

# EPIGRAM

PRODUCED BY DISEASE CONTROL SERVICES  
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Health Department**  
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## RABIES ALERT

### Rabies Alert

The Nassau County Health Department (CHD) issued a rabies alert for northwest Nassau County on July 22, 2019. This is in response to an otter that tested positive for rabies.

All residents and visitors in Nassau County should be aware that rabies is present in the wild animal population and domestic animals are at risk if not vaccinated. The public is asked to maintain a heightened awareness that rabies is active in Nassau County. Alerts are designed to increase awareness to the public. Please be aware that rabies activities can also occur outside the alert area.

This rabies alert is for 60 days. The rabies alert includes the following boundaries in Nassau County:

- ✦ St. Mary's River to the North and West,
- ✦ US Hwy 1 to the East,
- ✦ County Road 121 and Tracy Rd. to the South.

An animal with rabies could infect domestic animals that have not been vaccinated against rabies. All domestic animals should be vaccinated against rabies and all wildlife contact should be avoided, particularly raccoons, bats, foxes, skunks, otters, bobcats, and coyotes.

### Rabies Exposure Evaluation and Post-Exposure Prophylaxis

The only treatment for human exposure to rabies is rabies specific immune globulin and rabies immunization. Appropriate treatment started soon after the exposure will protect an exposed person from the disease. When evaluating a patient who has been bitten or scratched by an animal, health care providers should consider the type of wound, the type of animal, and the animal's current status to determine whether rabies post-exposure prophylaxis (PEP) is warranted (Fig. 1). All possible rabies exposures must be reported as per Florida Administrative Code Chapter 64D-3 to your local county health department, regardless of treatment provided. If there are any questions or concerns about whether PEP is recommended for a patient, please contact Nassau CHD for consultation.

All rabies PEP should begin with immediate thorough cleansing of all wounds with soap and water. If

#### DISEASE REPORTING

Phone  
(904) 875-6100

Confidential Fax Line  
(904) 428-5630

After Hours Line  
(904) 813-6801

Bureau of Epidemiology  
24 Hour Reporting Line  
(850) 245-4401

#### NASSAU COUNTY HEALTH DEPARTMENT CONTACTS

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#### NASSAU COUNTY HEALTH DEPARTMENT LOCATIONS

Fernandina Beach Clinic  
1620 Nectarine Street  
Fernandina Beach, FL 32034  
(904) 557-9130

Yulee Clinic  
86014 Pages Dairy Road  
Yulee, FL 32097  
(904) 875-6110

Callahan Clinic  
45377 Mickler Street  
Callahan, FL 32011  
(904) 320-6010

Hilliard Clinic  
37203 Pecan Street  
Hilliard, FL 32046  
(904) 320-6020

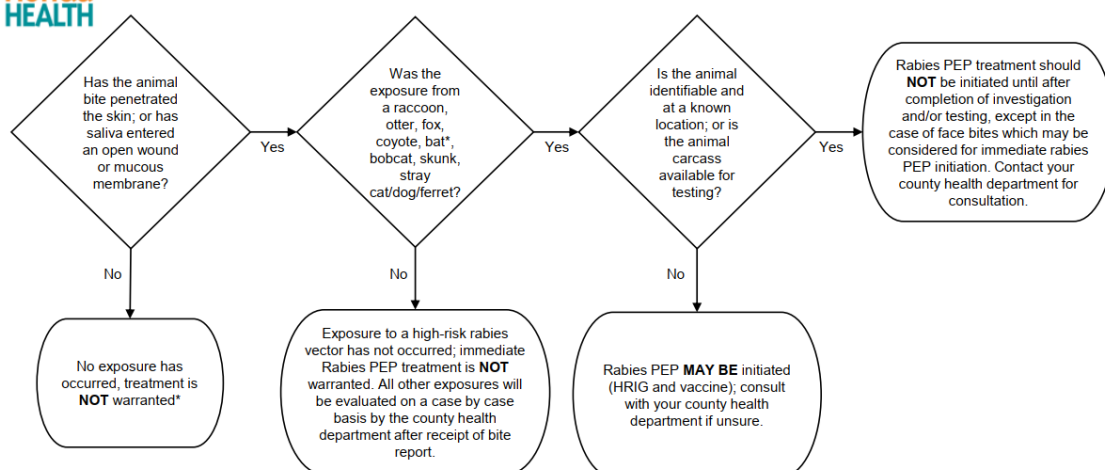


available, a viricidal agent such as a povidone-iodine solution should be used to irrigate the wounds. Patient tetanus vaccination status should also be determined.

