**

The Florida Department of Health, along with CDC, health care professionals, and national immunization partners, recognizes April 21-28 as National Infant Immunization Week (NIIW), an annual observance promoting the benefits of immunizations for children from birth to two years old. NIIW also celebrates the milestones achieved in controlling vaccine-preventable diseases among infants worldwide as a result of immunization.