The rabies PEP regimens provided (Table 1) are applicable for all age groups, including children, and pregnant women. Vaccine should never be administered in the gluteal area or near the human rabies immunoglobulin (HRIG) administration site. Day 0 is the day the first dose of vaccine is given, not the day the bite occurred. In cases that unexpected, extended delays in administering rabies PEP have occurred (i.e. patient delay in seeking medical care) up to one year following the exposure, PEP should be administered as soon as possible if the patient is not demonstrating signs of encephalitis. In cases that delay is greater than one year from the exposure or that the patient is demonstrating signs of encephalitis, please consult with your county health department. If rabies PEP is not administered according to the recommended schedule, please consult with Nassau CHD to determine the appropriate schedule for completing the series. Possible rabies exposures should be reported to Nassau CHD by phone immediately upon initial suspicion at 904-875-6100.



### Decision Tree for Health Care Providers



\* Bat bites may be difficult to see. Please contact your county health department for consultation on suspected bat bite exposures.

Figure 1. Rabies PEP decision tree for healthcare providers.

#### Administration Schedule for Persons Previously Vaccinated in the U.S. since 1982

Product	Route	Site	Dose	# Doses	Schedule
Rabies Vaccine	IM	Deltoid	1.0mL	2	Days 0 and 3

#### Administration Schedule for Persons Not Previously Vaccinated

Product	Route	Site	Dose	# Doses	Schedule
Human Rabies Immune Globulin	Infiltrate wound	Wound, if feasible; distant from vaccine (deltoid or quadriceps)	20 IU/kg or 9 IU/lb (0.06mL/lb)	1	Day 0
Rabies Vaccine	IM	Deltoid (or anterolateral thigh for	1.0mL	4	Days 0, 3, 7, and 14
Rabies Vaccine for immunosuppressed people	IM	Deltoid (or anterolateral thigh for small children)	1.0mL	5	Days 0, 3, 7, 14, and 28 with titer

Table 1. Rabies PEP guidelines. Details can be found in:

CDC. Use of a Reduced (4-Dose) Vaccine Schedule for Post-exposure Prophylaxis to Prevent Human Rabies Recommendations of the Advisory Committee on Immunization Practices.

MMWR 2010;59(RR-2):1-9.

CDC. Humans Rabies Prevention - United States, 2008 Recommendations of the Advisory Committee on Immunization Practices. MMWR Early Release 2008;57:1-28.

## ARBOVIRUS SURVEILLANCE

**Nassau County**

So far in 2019, three sentinel chickens have tested positive for Eastern equine encephalitis virus (EEEV). The positive samples were collected on June 21st and July 13th. All Nassau County sentinel chicken samples submitted to the Bureau of Public Health Laboratories (BPHL) in 2019 have tested negative for West Nile virus (WNV) and St. Louis encephalitis virus (SLEV). No human or veterinary cases of mosquito-borne illness have been reported in Nassau County in 2019.

**Florida<sup>1</sup>**

No cases of endemic arboviruses have been reported in Florida so far in 2019. One case of locally-acquired dengue fever has been reported Miami-Dade County, with onset in March. International travel-associated cases of dengue fever, chikungunya fever, Zika fever, and malaria have been reported in 2019 (Table 2). Seven counties (Bay, Calhoun, DeSoto, Holmes, Orange, Suwannee, and Walton) are currently under a mosquito-borne illness advisory (Fig. 2).

**Arbovirus Reporting**

Non-endemic viruses must be reported immediately upon suspicion (yellow fever) or immediately upon suspicion during business hours (Zika, dengue, chikungunya). Other mosquito-borne diseases endemic to Florida, such as West Nile virus disease, Eastern equine encephalitis, and St. Louis encephalitis, are reportable by the next business day. Prompt reporting of suspect cases helps ensure health department and mosquito control officials are able to rapidly implement mosquito control measures.

<sup>1</sup>Florida Department of Health. Florida Arbovirus Surveillance. <http://www.floridahealth.gov/diseases-and-conditions/mosquito-borne-diseases/index.html>.

**Human Mosquito-Borne Illness Cases**

Disease	Cases
West Nile virus (WNV) infection	0
St. Louis encephalitis virus (SLEV) infection	0
Eastern equine encephalitis virus (EEEV) infection	0
International travel-associated dengue fever cases	58
Dengue fever cases acquired in Florida	1
International travel-associated chikungunya fever cases	4
Chikungunya fever cases acquired in Florida	0
International travel-associated Zika fever cases	28
Zika fever cases acquired in Florida	0
International travel-associated malaria cases	28

Table 2. Human cases of mosquito-borne illness reported in Florida, January 1–July 27, 2019<sup>1</sup>.

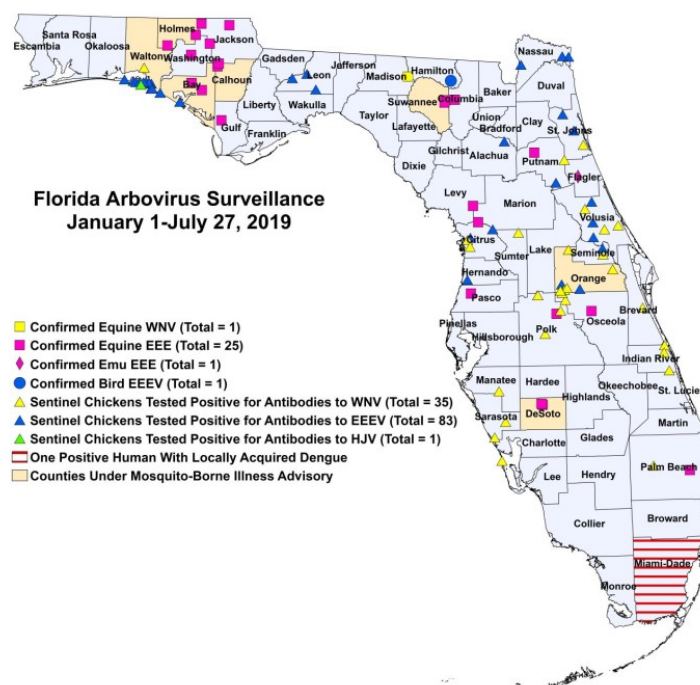


Figure 2. Arbovirus activity in Florida, January 1-July 27, 2019<sup>1</sup>.

## UPCOMING EVENTS &amp; TRAININGS

The Coalition for the Reduction/Elimination of Disparities in Health (CREED) will host the annual back to school event in partnership with the Nassau County Health Department (Nassau CHD) and other local organizations on Saturday, August 3rd. The event will be from 9am-2pm at the Peck Center (516 S. 10th St., Fernandina Beach). Free school physicals will be available at the event and school supplies will be given away in the gymnasium starting at 10am. A parent or guardian must accompany the child for the school physical.

## HEPATITIS A UPDATE

**Nassau County**

Two cases of hepatitis A were reported in Nassau County in July 2019. These are the first hepatitis A cases reported in Nassau County since 2005. Both individuals reported risk factors consistent with the current outbreak in Florida. Nassau CHD continues to offer hepatitis A vaccine to under- and uninsured individuals who are at risk for hepatitis A.

**Florida Outbreak Update<sup>2,3</sup>**

From January 1, 2018 through July 27, 2019, there were 2,582 hepatitis A cases reported in Florida. Nearly all (98%) have likely been acquired in Florida. In week 30 (July 21-27), 53 cases were reported in Florida, with the highest activity

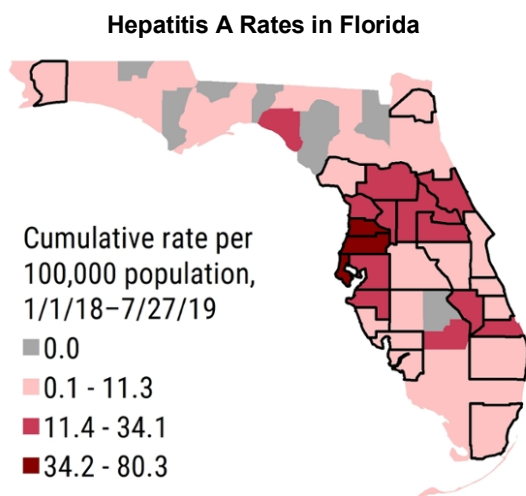


Figure 3. Cumulative hepatitis A rates in Florida by county. The 53 hepatitis A cases reported in week 30 were reported in the counties outlined in black.<sup>2</sup>

Risk Factor	Percent of Cases
Any drug use	56%
Injection drug use	36%
Non-injection drug use	36%
Recent homelessness	20%
Men who have sex with men	6%

Table 3. Risk factors reported by hepatitis A cases likely acquired in Florida, Jan. 2018 to June 2019.<sup>3</sup>

levels in central Florida (Fig. 3). Of the 2,220 cases likely acquired in Florida from January 2018 through June 2019, 61% reported at least one risk factor while 39% reported no or unknown risk factors. **The most commonly identified risk factor was any drug use, reported by over half of cases** (Table 3). Since January 2018, 72% of hepatitis A cases likely acquired in Florida have been hospitalized due to their hepatitis A infection, and 28 cases have died as a direct result of hepatitis A infection.

**Prevention**

Hepatitis A virus (HAV) spreads person-to-person from ingesting small amounts of fecal matter from a person with HAV. Sexual activity can spread HAV, so people who have hepatitis A should avoid sexual contact. HAV can live on surfaces for weeks, and alcohol-based hand sanitizers do not kill HAV. Everyone should be reminded to wash hands with soap and warm water for at least 20 seconds before they prepare food or work with food that isn't already packaged, and after they use the restroom, change a diaper, or cough, sneeze or use a handkerchief or tissue. Towels, toothbrushes and eating utensils should not be shared, and food, drinks, drugs and cigarettes that have been handled by a person with HAV should not be handled by others. To disinfect surfaces that may have been contaminated with HAV, mix 1 and 2/3 cups bleach in one gallon of water. Allow one minute of contact time on the surface being disinfected, then rinse with water. Discard any unused diluted mixtures. Wear gloves and protect clothing while cleaning, and use chemicals in well-ventilated areas.

The most effective way to prevent HAV is through vaccination. At-risk people are those who are in close contact, care for or live with someone who has HAV; use injection or non-injection drugs; are homeless or in temporary housing; have recently been incarcerated; are men who have had sex with other men; have recently visited a country where HAV is common; or are having sex with someone who has HAV. **Providers are encouraged to actively offer the hepatitis A vaccine to those at risk. Please refer under- and uninsured patients who cannot access the vaccine through their primary care provider to Nassau CHD for screening for a free hepatitis A vaccine.** For more information on hepatitis A call the information line, Monday-Friday 8am-5pm, toll free at 1-844-CALL-DOH (844-225-5364) or email [HepA@flhealth.gov](mailto:HepA@flhealth.gov).

<sup>2</sup>Florida Department of Health. Hepatitis A Surveillance January 1, 2019-July 27, 2019. [http://www.floridahealth.gov/diseases-and-conditions/vaccine-preventable-disease/hepatitis-a/surveillance-data/\\_documents/2019-week-30-hep-a-summary.pdf](http://www.floridahealth.gov/diseases-and-conditions/vaccine-preventable-disease/hepatitis-a/surveillance-data/_documents/2019-week-30-hep-a-summary.pdf)

<sup>3</sup>Florida Department of Health. Hepatitis A Surveillance June 2019. [http://www.floridahealth.gov/diseases-and-conditions/vaccine-preventable-disease/hepatitis-a/surveillance-data/\\_documents/2019-june-hepatitis-a-summary.pdf](http://www.floridahealth.gov/diseases-and-conditions/vaccine-preventable-disease/hepatitis-a/surveillance-data/_documents/2019-june-hepatitis-a-summary.pdf)

## JUNE 2019: REPORTED CASES IN NASSAU COUNTY

## Confirmed, Probable, and Suspect Cases of Reportable Diseases of Frequent Occurrence with Report Date 06/01/19 to 06/30/19 with Three-Year Period Comparison for Nassau County and Florida

	Nassau County		Florida	
	June 2019	June Average, 2016-2018	June 2019	June Average, 2016-2018
Arsenic Poisoning	0	0.00	2	2.67
Campylobacteriosis	2	3.33	411	429.00
Carbon Monoxide Poisoning	0	0.00	28	24.67
Chlamydia (Excluding Neonatal Conjunctivitis)	14	17.33	8530	8321.00
Ciguatera Fish Poisoning	0	0.00	9	5.33
Creutzfeldt-Jakob Disease (CJD)	0	0.33	1	1.00
Cryptosporidiosis	0	0.33	38	33.67
Cyclosporiasis	0	0.00	9	11.00
Dengue Fever	0	0.00	16	2.33
Ehrlichiosis	1	0.00	9	6.00
<i>Escherichia coli</i> , Shiga Toxin-Producing (STEC) Infection	0	0.33	103	69.33
Giardiasis, Acute	0	1.00	84	92.67
Gonorrhea (Excluding Neonatal Conjunctivitis)	6	5.67	2786	2698.33
<i>Haemophilus influenzae</i> (Invasive Disease in Children <5 Years Old)	0	0.00	3	3.00
Hepatitis A	0	0.00	362	21.00
Hepatitis B, Acute	0	0.33	85	65.00
Hepatitis B, Chronic	1	1.00	422	412.33
Hepatitis B, Pregnant Women	0	0.00	59	35.67
Hepatitis C, Acute	0	0.00	113	38.00
Hepatitis C, Chronic (Including Perinatal)	11	11.33	1770	2557.67
Lead Poisoning Cases in Children <6 Years Old	0	0.00	93	131.33
Lead Poisoning Cases in Those ≥6 Years Old	0	0.00	78	119.67
Legionellosis	0	0.00	60	43.33
Listeriosis	0	0.00	7	3.67
Lyme Disease	0	0.00	8	13.00
Malaria	0	0.00	3	6.33
Meningitis, Bacterial or Mycotic (Excluding <i>Neisseria meningitidis</i> )	0	0.00	12	8.67
Pertussis	0	0.00	42	35.33
Pesticide-Related Illness and Injury, Acute	0	0.00	3	2.00
Rabies, Animal	0	0.00	8	8.67
Rabies, Possible Exposure	3	0.00	409	326.00
Salmonellosis	2	4.00	666	655.67
Shigellosis	1	0.33	136	137.00
<i>Streptococcus pneumoniae</i> Invasive Disease, Drug-Resistant	0	0.00	13	18.67
<i>Streptococcus pneumoniae</i> Invasive Disease, Drug-Susceptible	0	0.00	49	28.33
Syphilis (Excluding Congenital)	0	0.33	429	679.00
Syphilis, Congenital	0	0.00	7	6.67
Varicella (Chickenpox)	1	0.33	86	60.00
Vibriosis (Excluding Cholera)	0	0.33	27	24.00
Zika Virus Disease and Infection	0	0.00	7	39.00

Table 4. Confirmed, probable, and suspect case counts for reportable diseases and conditions in Nassau County and Florida in June 2019 with three-year period comparison for Nassau County and Florida.



## HEALTH BULLETINS, ADVISORIES & ALERTS

### June 2019 Press Releases & Public Information

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

- ✦ Press Release 06/13/2019: World Elder Abuse Awareness Day
- ✦ Press Release 06/20/2019: Nassau County Health Department Reminds the Public of Precautions to Help Prevent Vector-borne Disease
- ✦ Press Release 06/24/2019: Florida Department of Health in Nassau County Promotes: Take the Reins on Fatherhood!
- ✦ Press Release 06/26/2019: Nassau County Health Department Recognizes HIV Testing Day

### FREE SCHOOL PHYSICALS

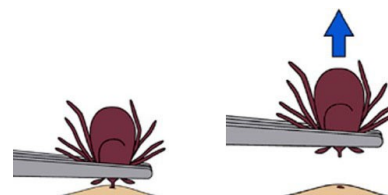
The Coalition for the Reduction/Elimination of Disparities in Health (CREED) will host the annual back to school event in partnership with the Nassau County Health Department (Nassau CHD), St Vincent's Mobile Health Ministry, and other local organizations on Saturday, August 3rd. The event will be from 9am-2pm at the Peck Center (516 S. 10th St., Fernandina Beach). Free school physicals will be available at the event and school supplies will be given away in the gymnasium starting at 10am. A parent or guardian must accompany the child for the school physical.



### Preventing Tick-Borne Illness

Ticks are most active in the warmer months (April –September) so don't forget to take preventive measures against ticks. Avoid wooded and brushy areas and walk in the center of trails. Use repellents that contain 20 to 30% DEET on exposed skin and clothing. Use products that contain permethrin to treat clothing and gear. If you find a tick attached to your skin, follow these steps to remove it:

1. Use fine-tipped tweezers to grasp the tick as close to the surface of the skin as possible.
2. Pull upwards with steady, even pressure. Do not twist or jerk the tick. If the tick's mouth-parts break off and remain in the skin, remove the mouth-parts with tweezers. If you are unable to remove the mouth-parts with tweezers, leave it alone and let the skin heal.
3. Thoroughly clean the area of the bite and your hands with rubbing alcohol, an iodine scrub, or soap and water.
4. Dispose of live ticks by submerging in alcohol, placing in a sealed bag/container, wrapping tightly in tape, or flushing down the toilet. Do not crush a live tick with your fingers.



How to remove a tick with tweezers

If you develop a rash or fever within several weeks of removing a tick, see your doctor and tell them about your recent tick bite. For more information, visit <https://www.cdc.gov/ticks/index.html>